



Meeting Date: May 11, 2020
Agenda Item No: _____

Kitsap County Board of Commissioners

Office/Department: Human Services

Staff Contact:

Stephanie Lewis, SBH-ASO Administrator, 337-4422

Doug Washburn, Human Services Director, 337-4526

Agenda Item Title: Behavioral Health Revenue Contract KC-068-20 Amendment A between Kitsap County, as the Administrative Entity for the Salish Behavioral Health Administrative Services Organization, and Washington State Health Care Authority, Division of Behavioral Health and Recovery, to provide additional funding for Trueblood Misdemeanor Diversion.

Recommended Action: Move that the Board execute Contract KC-068-20, Amendment A with Washington State Health Care Authority, Division of Behavioral Health and Recovery.

Summary:	<p>This revenue contract with Washington State Health Care Authority (HCA), Division of Behavioral Health and Recovery, increases funding by \$196,911. This changes the contract balance from \$3,693,490 to \$3,890,401. These contract amendment funds (\$196,911) are for April 1, 2020 through June 30, 2020 for Trueblood Misdemeanor Diversion. The overall contract term remains unchanged from January 1, 2020 to December 31, 2020.</p> <p>This amendment adds new subsection 14.1.2, replaces Exhibit A with Exhibit A-1, adds Exhibit P-1, and adds Exhibit R.</p> <p>Kitsap County is the administrative entity for the SBHASO, which contracts with HCA to provide public behavioral health services in Kitsap, Jefferson, and Clallam Counties. The state and block grant funding in this contract is prioritized to pay for crisis services, inpatient services and residential services. Funds that remain after those priorities are met are to be used to provide outpatient services to the non-Medicaid population.</p>
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Attachments:	<ol style="list-style-type: none">1. Contract Review Sheet2. KC-068-20-A [HCA Contract Number K4162-1]
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Fiscal Impact for this Specific Action

Expenditure required for this specific action:	\$196,911
Related Revenue for this specific action:	\$196,911
Cost Savings for this specific action:	\$0
Net Fiscal Impact:	100% Grant Funded
Source of Funds:	WA State Health Care Authority

Fiscal Impact for Total Project – NA

Fiscal Impact (DAS) Review

Office/Departmental Review & Coordination

Office/Department

**Elected
Official/Department
Director**

Human Services		Doug Washburn		
Contract Information				
Contract Number	Date Original Contract or Amendment Approved	Amount of Original Contract Amendment	Total Amount of Amended Contract	
KC-068-20	12/14/2019		\$3,693,490	
KC-068-20-A	Pending	\$196,911	\$3,890,401	



Kitsap County
CONTRACT REVIEW SHEET
(Chapter 3.56 KCC)

A. CONTRACT INFORMATION

1. Contractor Washington State Health Care Authority
2. Purpose Revenue amendment to increase funds for Trueblood Misdemeanor Diversion programs.
3. Contract Amount \$196,911 Disburse ☐ Receive ☒
4. Contract Term January 1, 2020 to December 31, 2020
5. Contract Administrator Stephanie Lewis Phone 337-4422
Approved: Richard VanCleave **Date** 4/15/2020
Department Deputy Director

B. AUDITOR – ACCOUNTING INFORMATION

1. Contract Control Number KC-068-20-A
2. Fund Name SBHASO Non-Medicaid
3. Payment from-Revenue to CC/Account Nbr 1971.3340.0460,3330.93958,3330.93959
4. **Encumbered By** Dave Schureman **Date** 4/15/2020

C. AUDITOR'S ACCOUNTING – GRANTS REVIEW

Signature required only if contract is grant funded

1. ☒ Approved ☐ Not Approved
Reviewer Dave Schureman **Date** 4/15/2020
2. Comments:

D. ADMINISTRATIVE SERVICES DEPARTMENT – RISK MANAGER REVIEW

1. ☒ Approved ☐ Not Approved
Reviewer Anastasia Johnson **Date** 4/15/2020
2. Comments: Amendment Only

E. ADMINISTRATIVE SERVICES DEPARTMENT – BUDGET MANAGER REVIEW

Signature required only if contract is for \$50,000 or more, OR it will be signed by board of commissioners (regardless of dollar amount)

1. ☒ Approved ☐ Not Approved
Reviewer Aimée Campbell **Date** 04/16/2020
2. Comments:

F. PERSONNEL DEPARTMENT – PERSONNEL DIRECTOR REVIEW

Signature required only if union or employment contract

G. PROSECUTING ATTORNEY


1. ☒ Approved as to Form* ☐ Not Approved as to Form
Reviewer Alan L. Miles **Date** 2020-04-16
2. Comments: *Comments to be provided separately.

H. CERTIFICATION BY CONTRACT ADMINISTRATOR: THIS CONTRACT IS READY FOR CONSIDERATION BY THE AUTHORIZED CONTRACT SIGNER.

(For contract signing authority, see KCC 3.56.075)

Contract Administrator: Jolene Kron
Date Approved by Authorized Contract Signer:
RETURN SIGNED ORIGINALS TO:

Date 4/15/2020
Date
Melynda Phelps @ MS-23, X3534

	CONTRACT AMENDMENT BEHAVIORAL HEALTH – ADMINISTRATIVE SERVICES ORGANIZATION	HCA Contract No.: K4162 Amendment No.: 1 KC-068-20-A
THIS AMENDMENT TO THE BEHAVIORAL HEALTH – ADMINISTRATIVE SERVICES ORGANIZATION CONTRACT is between the Washington State Health Care Authority and the party whose name appears below, and is effective as of the date set forth below.		
CONTRACTOR NAME Kitsap County	CONTRACTOR doing business as (DBA) Salish Behavioral Health Administrative Service Organization	
CONTRACTOR ADDRESS 614 Division Street, MS23 Port Orchard, WA 98366-4676	WASHINGTON UNIFORM BUSINESS IDENTIFIER (UBI) 182-002-345	

WHEREAS, HCA and Contractor previously entered into a Contract for behavioral health services, and;

WHEREAS, HCA and Contractor wish to amend the Contract to: 1) correct Sub-Recipient status of Contractor; 2) update Exhibit A, Non-Medicaid Funding Allocation to add Trueblood Misdemeanor Diversion Funds; 3) update Exhibit P, Federal Award Identification for Subrecipients; and 4) add Exhibit R, Semi-Annual Trueblood Misdemeanor Diversion Fund Report Template;

NOW THEREFORE, the parties agree the Contract is amended as follows:

1. Cover Page, "Is the Contractor a Sub-Recipient for the Purposes of this Contract?," is amended to correctly indicate Contractor as a Sub-Recipient, as follows:

IS THE CONTRACTOR A SUB-RECIPIENT FOR PURPOSES OF THIS CONTRACT? <u>Yes</u>	CFDA NUMBER(S) 93.958; 93.959
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2. The total maximum consideration for this Contract is increased by \$196,911.00 from \$3,693,490.00 to \$3,890,401.00.
3. Section 14, Care Management and Coordination, 14.1 Care Coordination Requirements, a new subsection 14.1.2 is added as follows:
 - 14.1.2 The Contractor will provide Care Coordination to Individuals who are named on the HCA Referral List, also known as the "high utilizer list," in the Trueblood, et al., v. Department of Social and Health Services Settlement Agreement. HCA will provide the HCA Referral List to the Contractor monthly. The Contractor will ensure Individuals with behavioral health needs and current or prior criminal justice involvement receive Care Coordination. The Contractor will report semi-annually, using Exhibit R, Semi-Annual Trueblood Misdemeanor Diversion Fund Report Template. Reports must be submitted to HCA by January 31, for the reporting period of July through December of the previous year, and by July 31, for the reporting period of January through June of the current year.
4. Exhibit A-1, Non-Medicaid Funding Allocation, is effective as of the Effective Date of this Amendment through June 30, 2020 and supersedes and replaces Exhibit A, and is attached hereto and incorporated herein.

5. Exhibit P-1, Federal Award Identification for Subrecipients, is effective as of the Effective Date of this Amendment through June 30, 2020 and supersedes and replaces Exhibit P, and is attached as a separate document to this Amendment.
6. Exhibit R, Semi-Annual Trueblood Misdemeanor Diversion Fund Report Template, is attached hereto and incorporated herein.
7. This Amendment will be effective on the date of last signature shown below ("Effective Date").
8. All capitalized terms not otherwise defined herein have the meaning ascribed to them in the Contract.
9. All other terms and conditions of the Contract remain unchanged and in full force and effect.

The parties signing below warrant that they have read and understand this Amendment and have authority to execute the Amendment. This Amendment will be binding on HCA only upon signature by HCA.

CONTRACTOR SIGNATURE	PRINTED NAME AND TITLE	DATE SIGNED
	See List	
HCA SIGNATURE	PRINTED NAME AND TITLE	DATE SIGNED
	Annette Schuffenhauer, Chief Legal Officer	

**Exhibit A-1: Non-Medicaid Funding Allocation
Salish BH-ASO**

This Exhibit addresses Non-Medicaid funds in the Salish RSA for the provision of crisis services and non-crisis behavioral health services for January 1, 2020, through June 30, 2020, of state fiscal year (SFY) 2020.

MHBG and SABG funds will be administered by the BH-ASO in accordance with the plans developed locally for each grant.

Line items such as Dedicated Marijuana Account (DMA), Jail Services, 5480 – ITA Non-Medicaid, Detention Decision Review, Ombuds, Behavioral Health Advisory Board, and FYSPRT are allocated to the BH-ASO. GF-S, Program for Assertive Community Treatment (PACT), and Assisted Outpatient Treatment (AOT) provisos are allocated between the BH-ASO and MCOs on a 70/30 basis.

Table 1: Salish RSA January-June 2020 GF-S Funding

Fund Source	Monthly	Total 6 Months
Non-Medicaid	\$282,276	\$1,693,656
Prog for Assertive Community Tx (PACT)	\$10,135	\$60,810
Assisted Outpatient Treatment	\$4,504	\$27,024
Jail Services	\$9,564	\$57,384
5480 - ITA Non-Medicaid	\$13,605	\$81,630
Detention Decision Review	\$2,291	\$13,746
Crisis Triage/Stabilization	\$42,333	\$253,998
Behavioral Health Advisory Board	\$3,333	\$19,998
Ombuds	\$3,750	\$22,500
Dedicated Marijuana Account	\$18,880	\$113,280
Criminal Justice Treatment Account	\$21,817	\$130,902
State Drug Court	\$17,573	\$105,438
Secure Detox	\$7,169	\$43,014
Behavioral Health Enhancements	One-time payment	\$109,956
Discharge Planners	One-time payment	\$71,529
Trueblood Misdemeanor Diversion Funds	One-time payment	\$196,911
Total	\$437,230	\$3,001,776

Table 2: Salish RSA Jan-June 2020 FYSPRT and Grant Funding

Fund Source	Total
FYSPRT	\$37,500
MHBG	\$166,348
Peer Bridger	\$80,000
SABG	\$604,777
Total	\$888,625

Explanations

All proviso dollars are GF-S funds. Outlined below, are explanations of the provisos and the Dedicated Marijuana account applicable **to all regions that receive the specific proviso**:

- **Juvenile Drug Court:** Funding to provide alcohol and drug treatment services to juvenile offenders who are under the supervision of a juvenile drug court.
- **State Drug Court:** Funding to provide alcohol and drug treatment services to offenders who are under the supervision of a drug court.
- **Jail Services:** Funding to provide mental health services for mentally ill offenders while confined in a county or city jail. These services are intended to facilitate access to programs that offer mental health service upon mentally ill offenders' release from confinement. This includes efforts to expedite applications for new or re- instated Medicaid benefits.
- **WA - Program for Assertive Community Treatment (WA - PACT)/Additional PACT:** Funds received per the budget proviso for development and initial operation of high-intensity programs for active community treatment WA- PACT teams.
- **Detention Decision Review:** Funds that support the cost of reviewing a DCR's decision whether to detain or not detain an individual under the State's involuntary commitment statutes.
- **Criminal Justice Treatment Account (CJTA):** Funds received, through a designated account in the State treasury, for expenditure on: a) SUD treatment and treatment support services for offenders with an addition of a SUD that, if not treated, would result in addiction, against whom charges are filed by a prosecuting attorney in Washington State; b) the provision of drug and alcohol treatment services and treatment support services for nonviolent offenders within a drug court program.
- **Assisted Outpatient Treatment:** Funds received to support Assisted Outpatient Treatment (AOT). AOT is an order for Less Restrictive Alternative Treatment for up to ninety days from the date of judgment and does not include inpatient treatment.
- **Dedicated Marijuana Account (DMA):** Funding to provide a) outpatient and residential SUD treatment for youth and children; b) PPW case management, housing supports and residential treatment program; c) contracts for specialized fetal alcohol services; d) youth drug courts; and e) programs that support intervention, treatment, and recovery support services for middle school and high school aged students. All new program services must direct at least eighty-five percent of funding to evidence-based on research-based programs and practices.
- **ITA Non-Medicaid – Mobile Crisis (5480 Proviso):** Funding that began in 2013, to provide additional local mental health services to reduce the need for hospitalization under the Involuntary Treatment Act in accordance with regional plans approved by DBHR.
- **Secure Detoxification:** Funding for implementation of new requirements of RCW 71.05, RCW 71.34 and RCW 71.24 effective April 1, 2018, such as evaluation and treatment by a SUDP, acute and subacute detoxification services, and discharge assistance provided by a SUDP in accordance with this Contract.
- **Crisis Triage/Stabilization and Step-Down Transitional Residential:** Funding originally allocated under SSB 5883 2017, Section 204(e) and Section 204(r) for operational costs and services provided within these facilities.

- **Behavioral Health Enhancements (one-time payment):** Funding for the implementation of regional enhancement plans originally funded under ESSB 6032 and continued in ESHB 1109.SL Section 215(23).
- **Discharge Planners (one-time payment):** These are funds received for a position solely responsible for discharge planning.
- **Trueblood Misdemeanor Diversion Funds (one-time payment):** These are funds for non-Medicaid costs associated with serving individuals in crisis triage, outpatient restoration, Forensic PATH, Forensic HARPS, or other programs that divert individuals with behavioral health disorders from the criminal justice system.
- **Ombuds:** Specific General Fund allocation to support a regional ombuds.
- **Behavioral Health Advisory Board (BHAB):** Specific General Fund allocation to support a regional BHAB.

Outlined below are explanation for provisos applicable to specific regions:

- **ITA 180 Day Commitment Hearings:** Funding to conduct 180 day commitment hearings.
- **Assisted Outpatient Treatment (AOT) Pilot:** Funding for pilot programs in Pierce and Yakima counties to implement AOT.
- **Spokane: Acute Care Diversion:** Funding to implement services to reduce the utilization and census at Eastern State Hospital.
- **MH Enhancement – Mt Carmel (Alliance):** Funding for the Alliance E&T in Stevens County.
- **MH Enhancement-Telecare:** Funding for the Telecare E&T in King County.
- **Crisis Stabilization Support (one-time payment):** Funds provided specifically for subcontract arrangements with Pioneer Human Services and Compass Health, to provide crisis stabilization services for non-Medicaid individuals in Whatcom County.

Exhibit P-1
Federal Award Identification for Subrecipients

Federal Award Identification for Subrecipients (reference 2 CFR 200.331)
Substance Abuse Block Grant

(i) Subrecipient name (which must match the name associated with its unique entity identifier);	Kitsap County DBA Salish Behavioral Health Administrative Service Organization
(ii) Subrecipient's unique entity identifier; (DUNS)	07-185-5191
(iii) Federal Award Identification Number (FAIN);	B08TI010056
(iv) Federal Award Date (see §200.39 Federal award date);	6/4/2019
(v) Subaward Period of Performance Start and End Date;	1/1/2020 – 12/31/2020
(vi) Amount of Federal Funds Obligated by this action;	\$604,777
(vii) Total Amount of Federal Funds Obligated to the subrecipient;	\$888,625
(viii) Total Amount of the Federal Award;	\$76,172,934
(ix) Federal award project description, as required to be responsive to the Federal Funding Accountability and Transparency Act (FFATA);	Block Grant for Prevention and Treatment of Substance Abuse
(x) Name of Federal awarding agency, pass-through entity, and contact information for awarding official,	Department of Health and Human Services Substance Abuse and Mental Health Services Administration Washington State HCA Michael Langer, Assistant Director DBHR PO Box 45330 Olympia, WA 98504-5330 Michael.langer@hca.wa.gov
(xi) CFDA Number and Name; the pass-through entity must identify the dollar amount made available under each Federal award and the CFDA number at time of disbursement;	93.959
(xii) Identification of whether the award is R&D; and	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
(xiii) Indirect cost rate for the Federal award (including if the de minimis rate is charged per §200.414 Indirect (F&A) costs).	5%

Federal Award Identification for Subrecipients (reference 2 CFR 200.331)
Mental Health Block Grant

(i) Subrecipient name (which must match the name associated with its unique entity identifier);	Kitsap County DBA Salish Behavioral Health Administrative Service Organization
(ii) Subrecipient's unique entity identifier; (DUNS)	07-185-5191
(iii) Federal Award Identification Number (FAIN);	B09SM010056
(iv) Federal Award Date (see §200.39 Federal award date);	7/18/2019
(v) Subaward Period of Performance Start and End Date;	1/1/2020 – 12/31/2020
(vi) Amount of Federal Funds Obligated by this action;	\$166,348
(vii) Total Amount of Federal Funds Obligated to the subrecipient;	\$888,625
(viii) Total Amount of the Federal Award;	\$32,638,787
(ix) Federal award project description, as required to be responsive to the Federal Funding Accountability and Transparency Act (FFATA);	Block Grant for Community Mental Health
(x) Name of Federal awarding agency, pass-through entity, and contact information for awarding official,	Department of Health and Human Services Substance Abuse and Mental Health Services Administration Washington State HCA Michael Langer, Assistant Director DBHR PO Box 45330 Olympia, WA 98504-5330 Michael.langer@hca.wa.gov
(xi) CFDA Number and Name; the pass-through entity must identify the dollar amount made available under each Federal award and the CFDA number at time of disbursement;	93.958
(xii) Identification of whether the award is R&D; and	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
(xiii) Indirect cost rate for the Federal award (including if the de minimis rate is charged per §200.414 Indirect (F&A) costs).	5%

Exhibit R

Semi-Annual Trueblood Misdemeanor Diversion Funds Report

1. As per the Trueblood Misdemeanor Diversion Funds Report contract deliverable, the Contractor will provide a report on the number of individuals served with the Trueblood Misdemeanor Diversion Funds resources.
2. Please complete the following matrix and identify the number of individuals served with the Trueblood Misdemeanor Diversion Funds for each of the categories.
3. The report is due July 31, 2020. Please send your report to HCA MC Programs <hcamcprograms@hca.wa.gov.

	Number of unique individuals served during SFY 20 with Mis. Diversion funding
Crisis Services	
Freestanding Evaluation and Treatment (E&T)	
Mental Health Residential Treatment	
Room and Board in a Residential Setting	
Psychiatrist Inpatient Treatment - Facility Fee	
ITA Commitment Services	
ITA Judicial Administrative, 90, & 180 Day Commitment Hearings	
Program for Active Community Treatment (PACT)	
Outpatient Mental Health Treatment	
Supported Employment	
Respite Care	
Rehab Case Management	
Transportation (MH)	
Interpreter Services	
Ombuds	
Other:	