		WHATCOM COUNTY CONTRACT INFORMATION SHEET			Whatcom County Contract No. 202304013 – 5				
			2023	<u>304013 – 5</u>					
Originating Department:				85 Health					
Division/Program: (i.e. Dept. Division and Program) Contract or Grant Administrator:				Response Systems Division					
				Malora Christensen North Sound Behavioral Health Administrative Services Organization, LLC					
Contractor's / Agency	Name:			North So	uno Benavioral Hea	aith Adm	Inistrati	ve Services (
Is this a New Contrac					I to an Existing Cor				Yes 🖂 🛛 No 🗖
Yes 🗌 🛛 No 🖸	If Ar	mendment or Re	enewal,	(per WCC	3.08.100 (a)) Ori	ginal Co	ontract #	#:	202304013
Does contract require	e Council Appr	roval? Ye	s 🖂	No 🗆	If No, include W	CC:			
Already approved? (Council Approv	ved Date:			(Exclusions see: What	itcom Coui	nty Codes	s 3.06.010, 3.08.	.090 and 3.08.100)
Is this a grant agreen	nent?	lf yes, grantor a	aonavia	ontract	North Sound F				
Yes X No		number(s):	yency c				93.959		
Is this contract grant		number(3).			Whatcom Oot		20		55.555
Yes No		If yes, Whatcon	n Count	v grant cont	ract number(s).				
			- ooung						////
Is this contract the re-	sult of a RFP of	or Bid process?							is / 10008588 & Block Grant / 18538510-
									vices / 18538520-Co-
									ance use Disorder Prof /
Yes 🗌 🛛 No 🛛	🛛 🛛 If yes, F	RFP and Bid nun	nber(s):	Cont	tract Cost Center:			ator Coordinat	
Is this agreement exc	luded from E-	Verify?	No 🗆	Yes 🗆					
If YES, indicate exclus				· –					
Professional ser		ent for certified	license	d professio	nal				
Contract work is					Contract for C	Commer	ial off th	ne shelf items	(COTS)
Contract work is		•			Work related s				1 1
□ Interlocal Agreem					Public Works				
Contract Amount:(sum	1	· · · · ·					0 /		wards exceeding \$40,000
any prior amendments		ntiact amount an							se greater than \$10,000 c
\$ 2,920,840	/•			10% of contract amount, whichever is greater, except when:					
This Amendment Amo	unt:		1.	1. Exercising an option contained in a contract previously approved by the council.					
\$ 206,191			2.						
Total Amended Amour	nt:		3.	approved by council in a capital budget appropriation ordinance. B. Bid or award is for supplies.					
\$ 3,127,031			4.		nt is included in Exhi	bit "B" of t	he Budg	et Ordinance	
			5.	5. Contract is for manufacturer's technical support and hardware maintenance of electronic					
				systems and/or technical support and software maintenance from the developer of					
Cummon of Cooper Th	proprietary software currently used by Whatcom County. Summary of Scope: This amendment provides adds various funding through 06/30/2025, adds definitions, and updates insurance requirements.								
		•	inous tur			ueinition			ance requirements.
Term of Contract:		, auto renewals	Thar	Expiration	Date:		Until	terminated	12/18/2024
Contract Routing:	uting: 1. Prepared by: J. Thomson 2. Attorney signoff: Christopher Quinn			Date: Date:	1/13/2025				
3. AS Finance reviewed: BBennett			Date:	12/30/2024					
4. IT reviewed (if IT related):				nicu			Date:		
5. Contractor approved:					Date:				
6. Executive Contract Review:					Date:				
7. Council approved (if necessary):		ary):	AB2025-076		Date:				
8. Executive signed:							Date:		
9. Original to Council:							Date:		
	s. enginario							- 410.	

NORTH SOUND BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES ORGANIZATION, LLC (NORTH SOUND BH-ASO) CONTRACT AMENDMENT 5

CONTRACT #NORTH SOUND BH-ASO-WHATCOM COUNTY-ICN-23

Based on the Agreement of the parties to the above-referenced Contract between the North Sound Behavioral Health Administrative Services Organization, LLC (North Sound BH-ASO) and Whatcom County (Provider) dated April 13, 2023, (as amended by North Sound BH-ASO and Provider September 11, 2024, collectively the "Contract") is hereby amended as follows:

The purpose of this amendment is to provide funding for January 1, 2025 to June 30, 2025 (Dedicated Cannabis Account, Jail Services Program, and Trueblood Programming:

By mutual agreement of the parties, the following language is added to the agreement:

• Add the following new definition to *Article 1 – Definitions*:

"Mental Health Care Provider" means an individual working in a Behavioral Health Agency, under the supervision of a Mental Health Professional, who has primary responsibility for implementing an individualized plan for mental health rehabilitation services. To provide services as a Mental Health Care Provider, this person must be a registered agency affiliated counselor and have a minimum of one year education or experience in mental health or related fields.

Replace 7.17 Insurance, which reads "North Sound BH-ASO certifies it is a member of Washington Governmental Risk Pool for all exposure to tort liability, general liability, property damage liability and vehicle liability, if applicable, as provided by RCW 43.19. By the date of execution of this Contract and post 15 days renewal of said contract, the Provider shall procure and maintain insurance for the duration of this Contract, Provider shall carry Commercial General Liability (CGL) Insurance to include coverage for bodily injury, property damage, and contractual liability, with the following minimum limits: Each Occurrence - \$1,000,000; General Aggregate - \$3,000,000; shall include liability arising out of premises, operations, independent contractors, personal injury, advertising injury, and liability assumed under an insured contract. The costs of such insurance shall be paid by the Provider or subcontractor. The Provider may furnish separate certificates of insurance and policy endorsements for each subcontractor as evidence of compliance with the insurance requirements of this Contract. The Provider is responsible for ensuring compliance with all of the insurance requirements stated herein. Failure by the Provider, its agents, employees, officers, subcontractors, providers, and/or provider subcontractors to comply with the insurance requirements stated herein shall constitute a material breach of this Contract. All non-risk pool policies shall name North Sound BH-ASO as a covered entity under said policy(s)." with the following:

"North Sound BH-ASO certifies it is a member of Washington Governmental Risk Pool for all exposure to tort liability, general liability, property damage liability and vehicle liability, if applicable, as provided by RCW 43.19. By the date of execution of this Contract and post 15 days renewal of said contract, the Provider shall procure and maintain insurance for the duration of this Contract, Provider shall carry Commercial General Liability (CGL) Insurance to include coverage for bodily injury, property damage, and contractual liability, with the following minimum limits: Each Occurrence - \$2,000,000; General Aggregate - \$4,000,000; shall include liability arising out of premises, operations, independent contractors, personal injury, advertising injury, and liability assumed under an insured contract. The costs of such insurance shall be paid by the Provider or subcontractor. The Provider may furnish separate certificates of insurance and policy endorsements for each subcontractor as evidence of compliance with the insurance requirements of this Contract. The Provider is responsible for ensuring compliance with all of the insurance requirements stated herein. Failure by the Provider, its agents, employees, officers, subcontractors, providers, and/or provider subcontractors to comply with the insurance requirements stated herein shall constitute a material breach of this Contract. All non-risk pool policies shall name North Sound BH-ASO as a covered entity under said policy(s)."

• **Replace** *Exhibit E(d)* - *Whatcom County_Budget_ICN_24* with *Exhibit E(e)* - *Whatcom County_ICN_Budget*

ALL TERMS AND CONDITIONS OF CONTRACT SHALL REMAIN IN FULL FORCE AND EFFECT.

THIS AMENDMENT IS EXECUTED BY THE PERSONS SIGNING BELOW, WHO WARRANT THAT THEY HAVE THE AUTHORITY TO EXECUTE THIS AMENDMENT.

THIS AMENDMENT SHALL BECOME EFFECTIVE ON THE DATE OF FINAL SIGNATURE BY THE PARTIES.

NORTH SOUND BH-ASO, LLC

WHATCOM COUNTY

12/13/24

JanRose Ottaway Martin Executive Director Date

Satpal Sidhu County Executive Date

PROGRAM APPROVAL:

Malora Christensen, Response Systems Manager

DEPARTMENT HEAD APPROVAL:

Erika Lautenbach, Health and Community Services Director

APPROVAL AS TO FORM:

Christopher Quinn, Chief Civil Deputy Prosecutor

Date

Date

Date

CONTRACTOR INFORMATION:

North Sound Behavioral Health Administrative Services Organization 2021 E College Way, Suite 101 Mt Vernon, WA 98273 800-684-3555

North Sound Behavioral Health Administrative Services Organization Dedicated Cannabis Account Program Cost Reimbursement Budget Whatcom County Human Services Six Month Budget January 1, 2025 to June 30, 2025				
Revenues	S			
Dedicated Cannabis Account Funding Total	\$ \$	41,719.00 41,719.00		
Expenses	5			
Dedicated Cannabis Account Total	\$ \$	41,719.00 41,719.00		
Budget Amount Expenses	\$	41,719.00		
Balance	\$	41,719.00		

North Sound Behavioral Health Administrative Services Organization Jail Services Program Cost Reimbursement Budget Whatcom County Human Services			
Six Month Budget January 1, 2025	to June (30, 2025	
Revenues			
Jail Services Funding *One Time Additional (1/1/2025-6/30/2025) Total	\$ \$ \$	42,583.19 101,896.00 144,479.19	
Expenses		,	
Jail Services	\$	144,479.19	
Total	\$	144,479.19	
Budget Amount Expenses	\$	144,479.19 -	
Balance	\$	144,479.19	

*Less funds already spent

North Sound Behavioral Health Administrative Services Organization Substance Abuse Block Grant CFDA 93.959 Cost Reimbursement Budget Whatcom County Human Services Annual Budget July 1, 2024 to June 30, 2025				
Revenues				
SABG Total	\$ \$	406,228.00 406,228.00		
Expenses				
Opiate Outreach Services	\$	406,228.00		
Total	\$	406,228.00		
Budget Amount Expenses	\$	406,228.00		
Balance	\$	406,228.00		

North Sound Behavioral Health Administrative Services Organization Trueblood Program Cost Reimbursement Budget Whatcom County Human Services Six Month Budget January 1, 2025 to June 30, 2025					
Revenues					
Trueblood Funding Total	\$ \$	19,992.91 19,992.91			
Expenses					
Trueblood Expenses Total	\$ \$	19,992.91 19,992.91			
Budget Amount Expenses Balance	\$ 	19,992.91 - 19,992.91			

North Sound Behavioral Health Administrative Services Organization Co-Responder Cost Reimbursement Budget Whatcom County Human Services Annual Budget July 1, 2024 to June 30, 2025					
Revenues					
MHBG Funds	\$	221,486.00			
SABG Funds	\$	211,272.00			
Total	\$	432,758.00			
Ex	Expenses				
Co-Responder Expense	\$	432,758.00			
Total	\$	432,758.00			
Budget Amount Expenses	\$	432,758.00			
Balance	\$	432,758.00			

North Sound Behavioral Health Administrative Services Organization Naloxone Vending Machine Cost Reimbursement Budget Whatcom County Human Services Annual Budget July 1, 2024 to June 30, 2025					
Revenues					
SABG ARPA	<u>\$</u>	50,000.00			
Total	\$	50,000.00			
	Expenses				
Naloxone	\$ \$	50,000.00			
Total	\$	50,000.00			
Budget Amount Expenses	\$	50,000.00			
Balance	\$	50,000.00			

North Sound Behavioral Health Administrative Services Organization Substance Use Disorder Professional Cost Reimbursement Budget Whatcom County Human Services Annual Budget July 1, 2024 to June 30, 2025					
Revenues					
13b Proviso Funds Total	\$ \$	100,000.00 100,000.00			
	Expenses				
SUD Professional Total	\$ \$	100,000.00 100,000.00			
Budget Amount Expenses	\$	100,000.00			
Balance	\$	100,000.00			

North Sound Behavioral Health Administrative Services Organization Recovery Navigator Coordinator Cost Reimbursement Budget Whatcom County Human Services Annual Budget July 1, 2024 to June 30, 2025			
Reven	ues		
13b Proviso Funds Total	\$ \$	127,000.00 127,000.00	
Expen	ses		
Recovery Navigator Coordinator Total	\$ \$	127,000.00 127,000.00	
Budget Amount Expenses	\$	127,000.00	
Balance	\$	127,000.00	