

 <p>Washington State Department of Social & Health Services <i>Transforming lives</i></p>		<h2 style="text-align: center;">COUNTY PROGRAM AGREEMENT AMENDMENT</h2>		DSHS Agreement Number 2363-48910 Amendment No. 03	
This Program Agreement Amendment is by and between the State of Washington Department of Social and Health Services (DSHS) and the County identified below.					Administration or Division Agreement Number Click here to enter text. County Agreement Number KC-281-23-C
DSHS ADMINISTRATION Developmental Disabilities Admin		DSHS DIVISION Division of Developmental Disabilities		DSHS INDEX NUMBER 1076 CCS CONTRACT CODE 1076	
DSHS CONTACT NAME AND TITLE Wendi Winchel			DSHS CONTACT ADDRESS PO BOX 45315 Olympia, WA 98504-5315		
DSHS CONTACT TELEPHONE (360) 725-4264		DSHS CONTACT FAX (360) 586-6502		DSHS CONTACT E-MAIL winchwa@dshs.wa.gov	
COUNTY NAME Kitsap County Kitsap County DDA County Services			COUNTY ADDRESS 614 Division St MS23 Pt. Orchard, WA 98366-4676		
COUNTY FEDERAL EMPLOYER IDENTIFICATION NUMBER			COUNTY CONTACT NAME Kelly Oneal		
COUNTY CONTACT TELEPHONE (360) 337-4624		COUNTY CONTACT FAX (360) 337-5721		COUNTY CONTACT E-MAIL KOneal@kitsap.gov	
IS THE COUNTY A SUBRECIPIENT FOR PURPOSES OF THIS PROGRAM AGREEMENT? No				CFDA NUMBERS	
AMENDMENT START DATE 02/01/2025		PROGRAM AGREEMENT END DATE 06/30/2025			
PRIOR MAXIMUM PROGRAM AGREEMENT AMOUNT \$10,018,240.00		AMOUNT OF INCREASE OR DECREASE \$361,355.00		TOTAL MAXIMUM PROGRAM AGREEMENT AMOUNT \$10,379,595.00	
REASON FOR AMENDMENT; CHANGE OR CORRECT OTHER: SEE PAGE TWO					
EXHIBITS. When the box below is marked with a check (4) or an X, the following Exhibits are attached and are incorporated into this Program Agreement Amendment by reference: <input checked="" type="checkbox"/> Exhibits (specify): B1					
This Program Agreement Amendment, including all Exhibits and other documents incorporated by reference, contains all of the terms and conditions agreed upon by the parties as changes to the original Program Agreement. No other understandings or representations, oral or otherwise, regarding the subject matter of this Program Agreement Amendment shall be deemed to exist or bind the parties. All other terms and conditions of the original Program Agreement remain in full force and effect. The parties signing below warrant that they have read and understand this Program Agreement Amendment, and have authority to enter into this Program Agreement Amendment.					
COUNTY SIGNATURE(S) 		PRINTED NAME(S) AND TITLE(S) Christine Rolles, Chair		DATE(S) SIGNED 6/9/25	
DSHS SIGNATURE 		PRINTED NAME AND TITLE Rainavimarie Rivas, Contracts Specialist		DATE SIGNED 6/12/2025	

This Program Agreement between the County and the State of Washington Department of Social and Health Services (DSHS) is hereby amended as follows:

1. The **Total Maximum Contract Amount** is hereby increased in the amount of \$361,355.00 for a new Contract Amount of \$10,379,595.00.
2. **Section 1. Definitions Specific to Program Agreement**, item g, number (2), is hereby replaced with the following language:
 - g. "Consumer Support" refers to direct Client service types as follows:
 - (2) "Child Development Services" or "CDS": Birth to three services are designed to meet the developmental needs of each eligible child and the needs of the family related to enhancing the child's development. Service may include: assistive technology, audiology, family training/home visits, health services, medical services, nursing services, nutrition services, occupational therapy, physical therapy, psychological services, sign language, social work, special instruction, speech-language pathology, vision, and transportation. Services are provided in natural environments to the maximum extent appropriate.
3. Exhibit B. **Program Agreement Budget** is hereby replaced with the following Exhibit B1, Program Agreement Budget.

All other terms and conditions of this Contract remain in full force and effect.

Exhibit B1

Program Agreement Budget

Original Budget ☒ Budget Revision
REVENUES

Fiscal Year	Fund Source	Original	1 st Revision	2 nd Revision	3 rd Revision
2024	State only	2,361,671	2,589,816	2,589,816	
	Medicaid	2,131,537	2,357,506	2,357,506	
	Total Rev.	\$4,493,208	\$4,947,322	\$4,947,322	\$

Fiscal Year	Fund Source	Original	1 st Revision	2 nd Revision	3 rd Revision
2025	State only			2,670,350	2,855,529
	Medicaid			2,400,568	2,576,745
	Total Rev.	\$	\$	\$5,070,918	\$5,432,273

	Job Foundation Funds	PASRR Funds	State Funds	Medicaid Funds	TOTAL
ADMINISTRATION (11, 12, 13, 14)	6,600	8,164	262,058	214,411	491,233
OTHER CONSUMER SUPPORTS (31, 32, 41, 92, 93, 94, 97)	4,620	0	197,683	161,739	364,042
CONSUMER SUPPORT					
STATE-ONLY (62, 64, 65, 67, 69)	0	0	22,105		22,105
Child Development (61)		0	99,212		99,212
MEDICAID CLIENTS (62, 64, 67, 69, 95, 96)	66,000	81,639	2,154,021	2,154,021	4,455,681
ROADS to COMMUNITY LIVING (62, 64, 65, 67, 69)		0	0	0	0
TOTAL	77,220	89,803	2,735,079	2,530,171	5,432,273

Debarred Contractors List

A debarred contractor may not bid on, or have a bid considered on, any public works contract. You can search and filter this list using the options presented below.

Company Name: Principal: From: To:
WA UBI Number: RCW: Penalty Due: Wage Due:
License Number:

[Download all debarment data](#)

Show <div>25</div> per page	Showing 0 records								First	Previous	Next	Last
Company Name	UBI	License	Principals	Related Business	Status	RCW	Debar Begins	Debar Ends	Penalty Due	Wages Due		
There are no records that match your search criteria.												
Show <div>25</div> per page	Showing 0 records								First	Previous	Next	Last