

## DESCHUTES COUNTY DOCUMENT SUMMARY

(NOTE: This form is required to be submitted with ALL contracts and other agreements, regardless of whether the document is to be on a Board agenda or can be signed by the County Administrator or Department Director. If the document is to be on a Board agenda, the Agenda Request Form is also required. If this form is not included with the document, the document will be returned to the Department. Please submit documents to the Board Secretary for tracking purposes, and not directly to Legal Counsel, the County Administrator or the Commissioners. In addition to submitting this form with your documents, please submit this form electronically to the Board Secretary.)

Please complete all sections **above** the Official Review line.

**Date:**

**Department:**

**Contractor/Supplier/Consultant Name:**

**Contractor Contact:**

**Contractor Phone #:**

**Type of Document:** Amendment #6 to Intergovernmental Agreement #169509

**Goods and/or Services:** Intergovernmental Agreement (IGA) #169509 between the Oregon Health Authority (OHA) and Deschutes County outlines the program descriptions and funding for Deschutes County's Public Health Division for fiscal years 2022 and 2023.

Amendment #6 increases funding for PE 51-02, Regional Partnership Implementation, by \$181,752 for the period 7/1/21 to 6/30/22. It also modifies Exhibit J to include information required by the Code of Federal Regulations.

**Background & History:** In July of 2021, the Deschutes County Board of Commissioners approved the signing of Oregon Health Authority Intergovernmental Agreement #169509, which outlines the services and financing of Public Health for the two year period of July 1, 2021 to June 30, 2023.

This amendment increases overall funding from \$6,958,961.08 (amendment 5) to \$7,140,713.08.

**Agreement Starting Date:**

**Ending Date:**

**Annual Value or Total Payment:**

Insurance Certificate Received (check box)

Insurance Expiration Date:

Check all that apply:

RFP, Solicitation or Bid Process

Informal quotes (<\$150K)

Exempt from RFP, Solicitation or Bid Process (specify – see DCC §2.37)

**Funding Source:** (Included in current budget?  Yes  No)

If **No**, has budget amendment been submitted?  Yes  No

**Is this a Grant Agreement providing revenue to the County?**  Yes  No

Special conditions attached to this grant:

Deadlines for reporting to the grantor:

If a new FTE will be hired with grant funds, confirm that Personnel has been notified that it is a grant-funded position so that this will be noted in the offer letter:  Yes  No

Contact information for the person responsible for grant compliance: Name:   
Phone #:

**Departmental Contact:**

**Deputy Director Approval:**

**Director Approval:**

**Signature:** *nahad sadr-azodi*  
nahad sadr-azodi (Mar 8, 2022 14:27 PST)

**Email:** nahad.sadr-azodi@deschutes.org

**Title:** Director of PH

**Company:** DCHS

**Signature:** *Erik Kropp*  
Erik Kropp (Mar 8, 2022 14:30 PST)

**Email:** erik.kropp@deschutes.org

**Title:** Interim Health Services Director

**Company:** Deschutes County

**Distribution of Document:** Michele Carroll, Deschutes County Health Services.

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**Official Review:**

County Signature Required (check one):  BOCC  Department Director (if <\$50K)

Administrator (if >\$50K but <\$150K; if >\$150K, BOCC Order No. \_\_\_\_\_)

Document Number 2022-251\_\_\_\_\_