

Richard Swift Director

January 25, 2018

Board of County Commissioners Clackamas County

Members of the Board:

Approval of Amendment #1 to an Agency Services Contract with ColumbiaCare Services, Inc. for Residential Treatment Services

Purpose/Outcomes	This contractor provides mental health residential treatment services to		
	Clackamas County residents.		
Dollar Amount and	Contract maximum is being increased by \$208,194.48 bringing the		
Fiscal Impact	contract maximum to \$4,174,934.64		
Funding Source	State of Oregon (CMHP). No County General Funds are involved.		
Duration	Effective upon signature and terminates on June 30, 2019		
Previous Board Action	Approval of original Agency Services Contract was approved on August		
	24, 2017.		
Strategic Plan	1. Individuals and families in need are healthy and safe.		
Alignment	2. Ensure safe, healthy and secure communities.		
Contact Person	Mary Rumbaugh, Director – Behavioral Health Division (503) 742-5305		
Contract No.	#8202_01		

BACKGROUND:

The Behavioral Health Division of the Health, Housing & Human Services Department requests the approval of Amendment #1 to Agency Services Contract with ColumbiaCare Services, Inc. for Residential Treatment Services to residents of Clackamas County. The Behavioral Health Division has contracted with ColumbiaCare Services, Inc. since March 2012 for Residential Treatment services. This is a continuation of those services.

The contract is effective upon signature and continues through June 30, 2019. This amendment increases the contract by \$208,194.48 for a maximum value of \$4,174,934.64. This amendment reflects the changes to the Behavioral Health's Community Mental Health (CMHP) Agreement with the State of Oregon.

County Counsel reviewed and approved this Amendment on December 27, 2017.

RECOMMENDATION:

Staff recommends the Board approval of this contract and authorizes Richard Swift, H3S Director to sign on behalf of Clackamas County.

Respectfully submitted,

Richard Swift, Director Health, Housing & Human Services Department

Contract Amendment Health, Housing and Human Services Department

H3S Contract Number: 8202		Board Agenda Number: <u>082417-A7</u>		
		and date: <u>08/24/17</u>		
Division: Beha	avioral Health	Amendment No. 1		
Contractor: Co	olumbiaCare Services, Inc.			
Amendment F	Requested By: Mary Rumbaugh, Director	<u>or</u>		
Changes:	Scope of ServicesContract Term	☑ Contract Budget/Compensation☑ Other		

Justification for Amendment:

This contract provides residential treatment services to clients living within multiple residential treatment facilities operated by ColumbiaCare Services, Inc.

This amendment reflects the changes to Behavioral Health's Community Mental Health (CMHP) Agreement, through Amendment #1 and Amendment #2, from the State of Oregon:

- Fieldstone has a reduction in funding due to a client vacating the facility.
- **Johnson Creek** has a temporary rate increase for one client.
- Kellogg Creek is receiving funding for two clients.
 Additionally, Kellogg Creek is being funded for six slots for Rent Subsidy (MHS 20) and Service Payments (MHS 28) instead of three (per the original CMHP agreement).

Compensation is increased by \$208,194.48 bringing the maximum compensation for this contract to \$4,174,934.64. This amendment is effective upon signature and continues through June 30, 2019.

Except as amended hereby, all other terms and conditions of the contract remain in full force and effect. The County has identified the changes with "bold/italic" font for easy reference.

add of Columbia Agent Page

ColumbiaCare Services, Inc.

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AMEND: 3.1 Compensation

3.1 <u>Compensation</u>. COUNTY shall compensate AGENCY as specified in Exhibit C: Compensation. The payment shall be full compensation for work performed, for services rendered, and for all labor, materials, supplies, equipment, mileage, and incidentals necessary to perform the work and services.

Maximum Contract payment shall not exceed \$3,966,740.16.

TO READ:

3.1 <u>Compensation</u>. COUNTY shall compensate AGENCY as specified in Exhibit C: Compensation. The payment shall be full compensation for work performed, for services rendered, and for all labor, materials, supplies, equipment, mileage, and incidentals necessary to perform the work and services.

Maximum Contract payment shall not exceed \$4,174,934.64.

AMEND: Exhibit C - Compensation

AGENCY shall be compensated by the Oregon Health Authority or COUNTY for satisfactorily performing the services as specified in Exhibit B, Scope of Work.

Maximum contract value not to exceed \$3,966,740.16.

TO READ:

AGENCY shall be compensated by the Oregon Health Authority or COUNTY for satisfactorily performing the services as specified in Exhibit B, Scope of Work.

Maximum contract value not to exceed \$4,174,934.64.

AMEND: Exhibit C - Method of Payment

AGENCY will submit itemized invoices by the **15**th day of the month following the month services were performed. The invoice shall include contract number **# 8116**, dates and locations of Services for each Individual, Letter of Intent (LOI) numbers when applicable, and any additional information required to adequately track, report, and pay for client care and services related to this Contract.

TO READ:

AGENCY will submit itemized invoices by the <u>10th</u> day of the month following the month services were performed. The invoice shall include contract number <u># 8202</u>, dates and locations of Services for each Individual, Letter of Intent (LOI) numbers when applicable, and any additional information required to adequately track, report, and pay for client care and services related to this Contract.

ColumbiaCare Services, Inc.

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AMEND: Exhibit C - Rate Charts

COLUMBIACARE SERVICES, INC Contract #8202 2017-2018 RESIDENTIAL SERVICES RATES

Location	# of Slots	Type of Payment	Service Element	Rate per month	Total Amount
Alder Creek	6	Service Payment	MHS 28	\$2,530.37	\$182,186.64
Bridgestone	5	Rent Subsidy	MHS 20	\$383.92	\$23,035.20
Fieldstone	5	Rent Subsidy Service Payment	MHS 20 MHS 28	\$402.16 \$4,350.75	\$24,129.60 \$261,045.00
	ESTLAN	Service Payment	MHS 28	\$236.31	\$2,835.72
Johnson Creek	8	Rent Subsidy Service Payment	MHS 20 MHS 28	\$725.17 \$3,290.96	\$69,616.32 \$315,935.16
Kellogg Creek	3	Rent Subsidy Service Payment	MHS 20 MHS 28	\$293.70 \$5,489.48	\$10,573.20 \$197,621.28
Mossy Meadows	1	Rent Subsidy	MHS 20	\$1,130.44	\$13,565.28
Autumn Ridge	4	Service Payment Rent Subsidy	MHS 28	\$26,486.84 \$767.10	\$317,840.76 \$36,820.80
		Service Payment	MHS 28	\$11,003.44 MHS 20 Total	\$528,165.12
				MHS 28 Total	\$177,740.40 <u>\$1,805,629.68</u>
			Total Contract Amo	unt:	\$1,983,370.08

2018-2019 RESIDENTIAL SERVICES RATES

Location	# of Slots	Type of Payment	Service Element	Rate per month	Total Amount
Alder Creek	6	Service Payment	MHS 28	\$2,530.37	\$182,186.6
Bridgestone	5	Rent Subsidy	MHS 20	\$383.92	\$23,035.2
Fieldstone	5	Rent Subsidy	MHS 20	\$402.16	\$24,129.6
		Service Payment	MHS 28	\$4,350.75	\$261,045.0
	ESTLAN	Service Payment	MHS 28	\$236.31	\$2,835.7
Johnson Creek	8	Rent Subsidy	MHS 20	\$725.17	\$69,616.3
		Service Payment	MHS 28	\$3,290.96	\$315,935.1
Kellogg Creek	3	Rent Subsidy	MHS 20	\$293.70	\$10,573.2
		Service Payment	MHS 28	\$5,489.48	\$197,621.2
Mossy Meadows	1	Rent Subsidy	MHS 20	\$1,130.44	\$13,565.28
		Service Payment	MHS 28	\$26,486.84	\$317,840.76
Autumn Ridge	4	Rent Subsidy	MHS 20	\$767.10	\$36,820.80
		Service Payment	MHS 28	\$11,003.44	\$528,165.12
				MHS 20 Total	\$177,740.40
				MHS 28 Total	\$1,805,629.68
			Total Contract Amo	unt:	\$1,983,370.08

TO READ:

2017-2018 RESIDENTIAL SERVICES RATES

Location	# of Slots or Individual	Type of Payment & Details	Service Element	Rate per month	Total Amount
Alder Creek	6	Service Payment	MHS 28	\$2,530.37	\$182,186.64
Bridgestone	5	Rent Subsidy	MHS 20	\$383.92	\$23,035.20
Fieldstone	5	Rent Subsidy	MHS 20	\$402.16	\$24,129.60
		Service Payment	MHS 28	\$4,350.75	\$261,045.00
	ESTLAN	Service Payment	MHS 28	\$236.31	\$2,835.72
	ESTLAN	Service Payment	MHS 28	-\$236.31	-\$2,835.72
Johnson Creek	8	Rent Subsidy	MHS 20	\$725.17	\$69,616.32
		Service Payment	MHS 28	\$3,290.96	\$315,935.16
	ITTAN	RSCP (650323) 7/1/17-7/19/17	MHS 28	\$3,290.96	\$2,017.04
	ITTAN	SRTF 7/1/17-7/19/17	MHS 28	-\$3,290.96	-\$2,017.04
	ITTAN	RSCP (650323) 7/1/17-7/19/17	MHS 28	\$6,144.00	\$3,765.68
Kellogg Creek	6	Rent Subsidy	MHS 20	\$293.70	\$21,146.40
		Service Payment	MHS 28	\$5,489.48	\$395,242.56
	ILLYAN	SRTF (781219) 7/1/17-6/30/18	MHS 28	\$1,287.60	\$15,451.20
	OPEEYN	RTF (781219) 7/1/17-6/30/18	MHS 28	\$2,457.60	\$29,491.20
Mossy Meadows	1	Rent Subsidy	MHS 20	\$1,130.44	\$13,565.28
		Service Payment	MHS 28	\$26,486.84	\$317,840.76
Autumn Ridge	4	Rent Subsidy	MHS 20	\$767.10	\$36,820.80
		Service Payment	MHS 28	\$11,003.44	\$528,165.12
				MHS 20 Total	\$188,313.60
				MHS 28 Total	\$2,049,123.32
			Total Cont	ract Amount:	\$2,237,436.92

2018-2019 RESIDENTIAL SERVICES RATES

Location	# of Slots or Individual	Type of Payment & Details	Service Element	Rate per month	Total Amount
Alder Creek	6	Service Payment	MHS 28	\$2,530.37	\$182,186.64
Bridgestone	5	Rent Subsidy	MHS 20	\$383.92	\$23,035.20
Fieldstone	5	Rent Subsidy	MHS 20	\$402.16	\$24,129.60
		Service Payment	MHS 28	\$4,350.75	\$261,045.00
	ESTLAN	Service Payment	MHS 28	\$236.31	\$2,835.72
Johnson Creek	8	Rent Subsidy	MHS 20	\$725.17	\$69,616.32
		Service Payment	MHS 28	\$3,290.96	\$315,935.16
Kellogg Creek	6	Rent Subsidy	MHS 20	\$293.70	\$21,146.40
		Service Payment	MHS 28	\$5,489.48	\$395,242.56
Mossy Meadows	1	Rent Subsidy	MHS 20	\$1,130.44	\$13,565.28
		Service Payment	MHS 28	\$26,486.84	\$317,840.76
Autumn Ridge	4	Rent Subsidy	MHS 20	\$767.10	\$36,820.80
3		Service Payment	MHS 28	\$11,003.44	\$528,165.12
				MHS 20 Total	\$188,313.60
				MHS 28 Total	\$2,003,250.96
			Total Cont	ract Amount:	\$2,191,564.56

ColumbiaCare Services, Inc.

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IN WITNESS WHEREOF, the parties hereto have caused this amendment to be executed by their duly authorized officers.

COLUMBIACARE SERVICES, INC.	CLACKAMAS COUNTY
By: Plant Jerriel Robert Beckett, Executive Director Estate 1/9/8 / Jakes of Estate Date 3587 Heathrow Way Street Address Medford, OR 97504	Commissioner Jim Bernard, Chair Commissioner Sonya Fischer Commissioner Ken Humberston Commissioner Paul Savas Commissioner Martha Schrader Signing on Behalf of the Board:
City/State/Zip (541) 858-8170 / 541-858-8147 Phone / Fax	Richard Swift, Director Health, Housing and Human Services Department

Date

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