

14 OCT 23 P4:14

Lucy Flores Mendez

From: Silas Halloran-Steiner
Sent: Friday, October 17, 2014 9:49 AM
To: Kathy George; Laura Tschabold
Cc: Mary Starrett; David Manitsas; Margaret Jarmer; Terry Malay; Lucy Flores Mendez
Subject: Board Consideration: CMHP Agreement #141431-16
Attachments: 141431-16 adb exe.pdf

Hi Kathy and Laura,

The attached amendment #16 to our agreement with the Oregon Health Authority for Community Addiction and Mental Health is changing the funding designation for the Parent Child Interaction Therapy and updates the Service Description language effective July 1, 2013 through July 1, 2015. The funding amounts remain the same and are included in our 2014-2015 Adopted budget.

I am requesting the Board ratify this amendment which I signed on October 6, 2014. Please let me know if you have any questions.

Lucy, please place this amendment on the next Board agenda for approval.

Thanks,

Silas Halloran-Steiner
Director, Yamhill County Health and Human Services Department
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627 NE Evans
McMinnville, OR 97128

Our Vision: People in Yamhill County live, work, learn, and play in safe communities that support wellness and dignity.

Our Mission: To promote the public's physical, emotional and social well-being through services, prevention, education, and partnerships.

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Accepted by Yamhill County
Board of Commissioners on
10-23-14 by Board Order
14-634



ADMINISTRATIVE SERVICES DIVISION
Office of Contracts and Procurement



John A. Kitzhaber, MD, Governor

250 Winter St NE, Room 306
Salem, OR 97301

Voice: (503) 945-5818

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**SIXTEENTH AMENDMENT TO
OREGON HEALTH AUTHORITY
2013-2015 INTERGOVERNMENTAL AGREEMENT FOR THE
FINANCING OF COMMUNITY ADDICTIONS AND MENTAL HEALTH
SERVICES AGREEMENT #141431**

This Sixteenth Amendment to Oregon Health Authority 2013-2015 Intergovernmental Agreement for the Financing of Community Addictions and Mental Health Services dated as of July 1, 2013 (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 Yamhill County ("County").

RECITALS

WHEREAS, OHA and County wish to add Exhibit MHS 37-Parent Child Interaction Therapy to MHS 37 Service Description and modify the Financial Assistance Award set forth in Exhibit D-1 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 Service Description for MHS 37 in Exhibit B of the Agreement is hereby amended to add Exhibit MHS 37-Parent Child Interaction Therapy in the form attached hereto and incorporated herein by this reference.
2. The financial and service information in the Financial Assistance Award are hereby amended as described in Exhibit 2 attached hereto and incorporated herein by this reference. Exhibit 2 must be read in conjunction with the portion of Exhibit D-1 of the

Accepted by Yamhill County
Board of Commissioners on

10-23-14 by Board Order
14-634

Agreement that describes the effect of an amendment of the financial and service information.

3. Capitalized words and phrases used but not defined herein shall have the meanings ascribed thereto in the Agreement.
4. County represents and warrants to OHA that the representations and warranties of County set forth in section 4 of Exhibit G of the Agreement are true and correct on the date hereof with the same effect as if made on the date hereof.
5. Except as amended hereby, all terms and conditions of the Agreement remain in full force and effect.
6. 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.

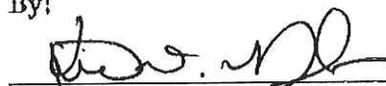
IN WITNESS WHEREOF, the parties hereto have executed this amendment as of the dates set forth below their respective signatures.

Yamhill County
By:



Authorized Signature Title Date
HHS DIRECTOR 10/6/14

State of Oregon acting by and through its Oregon Health Authority
By:



Authorized Signature Title Date
DPO 10/10/14

**Exhibit 1 to the 16th Amendment to
Oregon Health Authority
2013-2015 Intergovernmental Agreement for the
Financing of Community Addictions and Mental Health Services Agreement #141431**

**Exhibit MHS 37-Parent Child Interaction Therapy to MHS 37 Service
Description
MHS Special Projects**

1. Service Description

This special project is intended to meet the goals of the Oregon Childhood System (ORS 417.727) and to serve children ages 2 through 8 and their parents when the children have traits of the disruptive behavior disorders of Conduct Disorder, Oppositional Defiant Disorder and Attention Deficit Hyperactivity Disorder, who are not Medicaid eligible and who have no other resources to pay for services. Additionally, these funds are for the purpose of supporting the infrastructure in Evidence Based Practice for both Medicaid and Non-Medicaid clients

All services delivered as part of this special project must be provided in a culturally competent manner, including sensitivity to family, language, race and ethnicity.

This special project will:

- a. Implement the evidence-based practice Parent Child Interaction Therapy (PCIT) in appropriate clinic space and PCIT tools, with fidelity review by OHA or an OHA approved entity, and provision of services to families;
- b. Demonstrate outreach to and access by identified ethnic, linguistic or cultural minorities;
- c. Demonstrate collaboration with Early Learning Hubs and other early childhood serving partners;
- d. Establish and maintain a formal relationship with, and support and link family members through referral to a family organization, that meets the purpose of assuring that family and youth voices are part of all decision making and planning for the development of mental health supports and services, quality assurance, and use of resources. The formal relationship includes the following:
 - (1) The relationship is defined in a written agreement;
 - (2) Family representation is included on governing and advisory bodies in numbers that result in meaningful participation; and
 - (3) The family organization is developed by family members; the organization is 51% family members or advocates; and the organization is more than an advisory group of family members. It has links with and standing in the community, operates in accordance with system of care principals, and the support of the County Mental Health Program and the Coordinated Care Organization.
- e. Work with State identified trainer to certify two or more mental health clinicians in PCIT, and at least one of these clinicians shall be from the identified ethnic, cultural or linguistic population or with experience with the population.

2. **Performance Standards**

- a. Providers of these special project services must coordinate, collaborate and otherwise participate actively in regularly scheduled meetings with:
- (1) The local early childhood team per Oregon Administrative Rule on Early Childhood Planning 423-045-0020 through 423-045-0025;
 - (2) Service providers and local referral sources for families with the empirically demonstrated risk factors that include:
 - (a) A combination of demographic, child, family, and environmental risks such as single parent; receiving public assistance; lack of employment, current education or job training; being a teen parent; or lack of school diploma or general equivalency diploma (GED);
 - (b) Children with the known circumstances to place them at risk, including placement in foster care; having an incarcerated parent; or homelessness;
 - (c) Children whose parents have factors known to place children at risk, including parental mental health issues, depression, substance abuse, and domestic violence; and
 - (d) Other referral sources for families who are not eligible for services through the Oregon Health Plan.
 - (3) The local partners for the OHA-funded program Intensive Treatment and Recovery Services for Addicted Families, a cross-system collaborative approach including DHS Children Adults and Families, addiction service providers, recovery support services and early childhood system partners funded through the 2013 Legislatively Adopted Budget; and
 - (4) The family organization.
- b. Providers of these services must collaborate to develop and implement plans with members from an identified cultural, ethnic or linguistic minority community and a family-run organization to link and retain family members from the identified cultural, ethnic or linguistic population and other appropriate groups with PCIT services. Providers of these services must provide planning, outreach and implementation of culturally, linguistically and ethnically appropriate PCIT services. They must implement any necessary incentives to engage and maintain families in treatment. They must develop information and referral processes for family members to the local family run organization for peer support, family groups or other support processes.
- c. Providers of these services must establish and maintain information pertinent to fidelity reviews including:
- (1) Content and hours of clinician training, support and supervision;

- (2) Evidence of data-driven treatment decisions and the development of performance expectations through the use of the Eyberg Child Behavior Inventory, the Dyadic Parent-Child Interaction Coding System and the Parenting Stress Index-Short Form;
 - (3) Use of manuals and workbooks for implementing the practice;
 - (4) Developing and maintaining appropriate clinic space, one-way mirrors, equipment and toys for the children.
- d. Providers of these services must participate in one or more fidelity reviews by OHA or an OHA-approved external entity and implement required changes.
- e. Providers of these services must develop a local and statewide training program in PCIT for new sites, including training of a cohort of clinicians to deliver PCIT services following the most current PCIT Training Guidelines.

The training guidelines are disseminated by the PCIT Training Committee and posted on the PCIT website at <http://pcit.php.ufl.edu>. Trainers must stay up-to-date in PCIT innovations by attending conferences, reading the research, etc, and be available to provide guidance and supervision throughout the consultation period.

Providers of these services must disseminate lessons learned, collaborate to develop an Oregon annual forum or regional PCIT conference or provide presentations at other Oregon conferences, and support the implementation of new sites providing PCIT services.

3. Special Reporting Requirements

- a. Each Provider of these project services must submit quarterly written reports to OHA in a format prescribed by OHA within 30 days following the end of each calendar quarter including:
- (1) Client information and observations and testing results collected at entry, CDI mastery, PDI mastery, and exit. These data will be provided to AMH using a spreadsheet format developed by AMH in conjunction with PCIT provider representatives.
 - (2) Narrative describing number of clients served, project accomplishments, and challenges;
 - (3) Names of therapists in training and trained, including the following information:
 - (a) Identified ethnic, cultural or linguistic population or with experience with the population and other specialties;
 - (b) Location of therapists; and
 - (c) Training dates.

- (4) Description of lessons learned and dissemination activities [and training of clinician at expansion PCIT sites;
 - (5) For Medicaid and Non-Medicaid clients, Providers of these services must use PCIT procedure code modifiers for all billed services; and
 - (6) Quarterly and year-to-date budget expenditures.
- b. Providers must prepare and submit a written annual summary of project accomplishments and challenges and a narrative interpretation of project data on outcomes, including fidelity review outcomes. Reports must be prepared using forms and procedures prescribed by OHA, and sent to:

Oregon Health Authority
Addictions and Mental Health Division
Attention: PCIT Coordinator
500 Summer Street N.E. E86
Salem, OR 97301-1118

- c. All individuals receiving services with funds provided under this Agreement must be enrolled and that client's record maintained in either:
- (1) A dedicated provider number in the Client Processing Monitoring System (CPMS) as specified in OHA's CPMS manual located at: <http://www.oregon.gov/OHA/amh/training/cpms/index.shtml>, as it may be revised from time to time; or
 - (2) the Measures and Outcome Tracking System (MOTS) as specified in OHA's MOTS manual located at: <http://www.oregon.gov/OHA/amh/pages/compass/electronic-data-capture.aspx>, as it may be revised from time to time.

Over the next two years, AMH will be closing the CPMS system and replacing it with the MOTS system. Providers will be notified of the change.

4. Payment Procedures

Basis of Payment. The funds awarded for this special project are intended to be general financial assistance to County for the project. Accordingly, except as necessary to verify that the performance standards set forth above have been met, OHA will not track delivery of special project services or service capacity on a per unit basis. Total OHA payment for the special project described herein shall not exceed the total funds awarded for this special project in Exhibit D-1, "Financial Assistance Award".

Disbursement of Funds. Unless a different disbursement method is specified in that line of Exhibit D-1, "Financial Assistance Award", OHA will disburse the funds awarded, for the special project services described herein, in a particular line of Exhibit D-1, "Financial Assistance Award", to County in substantially equal monthly allotments

during the period specified in that line of the Financial Assistance Award and subject to the following:

- a. OHA may reduce the monthly allotments based on under delivery of services identified through the quarterly reports described above or failure to provide services to fidelity;
 - b. OHA may adjust monthly allotments to meet cash flow requirements for continued delivery of the special project services described herein; and
 - c. OHA may adjust monthly allotments to reflect changes in the funds awarded for the special project services described herein, on that line of the financial Assistance Award as a result of amendments to the Financial Assistance Award.
5. **Agreement Settlement** Agreement Settlement will be used to confirm implementation of the special project described herein and satisfaction of the minimum performance requirements, based on data properly reported in accordance with section 3., "Special Reporting Requirements" above.

**Exhibit 2 to the 16th Amendment to
Oregon Health Authority
2013-2015 Intergovernmental Agreement for the
Financing of Community Addictions and Mental Health Services Agreement #141431**

OREGON HEALTH AUTHORITY
Financial Assistance Award Amendment (FAAA)
2013-2015

CONTRACTOR: YAMHILL COUNTY
DATE: 09/24/2014

Contract#: 141431
Reference#: 009

ALCOHOL AND DRUG SERVICES

SECTION: 1
SERVICE REQUIREMENTS MEET EXHIBIT B AND, IF INDICATED, EXHIBIT B-2

Part	Start/End Dates	Client Code	Approved Service Funds	Approved Start-up	Serv. Units	Unit Type	EXHIB B2 Codes	Spec Cond#
SE# 60 A&D-SPECIAL PROJECTS								
A	7/2013- 6/2014	N/A	-\$217,947	\$0	0.	NA	N/A	A0116 1
A	7/2014- 6/2015	N/A	-\$217,947	\$0	0.	NA	N/A	A0116 1
SUBTOTAL SE# 60			-\$435,894	\$0				
TOTAL SECTION 1			-\$435,894	\$0				

TOTAL AUTHORIZED FOR ALCOHOL AND DRUG SERVICES

-\$435,894

TOTAL AUTHORIZED FOR THIS FAAA: -\$435,894

OREGON HEALTH AUTHORITY
Financial Assistance Award Amendment (FAAA)

CONTRACTOR: YAMHILL COUNTY
DATE: 09/24/2014

Contract#: 141431
REF#: 009

REASON FOR FAAA (for information only):

Funds are removed from A&D 60-Parent Child Interaction Therapy to be replaced by MHS 37-Parent Child Interaction Therapy as an original site.

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.

A0116 1 Special Condition A0001-1 regarding "Exhibit A&D 60-Parent Child Interaction Therapy" applies.

OREGON HEALTH AUTHORITY
 Financial Assistance Award Amendment (FAAA)
 FAAA Totals

Part A
 2013-2015

***** INFORMATION ONLY *****

CONTRACTOR: YAMHILL COUNTY CONTRACT#: 141431
 DATE: 09/24/2014 REF#: 009

SE#	DESCRIPTION	CURRENT APPROVED	CURRENT PENDING	PROPOSED CHANGE	REVISED TOTAL
60	A&D-SPECIAL PROJECTS	\$435,894	\$0	-\$435,893	\$1
TOTAL SE# 60		\$435,894	\$0	-\$435,893	\$1
61	ADULT ALCOHOL/DRUG RES TMNT	\$0	\$0	\$0	\$0
61	ADULT ALCOHOL/DRUG RES TMNT	\$58,599	\$0	\$0	\$58,599
TOTAL SE# 61		\$58,599	\$0	\$0	\$58,599
62	DEPENDENT RESIDENTIAL	\$95,922	\$0	\$0	\$95,922
TOTAL SE# 62		\$95,922	\$0	\$0	\$95,922
		\$590,415	\$0	-\$435,893	\$154,522

NOTE: The amounts in the "REVISED TOTAL" column include amounts reported in the "CURRENT PENDING" column that have not yet been accepted/approved. Therefore, these amounts may change.

OREGON HEALTH AUTHORITY
Financial Assistance Award Amendment (FAAA)
FAAA Totals
Part C
2013-2015

***** INFORMATION ONLY *****

SE#	DESCRIPTION	CURRENT APPROVED	CURRENT PENDING	PROPOSED CHANGE	REVISED TOTAL
67	A&D RESIDENTIAL CAPACITY	\$30,101	\$0	\$0	\$30,101
67	A&D RESIDENTIAL CAPACITY	\$37,263	\$0	\$0	\$37,263
TOTAL SE# 67		\$67,364	\$0	\$0	\$67,364
		\$67,364	\$0	\$0	\$67,364

CONTRACTOR: YAMHILL COUNTY
DATE: 09/24/2014

CONTRACT#: 141431
REF#: 009

NOTE: The amounts in the "REVISED TOTAL" column include amounts reported in the "CURRENT PENDING" column that have not yet been accepted/approved. Therefore, these amounts may change.

OREGON HEALTH AUTHORITY
Financial Assistance Award Amendment (FAAA)
FAAA Totals
Summary
2013-2015

***** INFORMATION ONLY *****

SE#	DESCRIPTION	CURRENT APPROVED	CURRENT PENDING	PROPOSED CHANGE	REVISED TOTAL
60	A&D-SPECIAL PROJECTS	\$435,894	\$0	-\$435,893	\$1
TOTAL SE# 60		\$435,894	\$0	-\$435,893	\$1
61	ADULT ALCOHOL/DRUG RES TMNT	\$0	\$0	\$0	\$0
61	ADULT ALCOHOL/DRUG RES TMNT	\$58,599	\$0	\$0	\$58,599
TOTAL SE# 61		\$58,599	\$0	\$0	\$58,599
62	DEPENDENT RESIDENTIAL	\$95,922	\$0	\$0	\$95,922
TOTAL SE# 62		\$95,922	\$0	\$0	\$95,922
67	A&D RESIDENTIAL CAPACITY	\$30,101	\$0	\$0	\$30,101
67	A&D RESIDENTIAL CAPACITY	\$37,263	\$0	\$0	\$37,263
TOTAL SE# 67		\$67,364	\$0	\$0	\$67,364
CONTRACT TOTAL		\$657,779	\$0	-\$435,893	\$221,886

NOTE: The amounts in the "REVISED TOTAL" column include amounts reported in the "CURRENT PENDING" column that have not yet been accepted/approved. Therefore, these amounts may change.

CONTRACTOR: YAMHILL COUNTY
DATE: 09/24/2014

CONTRACT#: 141431
REF#: 009

OREGON HEALTH AUTHORITY
 Financial Assistance Award Amendment (FAAA)
 2013-2015

CONTRACTOR: YAMHILL COUNTY
 DATE: 09/25/2014

Contract#: 141431
 Reference#: 010

MENTAL HEALTH SERVICES

SECTION: 1

SERVICE REQUIREMENTS MEET EXHIBIT B AND, IF INDICATED, EXHIBIT B-2

Part	Start/End Dates	Client Code	Approved Service Funds	Approved Start-up	Serv. Units	Unit Type	EXHIB B2 Codes	Spec Cond#
SE# 37 MHS SPECIAL PROJECTS								
A	7/2013- 6/2014	N/A	\$217,947	\$0	0.	NA	N/A	M0302 1
A	7/2014- 6/2015	N/A	\$217,947	\$0	0.	NA	N/A	M0302 1
SUBTOTAL SE# 37			\$435,894	\$0				
TOTAL SECTION 1			\$435,894	\$0				

TOTAL AUTHORIZED FOR MENTAL HEALTH SERVICES

\$435,894

TOTAL AUTHORIZED FOR THIS FAAA:

\$435,894

OREGON HEALTH AUTHORITY
Financial Assistance Award Amendment (FAAA)

CONTRACTOR: YAMHILL COUNTY
DATE: 09/25/2014

Contract#: 141431
REF#: 010

REASON FOR FAAA (for information only):

Funds are added to MHS 37-Parent Child Interaction Therapy to replace A&D 60-Parent Child Interaction Therapy as an original site..

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.

M0302 1 These funds are awarded for the special project described in Exhibit MHS 37-Parent Child Interaction Therapy.

OREGON HEALTH DEPARTMENT
 Financial Assistance Award Amendment (FAAA)
 FAAA Totals
 Part A
 2013-2015

***** INFORMATION ONLY *****

SE#	DESCRIPTION	CURRENT APPROVED	CURRENT PENDING	PROPOSED CHANGE	REVISED TOTAL
20	NON-RESIDENTIAL ADULT MH SERV	\$12,784	\$0	\$0	\$12,784
TOTAL SE# 20		\$12,784	\$0	\$0	\$12,784
28	RESIDENTIAL TREATMENT SERVICES	\$282,771	\$0	\$0	\$282,771
TOTAL SE# 28		\$282,771	\$0	\$0	\$282,771
37	MHS SPECIAL PROJECTS	\$0	\$0	\$435,893	\$435,893
TOTAL SE# 37		\$0	\$0	\$435,893	\$435,893
		\$295,555	\$0	\$435,893	\$731,448

CONTRACTOR: YAMHILL COUNTY
 DATE: 09/25/2014

CONTRACT#: 141431
 REF#: 010

NOTE: The amounts in the "REVISED TOTAL" column include amounts reported in the "CURRENT PENDING" column that have not yet been accepted/approved. Therefore, these amounts may change.

OREGON HEALTH AUTHORITY
Financial Assistance Award Amendment (FAAA)
FAAA Totals
Part B
2013-2015

***** INFORMATION ONLY *****

SE#	DESCRIPTION	CURRENT APPROVED	CURRENT PENDING	PROPOSED CHANGE	REVISED TOTAL
20	NON-RESIDENTIAL ADULT MH SERV	\$268,529	\$0	\$0	\$268,529
20	NON-RESIDENTIAL ADULT MH SERV	\$443,879	\$0	\$0	\$443,879
TOTAL SE# 20		\$712,408	\$0	\$0	\$712,408
22	CHILD & ADOLES MH SERVICES	\$476,674	\$0	\$0	\$476,674
TOTAL SE# 22		\$476,674	\$0	\$0	\$476,674
28	RESIDENTIAL TREATMENT SERVICES	\$535,689	\$0	\$0	\$535,689
TOTAL SE# 28		\$535,689	\$0	\$0	\$535,689
31	ENHANCED CARE SERVICES	\$285,342	\$0	\$0	\$285,342
TOTAL SE# 31		\$285,342	\$0	\$0	\$285,342
34	ADULT FOSTER CARE MHS	\$180,450	\$0	\$0	\$180,450
34	ADULT FOSTER CARE MHS	\$11,299	\$0	\$0	\$11,299
TOTAL SE# 34		\$191,749	\$0	\$0	\$191,749
36	PASARR MHS	\$126,606	\$0	\$0	\$126,606
TOTAL SE# 36		\$126,606	\$0	\$0	\$126,606

CONTRACTOR: YAMHILL COUNTY
DATE: 09/25/2014

CONTRACT#: 141431
REF#: 010

NOTE: The amounts in the "REVISED TOTAL" column include amounts reported in the "CURRENT PENDING" column that have not yet been accepted/approved. Therefore, these amounts may change.

OREGON HEALTH AUTHORITY
Financial Assistance Award Amendment (FAAA)
FAAA Totals
Part B
2013-2015

***** INFORMATION ONLY *****

CONTRACT#: 141431
REF#: 010

CONTRACTOR: YAMHILL COUNTY
DATE: 09/25/2014

SE#	DESCRIPTION	CURRENT APPROVED	CURRENT PENDING	PROPOSED CHANGE	REVISED TOTAL
		\$2,328,468	\$0	\$0	\$2,328,468

NOTE: The amounts in the "REVISED TOTAL" column include amounts reported in the "CURRENT PENDING" column that have not yet been accepted/approved. Therefore, these amounts may change.

OREGON HEALTH AUTHORITY
Financial Assistance Award Amendment (FAAA)
FAAA Totals
Summary
2013-2015

***** INFORMATION ONLY *****

CONTRACT#: 141431
REF#: 010

CONTRACTOR: YAMHILL COUNTY
DATE: 09/25/2014

SE#	DESCRIPTION	CURRENT APPROVED	CURRENT PENDING	PROPOSED CHANGE	REVISED TOTAL
20	NON-RESIDENTIAL ADULT MH SERV	\$281,313	\$0	\$0	\$281,313
20	NON-RESIDENTIAL ADULT MH SERV	\$443,879	\$0	\$0	\$443,879
TOTAL SE# 20		\$725,192	\$0	\$0	\$725,192
22	CHILD & ADOLES MH SERVICES	\$476,674	\$0	\$0	\$476,674
TOTAL SE# 22		\$476,674	\$0	\$0	\$476,674
28	RESIDENTIAL TREATMENT SERVICES	\$818,460	\$0	\$0	\$818,460
TOTAL SE# 28		\$818,460	\$0	\$0	\$818,460
31	ENHANCED CARE SERVICES	\$285,342	\$0	\$0	\$285,342
TOTAL SE# 31		\$285,342	\$0	\$0	\$285,342
34	ADULT FOSTER CARE MHS	\$180,450	\$0	\$0	\$180,450
34	ADULT FOSTER CARE MHS	\$11,299	\$0	\$0	\$11,299
TOTAL SE# 34		\$191,749	\$0	\$0	\$191,749
36	PASARR MHS	\$126,606	\$0	\$0	\$126,606
TOTAL SE# 36		\$126,606	\$0	\$0	\$126,606
37	MHS SPECIAL PROJECTS	\$0	\$0	\$435,893	\$435,893

NOTE: The amounts in the "REVISED TOTAL" column include amounts reported in the "CURRENT PENDING" column that have not yet been accepted/approved. Therefore, these amounts may change.

OREGON HEA AUTHORITY
Financial Assistance Award Amendment (FAAA)
FAAA Totals
Summary
2013-2015

***** INFORMATION ONLY *****

SE#	DESCRIPTION	CURRENT APPROVED	CURRENT PENDING	PROPOSED CHANGE	REVISED TOTAL
TOTAL SE# 37		\$0	\$0	\$435,893	\$435,893
CONTRACT TOTAL		\$2,624,023	\$0	\$435,893	\$3,059,916

CONTRACTOR: YAMHILL COUNTY
DATE: '09/25/2014

CONTRACT#: 141431
REF#: 010

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B.O. 14-634