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**SIXTH AMENDMENT TO
OREGON HEALTH AUTHORITY
2017-2019 INTERGOVERNMENTAL AGREEMENT FOR THE FINANCING OF
MENTAL HEALTH, SUBSTANCE USE DISORDERS, AND PROBLEM GAMBLING
SERVICES AGREEMENT #153142**

This Sixth Amendment to Oregon Health Authority 2017-19 Intergovernmental Agreement for the Financing of Community Mental Health, Substance Use Disorders, and Problem Gambling Services effective as of July 1, 2017 (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 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 are 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. The EXHIBIT K information are hereby amended and added to as described: Service Description #, A&D 66, Service Description Name, Community Behavioral and Substance Use Disorder Services, Vendor or Sub-recipient, Subrecipient, All Funding Sources, STR, CFDA #, 93.788.
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.

7. Signatures.

Yamhill County

By:

| | | | |
|------------------------|------------------------|---------------------|----------------|
| <u>Richard L Olson</u> | <u>RICHARD L OLSON</u> | <u>COMMISSIONER</u> | <u>1-31-19</u> |
| Authorized Signature | Printed Name | Title | Date |

State of Oregon acting by and through its Oregon Health Authority

By:

| | | | |
|-------------------------|-------------------------|--|---------------|
| <u>Mark J. Mitchell</u> | <u>Mark J. Mitchell</u> | <u>Director of Business Operations</u> | <u>2/1/19</u> |
| Authorized Signature | Printed Name | Title | Date |

Approved for Legal Sufficiency:

Approved by Steven Marlowe, Senior Assistant Attorney General, Department of Justice, on August 23, 2018; email in Contract file.

OHA Program:

Approved by Arlenia Broadwell on January 17, 2019; e-mail in contract file.

Approved by: Director, OHA Health Systems Division

By:

| | | | |
|----------------------|-------------------|-----------------|---------------|
| <u>MC Stanton</u> | <u>MC STANTON</u> | <u>Director</u> | <u>2-4-19</u> |
| Authorized Signature | Printed Name | Title | Date |

Accepted by Yamhill County
 Board of Commissioners on
1/31/19 by Board Order
 # 19-35

ATTACHMENT 1
Exhibit C
Financial Assistance Award

MODIFICATION INPUT REVIEW REPORT

MOD#: A0108

CONTRACT#: 153142

CONTRACTOR: YAMHILL 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 | CODE | |
| FISCAL YEAR: 2018-2019 | | | | | | | | | | | | | |
| BASEAD YAMHILL CO. | | | | | | | | | | | | | |
| 66 | 570 | -0- | | | 11/30/2018 - 6/30/2019 | / | | \$142,857.00 | \$0.00 | C | 1 | N | 1 |
| TOTAL FOR SE# 66 | | | | | | | | \$142,857.00 | \$0.00 | | | | |
| TOTAL FOR 2018-2019 | | | | | | | | \$142,857.00 | \$0.00 | | | | |
| TOTAL FOR A0108 153142 | | | | | | | | \$142,857.00 | \$0.00 | | | | |

B.O. 19-35
 Exhibit "A"

OREGON HEALTH AUTHORITY
Financial Assistance Award Amendment (FAAA)

CONTRACTOR: YAMHILL COUNTY
DATE: 12/21/2018

Contract#: 153142
REF#: 006

REASON FOR FAAA (for information only):

Funds are increased in A&D 66 for Opioid Use Disorder Treatment services, as described in your special condition.

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.

A0108 1A) These funds are for A&D66 Services for Opioid Use Disorder (OUD) treatment. County will implement the following activities: 1) coordinate and collaborate with local law enforcement, first responders, and local treatment providers to distribute Naloxone. 2) county/CMHP will provide training on Naloxone administration to local law enforcement and first responders. 3) utilize resources such as local PDO coordinators, Interdisciplinary Action Teams (IAPs), local Pain Guidance Groups (PGG) to stay engaged in a community wide collaborative plan. 5) Employ Peer Delivered Services to help individuals with OUD start and stay engaged in treatment and recovery, including formerly incarcerated individuals with OUD. 6) Establish sustained collaboration between the county/CMHP, law enforcement, First Responders, and treatment providers in the region. Report of Opioid Treatment activities must be submitted annually on the form located at <http://www.oregon.gov/oha/amh/Pages/reporting-reqs.aspx>. Failure to report may be subject to recovery of funds at a rate of 10% of the total funds of this line. B) The financial assistance subject to this special condition will be disbursed to County in one lump sum within 30 days after the date this Amendment becomes executed.

B.O. 19-35
Exhibit "A"