

April 18, 2024

BCC Agenda Date/Item: _____

Board of County Commissioners
 Clackamas County

Approval of Amendment #01 decreasing 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 rescinds \$248,588.57 for eighteen months, Agreement value is decreased to \$15,844,233.26 for eighteen months. Funding is through the Oregon Health Authority. No County General Funds are involved.

Previous Board Action/Review	Agreement March 7, 2024, Agenda Item 20240307 I.C.1 Amendment #01 briefed at Issues April 16, 2024		
Performance Clackamas	Ensuring safe, healthy, and secure communities through the provision of mental health and substance use services.		
Counsel Review	Yes	Procurement Review	No
Contact Person	Mary Rumbaugh	Contact Phone	503-742-5305

EXECUTIVE SUMMARY: The Behavioral Health Division of the Health, Housing and Human Services Department requests approval of Amendment #01 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 funded by this Agreement. The Behavioral Health Division ensures that the funds are administered according to the terms set forth by this Agreement to provide local administration, behavioral health, and addiction services to Clackamas County.

Amendment #01 rescinds funds through Service Element MHS 04, Aid and Assist Client Services. Aid and Assist Client Services are provided to criminal defendants who may be unable to understand the nature of the proceeding against them, to assist or cooperate with their counsel, or to participate in their own defense. Aid and Assist Services may include discharge planning, a treatment designed to restore capacity, placement in appropriate community-based care, monitoring and coordination of services, and periodic assessment of the individual's capacity. These services aim to divert individuals from receiving services at Oregon State Hospital and into community restoration services to the greatest extent possible. OHA allocated funds incorrectly through the identified service element. The amendment is to correct OHA's error.

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Amendment #01 rescinds a total of \$248,588.57 from the eighteen-month Agreement. This Amendment decreases the Agreement value to \$15,844,233.26.

RECOMMENDATION: The staff respectfully requests that the Board of County Commissioners approve this Agreement and authorize Chair Smith to sign on behalf of Clackamas County.

Respectfully submitted,

Rodney A. Cook

Rodney A. Cook
Director of Health, Housing and Human Services



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AGREEMENT # PO-44300-00026004

**FIRST 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 First 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:

Approved by Joseph M. Callahan, Assistant Attorney General on March 19, 2024; email in Agreement file.

ATTACHMENT 1

EXHIBIT C

Financial Pages

MODIFICATION INPUT REVIEW REPORT

MOD#: M0810

CONTRACT#: 026004

CONTRACTOR: CLACKAMAS COUNTY

INPUT CHECKED BY: _____ DATE CHECKED: _____

SE#	FUND	PROJ CODE	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: 2023-2024

4	804	AAP	AID & ASSIST PROJECT	1/1/2024 - 6/30/2024	0 /NA	\$0.00	-\$268,962.66	\$0.00	A	1	Y		1
4	804	AAP	AID & ASSIST PROJECT	1/1/2024 - 6/30/2024	0 /NA	\$0.00	-\$13,286.00	\$0.00	A	1	Y		1
4	804	AAP	AID & ASSIST PROJECT	1/1/2024 - 6/30/2024	0 /NA	\$0.00	\$10,781.03	\$0.00	A	1	Y		
4	804	AAP	AID & ASSIST PROJECT	1/1/2024 - 6/30/2024	0 /NA	\$0.00	\$205,344.35	\$0.00	A	1	Y		
4	804	AAP	AID & ASSIST PROJECT	1/1/2024 - 6/30/2024	0 /NA	\$0.00	\$51,336.09	\$0.00	C	1	Y		3
4	804	AAP	AID & ASSIST PROJECT	1/1/2024 - 6/30/2024	0 /NA	\$0.00	-\$67,240.67	\$0.00	C	1	Y		1
4	804	AAP	AID & ASSIST PROJECT	1/1/2024 - 6/30/2024	0 /NA	\$0.00	-\$13,286.00	\$0.00	C	1	Y		1
4	804	AAP	AID & ASSIST PROJECT	1/1/2024 - 6/30/2024	0 /NA	\$0.00	\$10,781.03	\$0.00	C	1	Y		2
TOTAL FOR SE# 4								<u>-\$84,532.83</u>	<u>\$0.00</u>				
TOTAL FOR 2023-2024								<u>-\$84,532.83</u>	<u>\$0.00</u>				

FISCAL YEAR: 2024-2025

4	804	AAP	AID & ASSIST PROJECT	7/1/2024 - 6/30/2025	0 /NA	\$0.00	-\$537,925.32	\$0.00	A	1	Y		1
4	804	AAP	AID & ASSIST PROJECT	7/1/2024 - 6/30/2025	0 /NA	\$0.00	\$21,562.06	\$0.00	A	1	Y		
4	804	AAP	AID & ASSIST PROJECT	7/1/2024 - 6/30/2025	0 /NA	\$0.00	-\$26,572.00	\$0.00	A	1	Y		1
4	804	AAP	AID & ASSIST PROJECT	7/1/2024 - 6/30/2025	0 /NA	\$0.00	\$410,688.70	\$0.00	A	1	Y		
4	804	AAP	AID & ASSIST PROJECT	7/1/2024 - 6/30/2025	0 /NA	\$0.00	\$102,672.16	\$0.00	C	1	Y		3
4	804	AAP	AID & ASSIST PROJECT	7/1/2024 - 6/30/2025	0 /NA	\$0.00	-\$134,481.34	\$0.00	C	1	Y		1

MODIFICATION INPUT REVIEW REPORT

MOD#: M0810

CONTRACT#: 026004

CONTRACTOR: CLACKAMAS COUNTY

INPUT CHECKED BY: _____ DATE CHECKED: _____

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

FISCAL YEAR: 2024-2025

TOTAL FOR SE# 4								<u>-\$164,055.74</u>	<u>\$0.00</u>				
TOTAL FOR 2024-2025								<u>-\$164,055.74</u>	<u>\$0.00</u>				
TOTAL FOR M0810				026004				<u>-\$248,588.57</u>	<u>\$0.00</u>				

OREGON HEALTH AUTHORITY
Financial Assistance Award Amendment (FAAA)

CONTRACTOR: CLACKAMAS COUNTY
DATE: 03/08/2024

Contract#: 026004
REF#: 004

REASON FOR FAAA (for information only):

Aid and Assist Client Services (MHS 04) funds have been removed.

The following special condition(s) apply to funds as indicated by the special condition number in column 9. Each special condition set forth below may be qualified by a full description in the Financial Assistance Award.

- M0810 1 Special Condition #M0792 in Base Agreement, regarding "A) MHS 04 and B) Services" applies.
- M0810 2A) The financial assistance subject to this special condition will be disbursed to County in one lump sum within 30 calendar days after the date this Agreement becomes executed.
- M0810 3A) These funds are for MHS 04 Aid and Assist Client Services. B) The financial assistance subject to this special condition will be disbursed to County in one lump sum within 30 calendar days after the date this Agreement becomes executed.