

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:

Contact:

Type of Document: Amendment #1 to CMHP Agreement 2021-323

Goods and/or Services: PacificSource Community Solutions, Inc. (PSCS) contracts with Deschutes County Health Services as a Community Mental Health Program (CMHP). Deschutes County Health Services provides treatment to Oregon Health Plan (OHP) members for mental health, mental illness, addiction disorders and substance use disorders. Deschutes County Health Services is paid on a monthly capitation basis and PacificSource provides an incentive payment for meeting performance measures.

This Amendment #1 modifies language regarding wraparound work and implementing System of Care for the children's system. Reimbursement is based on a per-member per-month (PMPM) at a rate of \$1,319.

Background & History: PSCS delivers healthcare solutions to businesses and individuals throughout the Northwest and is an independent, wholly-owned subsidiary of PacificSource Health Plans, a non-profit community health plan. PSCS has been providing Medicaid plans to Oregonians since 1995 and currently offers Oregon Health Plans (OHP) coverage to individuals who need help through the PacificSource Coordinated Care Organization (CCO).

Deschutes County Health Services serves as a Wraparound Provider specializing in providing supports to eligible members, pursuant to Fidelity Wraparound requirements. Wraparound is an intensive care coordination process for youth with emotional and behavioral disorders who are involved in multiple systems. These systems include mental health, addictions, child welfare, intellectual or developmental disabilities, juvenile justice, and education. Wraparound is a team-based, strengths-based process that organizes a youth-and-family driven system of services and supports. Services and supports are individualized for a youth and family to achieve a positive set of outcomes.

This Amendment #1 outlines the expectations and services administered for wraparound care coordination. These services include but are not limited to ensuring the following:

- Certified provider administer the Child and Adolescent Needs and Strengths Assessment (CANS);
- Staff are trained in integration and foundations of Trauma Informed Care, recovery principles, motivational interviewing, and rendering services in a culturally and linguistically appropriate manner;
- Adhere to applicable elements of the System of Care Wraparound Initiative Guidance Document;
- Complete required documents for enrolled youth and their family pursuant to the Fidelity model.

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 and Title:
Phone #:

Deputy Director Approval:

Department Director Approval:

Signature: Janice Garceau
Janice Garceau (Mar 4, 2022 13:51 PST)
Email: janice.garceau@deschutes.org
Title: Behavioral Health Director
Company: Deschutes County Health Services

Signature: Erik Kropp
Erik Kropp (Mar 4, 2022 14:38 PST)
Email: erik.kropp@deschutes.org
Title: Interim Health Services Director
Company: Deschutes County

Distribution of Document: Grace Justice Evans, Deschutes County Health Services

Official Review:

County Signature Required (check one): BOCC Department Director (if <\$50K)
 Administrator (if >\$50K but <\$150K; if >\$150K, BOCC Order No. _____)

Legal Review _____ Date _____

Document Number 2022-111