

April 10, 2025

BCC Agenda Date/Item: \_\_\_\_\_

Board of County Commissioners  
 Clackamas County

**Approval of Amendment #11 increasing funding from an Intergovernmental Agreement with the Oregon Health Authority for the financing of Community Mental Health, Addiction Treatment, Recovery & Prevention, and Problem Gambling Services. Amendment adds \$40,483.37 for six months, Agreement value is increased to \$17,509,981.22 for eighteen months. Funding through Oregon Health Authority. No County General Funds are involved.**

<b>Previous Board Action/Review</b>	Agreement March 7, 2024, Agenda Item 20240307 I.C.1; Amendment #01 April 18, 2024, Agenda Item 20240418 III.D.4; Amendment #02 May 2, 2024, Agenda Item 20240502 I.E.2; Amendment #03 August 8, 2024, Agenda Item 20240808 III.D.10; Amendment #04 July 25, 2024, Agenda Item 20240725 III.F.19; Amendment #05 July 25, 2024, Agenda Item 20240725 III.F.20; Amendment #06 September 12, 2024, Agenda Item 20240912 I.C.6; Amendment #07 September 19, 2024, Agenda Item 20240919 II.D.1; Amendment #08 November 27, 2024, Agenda Item 20241127 I.D.5; Amendment #09 January 9, 2025, Agenda Item 20250109 III.D.3; Amendment #10 March 6, 2025, Agenda Item 20250306 III.D.7		
<b>Performance Clackamas</b>	Ensuring safe, healthy and secure communities through the provision of mental health and substance use services.		
<b>Counsel Review</b>	Yes	<b>Procurement Review</b>	No
<b>Contact Person</b>	Elise Thompson	<b>Contact Phone</b>	503-742-5353

**EXECUTIVE SUMMARY:** The Behavioral Health Division of the Health, Housing and Human Services Department requests approval of Amendment #11 to the 2024-25 Intergovernmental Agreement #44300-00026004 with the State of Oregon, acting by and through its Oregon Health Authority (OHA) for the financing and operation of Community Mental Health, Addiction Treatment, Recovery & Prevention Services and Problem Gambling programs in Clackamas County. The Board of Commissioners is the Local Mental Health Authority for Clackamas County that operates a Community Mental Health Program (CMHP) funded by this Agreement. The Behavioral Health Division ensures that the funds are administered according to the terms set forth by this Agreement and all amendments to provide local administration, behavioral health and addiction services to Clackamas County.

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Amendment #11 adds \$40,483.37 provided through Service Element MHS 04, Aid and Assist Client Services, for housing-related needs, including rental assistance, eviction protection, and utility assistance for Aid and Assist clients.

The funds added through Amendment #11 increases the maximum agreement value to \$17,509,981.22.

**RECOMMENDATION:** Staff respectfully requests that the Board of County Commissioners approve this Amendment #11 (11455) and authorize Chair Roberts to sign on behalf of Clackamas County.

Respectfully submitted,

A handwritten signature in cursive script that reads "Mary Rumbaugh".

Mary Rumbaugh  
Director of Health, Housing and Human Services

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**AGREEMENT # PO-44300-00026004**

**ELEVENTH AMENDMENT TO  
OREGON HEALTH AUTHORITY  
2024-2025 INTERGOVERNMENTAL AGREEMENT  
FOR THE FINANCING OF COMMUNITY MENTAL HEALTH, ADDICTION TREATMENT,  
RECOVERY, & PREVENTION, AND PROBLEM GAMBLING SERVICES**

This **Eleventh** Amendment to Oregon Health Authority 2024-2025 Intergovernmental Agreement for the Financing of Community Mental Health, Addiction Treatment, Recovery, & Prevention, and Problem Gambling Services effective as of January 1, 2024 (as amended, the “Agreement”), is entered into, as of the date of the last signature hereto, by and between the State of Oregon acting by and through its Oregon Health Authority (“OHA”) and **Clackamas County** (“County”).

**RECITALS**

WHEREAS, OHA and County wish to modify the Financial Assistance Award set forth in Exhibit C of the Agreement.

NOW, THEREFORE, in consideration of the premises, covenants and agreements contained herein and other good and valuable consideration the receipt and sufficiency of which is hereby acknowledged, the parties hereto agree as follows:

**AGREEMENT**

1. The financial and service information in the Financial Assistance Award is hereby amended as described in Attachment 1 attached hereto and incorporated herein by this reference. Attachment 1 must be read in conjunction with the portion of Exhibit C of the Agreement that describes the effect of an amendment of the financial and service information.
2. Capitalized words and phrases used but not defined herein shall have the meanings ascribed thereto in the Agreement.
3. County represents and warrants to OHA that the representations and warranties of County set forth in section 4 of Exhibit F of the Agreement are true and correct on the date hereof with the same effect as if made on the date hereof.
4. Except as amended hereby, all terms and conditions of the Agreement remain in full force and effect.
5. This Amendment may be executed in any number of counterparts, all of which when taken together shall constitute one agreement binding on all parties, notwithstanding that all parties are not signatories to the same counterpart. Each copy of this Amendment so executed shall constitute an original.

IN WITNESS WHEREOF, the parties hereto have executed this amendment as of the dates set forth below their respective signatures.

**6. Signatures.**

**Clackamas County**

**By:**

_____	_____	_____	_____
Authorized Signature	Printed Name	Title	Date

**State of Oregon, acting by and through its Oregon Health Authority**

**By:**

_____	_____	_____	_____
Authorized Signature	Printed Name	Title	Date

**Approved by: Director, OHA Health Systems Division**

**By:**

_____	_____	_____	_____
Authorized Signature	Printed Name	Title	Date

**Approved for Legal Sufficiency:**

Exempt per OAR 137-045-0050(2)

_____	_____
Oregon Department of Justice	Date

**ATTACHMENT 1**

**EXHIBIT C  
Financial Pages**

MODIFICATION INPUT REVIEW REPORT

MOD#: M1052

CONTRACT#: 026004

CONTRACTOR: CLACKAMAS COUNTY

INPUT CHECKED BY: \_\_\_\_\_ DATE CHECKED: \_\_\_\_\_

SE#	FUND	PROJ	CPMS PROVIDER	EFFECTIVE DATES	SLOT CHANGE/TYPE	RATE	OPERATING DOLLARS	STARTUP PART DOLLARS ABC	PART IV	PAAF CD	BASE	CLIENT CODE	SP#
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FISCAL YEAR: 2024-2025

4	804	AAP		1/1/2025 - 6/30/2025	0 /NA	\$0.00	\$40,483.37	\$0.00	A	1	N		
TOTAL FOR SE# 4							<u>\$40,483.37</u>	<u>\$0.00</u>					
TOTAL FOR 2024-2025							<u>\$40,483.37</u>	<u>\$0.00</u>					
TOTAL FOR M1052 026004							<u>\$40,483.37</u>	<u>\$0.00</u>					

OREGON HEALTH AUTHORITY  
Financial Assistance Award Amendment (FAAA)

CONTRACTOR: CLACKAMAS COUNTY

Contract#: 026004

DATE: 03/12/2025

REF#: 015

REASON FOR FAAA (for information only):

Aid and Assist Client Services (MHS 04) funds have been awarded to cover housing related needs beginning January 1, 2025. County must complete and submit a monthly Flex Funding CMHP Reporting Template that was provided to CMHPs by Behavioral Health program staff to HSD.Contracts@odhsoha.oregon.gov by the last day of the month following the reporting period. OHA will review this report to determine whether funds are spent in accordance with eligible expense listed on the reporting form such as rental assistance, eviction protection and utility assistance.