

851.22.002A

Revision 2000-09-02
KC-486-20-A
CFDA#: 93.959

2a
3/8/22

CONTRACT AMENDMENT A

This CONTRACT AMENDMENT is made and entered into between SALISH BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES ORGANIZATION, through Kitsap County, as its administrative entity, a political subdivision of the State of Washington, with its principal offices at 614 Division Street, Port Orchard, Washington 98366, hereinafter "SBHASO", and True Star Behavioral Health Services, hereinafter "CONTRACTOR."

In consideration of the mutual benefits and covenants contained herein, the parties agree that their Contract, numbered as Kitsap County Contract No. KC-486-20, and executed on January 11, 2021, shall be amended as follows:

1. **Page 1: Contract Term** is amended as follows:

January 1, 2021 – December 31, 2022.

2. **Page 1: Amount** is amended as follows:

\$76,972.20

3. **Attachment A: Special Terms and Conditions** is amended as follows:

The following term is added as to Section 6. Federal Block Grant:

f. FBG funds may not be used, directly or indirectly, to purchase, prescribe, or provide marijuana or treatment using marijuana. Treatment in this context includes the treatment of opioid use disorder. FBG funds also cannot be provided to any individual or organization that permits marijuana use for the purposes of treating substance use or mental disorders. See, e.g., 45 C.F.R. § 75.300(a), 21 U.S.C. §§ 812(c)(10) and 841 (prohibiting the possession, manufacture, sale, purchase or distribution of marijuana). This prohibition does not apply to those providing such treatment in the context of clinical research permitted by the DEA and under the Federal Drug Administration (FDA)-approved investigational new drug application where the article being evaluated is marijuana or a constituent thereof that is otherwise a banned substance under federal law.

4. **Attachment C: Budget** is deleted entirely and replaced as attached.
5. If this Contract Amendment extends the expiration date of the Contract, then the Contractor shall provide an updated certificate of insurance evidencing that any required insurance coverages are in effect through the new contract expiration date. The Contractor shall submit the certificate of insurance to:

Program Lead, Salish Behavioral Health Administrative Services Organization
Kitsap County Department of Human Services
614 Division Street, MS-23
Port Orchard, WA 98366

Upon receipt, the Human Services Department will ensure the submission of all insurance documentation to the Risk Management Division, Kitsap County Department of Administrative Services.

6. Except as expressly provided in this Contract Amendment, all other terms and conditions of the original Contract, and any subsequent amendments, addenda or modifications thereto, remain in full force and effect.

This amendment shall be effective January 1, 2022.

Dated this 8th day of March, 2022.

**SALISH BEHAVIORAL HEALTH
ADMINISTRATIVE SERVICES
ORGANIZATION, By
KITSAP COUNTY BOARD OF
COMMISSIONERS, Its Administrative
Entity**

**CONTRACTOR:
True Star Behavioral Health
Services**

E. E. Wolfe
Edward E. Wolfe, Chair

Mark Ozias
Mark Ozias, Chair
Clallam County Board of
Commissioners

Charlotte Garrido
Charlotte Garrido, Commissioner

I attest that I have the authority to sign
this contract on behalf of True Star
Behavioral Health Services

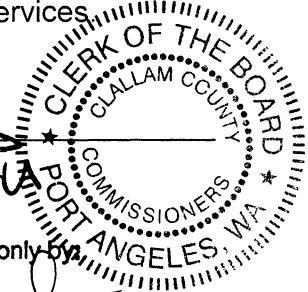
Robert Gelder
Robert Gelder, Commissioner

Elizabeth Stanley
DATE *3/28/2022*
Clerk

DATE 3/28/2022

ATTEST
Dana Daniels
Dana Daniels, Clerk of the Board

Approved as to form only by
Elizabeth Stanley
Elizabeth Stanley
Civil Deputy Prosecuting Attorney
Clallam County



ATTACHMENT C: BUDGET/RATE SHEET

Budget Summary			
Contractor: True Star Behavioral Health			
Contract No:	KC-486-20		
Contract Period:	01/01/21 - 12/31/22		
Expenditure	Previous	Changes this Contract	Current
Period 1: 01/01/21 - 12/31/21			
CJTA	35,061.00	0.00	35,061.00
SUD Youth Services and Supports (DMA)	6,850.00		6,850.00
Period 1 Budget Total	41,911.00	0.00	41,911.00
Period 2: 01/01/22 - 12/31/22			
CJTA	0.00	35,061.20	35,061.20
Period 2 Budget Total	0.00	35,061.20	35,061.20
Contract Total	41,911.00	35,061.20	76,972.20

CERTIFICATE OF MEMBERSHIP IN THE WASHINGTON COUNTIES RISK POOL

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE JOINT SELF-INSURANCE LIABILITY COVERAGE AFFORDED BY THE WASHINGTON COUNTIES RISK POOL

MEMBER COUNTY: Clallam County, Washington Attn: Tom Reyes, Risk Manager 223 East Fourth St, Suite 16 Port Angeles, WA 98362	Liability Coverage Afforded by the: Washington Counties Risk Pool 2558 R W Johnson Rd SW, Suite 106 Tumwater, WA 98512-6103
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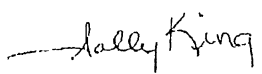
Clallam County (the "County") is a member of the Washington Counties Risk Pool (the "Pool"), as authorized by RCW 48.62.031, and the County is covered by the Pool's Joint Self-Insurance Liability Program. The Pool's Joint Self-Insurance Liability Program was created by interlocal cooperative agreement amongst the Pool's member counties to share risks by "jointly, self-insuring" certain third-party liabilities. The Pool is **NOT** an insurance company. Claims that are covered under a Memorandum of Liability Coverage ("MLC") from the Pool and were submitted under Chapter 4.96 RCW ("*Actions against political subdivisions, municipal and quasi-municipal corporations*") against the County, its employees, officers, volunteers and agents and/or actions in connection with or incidental to the performance of an agreement/contract which the County and/or its officers, employees or volunteers are found to be liable for will be paid by the Pool and/or the County.

MLC NUMBER:	20212022RISKPOOL-CI.CO
MLC EFFECTIVE DATE:	October 1, 2021
MLC EXPIRATION DATE:	October 1, 2022
LIMITS OF LIABILITY EACH OCCURRENCE	
BI AND PD COMBINED:	\$10,000,000

TYPES OF LIABILITY	
COVERAGE AFFORDED:	<u>General Liability</u>
	Including: Bodily Injury Personal Injury Property Damage Errors and Omissions/Professional Advertising Injury
	<u>Automobile Liability</u>

DESCRIPTION OF OPERATIONS/LOCATION/VEHICLE	CANCELLATION
Requested by: Health & Human Services, Juvenile, and Public Work's Department Various contracts to provide services During the MLC Period 10/1/21 - 10/1/22	SHOULD THE ABOVE DESCRIBED MLC BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUER WILL ENDEAVOR TO PROVIDE THIRTY (30) DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION NOR LIABILITY OF ANY KIND UPON THE ISSUER OR ITS AGENTS OR REPRESENTATIVES.

CERTIFICATE HOLDER:	ISSUE DATE:
	September 7, 2021

Sallish Behavioral Health Administrative Services Organization (SBHASO) Kitsap County 614 Division St, MS-23 Port Orchard WA 98366	 Claims Specialist
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No Results were found for

- True Star Behavioral Health Services



[Search Again](#)

Search conducted 12/1/2021 7:56:58 PM EST on OIG LEIE Exclusions database.
Source data updated on 11/9/2021 8:00:00 AM EST