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: November 4, 2021 Department: Administrative; Property Management

Licensee Name: Mosaic Medical

Licensee Contact: Steve Strang, CFO Licensee Telephone #: 541-408-9491

Type of Document: Revocable License

Goods and/or Services: Primary Medical Care Clinic

Background & History:

Deschutes County owns a 6,524 square foot building located at 406 W Antler, Redmond, known as the North County Services Building or the "Antler Building" (Antler). Deschutes County Health Services (DCHS) and Mosaic Medical (Mosaic) have negotiated a Memorandum of Understanding (MOU), to operate a Primary Medical Care Clinic at Antler. Under the Revocable License, Mosaic will occupy and utilize +/- 134 square feet known as Room 106 for virtual/provider documentation room, and +/- 96 square feet known as Room 108 as an exam room.

The clinic will be open to the public, but will primarily serve many of the same Deschutes County Behavioral Health clients who are seen by staff at the Antler location. The co-location of Mosaic's Primary Care services in the same location enables integration of services for Behavioral Heath, as well as Public Health clients. The degree to which service providers from each organization can readily collaborate on treatment plans for clients, refer clients for needed services in a timely way, and provide ongoing communication regarding client progress is significantly improved through co-location.

Due to this benefit to DCHS clients, the space will be provided to Mosaic for zero consideration. However, Mosaic will pay a proportionate share of utility costs.

Under the terms of the License Agreement and accompanying MOU, Mosaic will be solely responsible for all materials, supplies and expenses necessary for their operation of the clinic. The basis and term of the License Agreement is dependent on the existence of the MOU between DCHS and Mosaic.

The term of the Revocable License begins December 15, 2021 and will expire June 30, 2027, and includes an option to extend.

Agreement Starting Date: December 15, 2021 Ending Date: June 30, 2027
Annual Value or Total Payment: \$0 Rent, Mosaic Medical will pay \$29.90/month for
proportional share of utilities for a total of \$179 for this fiscal year.
X Insurance Certificate Received (check box) Insurance Expiration Date: 7-1-2022
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? Not applicable Yes No
If No, has budget amendment been submitted? Yes No
Is this a Grant Agreement providing revenue to the County? Yes X No
Departmental Contact and Title: Deborah Cook, Property Specialist Telephone #: 541-385-3205
Department Director Approval: Kristie Bollinger, Signature Date
Distribution of Document: Return all documents to Property Management.
Official Review:
County Signature Required (check one): BOCC (if \$150,000 or more) – BOARD AGENDA Item County Administrator (if \$25,000 but under \$150,000) Department Director - Health (if under \$50,000) Department Head/Director (if under \$25,000)
Legal Review Date
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