

INTERAGENCY AGREEMENT for **Care Coordination Services**

HCA Contract Number: K7241

THIS AGREEMENT is made by and between Washington State Health Care Authority (HCA) and Kitsap County (Contractor), pursuant to the authority granted by Chapter 39.34 RCW.

CONTRACTOR NAME		CONTRACTOR DOING BUSINESS AS (DBA)			
Kitsap County		Salish Behavioral Health Administraion Organization			
CONTRACTOR ADDRESS Street 614 Division St. MS-23		City Port Orchard		State WA	Zip Code 98366
CONTRACTOR CONTRACT MANAGER Stephanie Lewis	CONTRACTO 360-337-4422	R TELEPHONE	CONTRACTOR E-MAIL ADDRESS sjlewis@kitsap.gov		IL ADDRESS

HCA PROGRAM	HCA DIVISION/SECTION
Enhanced Peer Support Program	Division of Behavioral Health and Recovery (DBHR)
HCA CONTRACT MANAGER NAME AND TITLE	HCA CONTRACT MANAGER ADDRESS
	Health Care Authority
Tracy Gillespie, Contract Manager	626 8th Avenue SE
	Olympia, WA 98504
HCA CONTRACT MANAGER TELEPHONE 360-643-7903	HCA CONTRACT MANAGER E-MAIL ADDRESS tracy.gillespie@hca.wa.gov

CONTRACT START DATE	CONTRACT END DATE	TOTAL MAXIMUM CONTRACT AMOUNT
Date of Execution	June 30, 2025	\$175,000

PURPOSE OF CONTRACT:

Phase 3 Trueblood Settlement Agreement: The Contractor will collaborate between the local Behavioral Health Administrative Service Organizations (BH-ASO's), and the Managed Care Organizations (MCO's) for Care Coordination Services.

The parties signing below warrant that they have read and understand this Contract, and have authority to execute this Contract. This Contract will only be binding upon signature by both parties. The parties may execute this contract in multiple counterparts, each of which is deemed an original and all of which constitute only one agreement. E-mail (electronic mail) transmission of a signed copy of this contract shall be the same as delivery of an original.

CONTRACTOR SIGNATURE	PRINTED NAME AND TITLE	DATE
Cherlotte Lanis	Charlotte Garrido, Chair	12/4/23
HCA SIGNATURE	PRINTED NAME AND TITLE Andria Howerton	DATE
Andrie Howerton	Deputy Contracts Administrator	12/13/2023

1. **DEFINITIONS**

"Authorized Representative" means a person to whom signature authority has been delegated in writing acting within the limits of the person's authority.

"Behavioral Health" means mental health and substance use disorder conditions and related services.

"Behavioral Health Administrative Service Organizations" or "BH-ASO's" means an entity selected by the Medicaid agency to administer behavioral health programs, including crisis services for individuals in a fully integrated managed care regional service area.

"Behavioral Health Organization or "BHO" means any county authority or group of county authorities or other entity recongnized by HCA that provides or contracts for mental health services and substance use disorder treatement services within a defined regional service area.

"Care Coordination" means to improve health outcomes by ensuring that care from disparate providers is not delivered in silos, and that the person being supported receives the most appropriate care while ensuring that services are not duplicated.

"Confidential Information" means information that may be exempt from disclosure to the public or other unauthorized persons under chapter 42.56 RCW or chapter 70.02 RCW or other state or federal statutes or regulations. Confidential Information includes, but is not limited to, any information identifiable to an individual that relates to a natural person's health, finances, education, business, use or receipt of governmental services, names, addresses, telephone numbers, social security numbers, driver license numbers, financial profiles, credit card numbers, financial identifiers and any other identifying numbers, law enforcement records, HCA source code or object code, or HCA or State security information.

"Continuum of Care" or "CoC" means the group responsible for carrying out the duties defined in the CoC Program rule and consists of projects that provide supportive services to individuals and families. The group must be composed of representatives of relevant organizations within the geographic area served by the Continuum.

"**Contract**" or "**Agreement**" means the entire written agreement between HCA and the Contractor, including any attachments, exhibits, documents, or materials incorporated by reference. Contract and Agreement may be used interchangeably.

"**Contractor**" means its employees and agents. Contractor includes any firm, provider, organization, individual or other entity performing services under this Agreement. It also includes any Subcontractor retained by Contractor as permitted under the terms of this Agreement.

"**Co-responder**" means teams consisting of first responder(s) and behavioral health professional(s) to engage with Individuals experiencing behavioral health crises.

"Crisis" means a behavioral health crisis, defined as a turning point, or a time, a stage, or an event, whose outcome includes a distinct possibility of an undesirable outcome.

"Crisis Services (Behavioral Health)" means providing evaluation and short-term treatment and other services to Individuals with an emergent mental health condition or who are intoxicated or incapacitated due to substance use and when there is an immediate threat to the Individual's health or safety.

"**Data**" means information disclosed, exchanged or used by Contractor in meeting requirements under this Agreement. Data may also include Confidential Information as defined in this Contract.

Division of Behavioral Health and Recovery" or "DBHR" means a Division within the Health Care Authority that provides funding, training, and technical assistance to community-based providers for prevention, intervention, treatment, and recovery support services to people in need.

"Department of Social and Health Services" or "DSHS" is a state government agency that provides many types of services and benefits to people who live in Washington State who need support to be safe and healthy.

"Health Care Authority" or "HCA" means the Washington State Health Care Authority, any division, section, office, unit or other entity of HCA, or any of the officers or other officials lawfully representing HCA.

"Information and Communication Technology" or "ICT" means information technology and other equipment, systems, technologies, or processes, for which the principal function is the creation, manipulation, storage, display, receipt, or transmission of electronic data and information, as well as any associated content. Examples include computers and peripheral equipment; information kiosks and transaction machines; telecommunications equipment; customer premises equipment; multifunction office machines; software; applications; websites; videos; and electronic documents.

"Managed Care Organization" or **"MCO"** means an organization having a certificate of authority or certificate of registration from the Washington State Office of Insurance Commissioner that contracts with HCA under a comprehensive risk contract to provide prepaid health care services to eligible HCA Enrollees under HCA managed care programs.

"Regional Service Area" means a geographic area established by HCA and the Health Care Authority. The Contractor provides mental health services and substance use disorder treatment services within this area.

"Services" means all work performed or provided by Contractor pursuant to this Contract.

"Stabilization/Triage Services" means services provided in a facility licensed by the Department of Health (DOH) and certified by DBHR as either Crisis Stabilization Units or Crisis Triage Facilities.

"Stabilization Services" means services provided to Individuals who are experiencing a mental health or substance use crisis. These services are provided in the person's home, or another homelike setting, or a setting which provides safety for the Individual and the Mental Health Professional. Stabilization Services may be provided prior to an Intake Evaluation for behavioral health services.

"Statement of Work" or "SOW" means a detailed description of the work activities the Contractor is required to perform under the terms and conditions of this Contract, including the deliverables and timeline, and is included as Attachment 1.

"Subcontractor" means a person or entity that is not in the employment of the Contractor, who is performing all or part of the business activities under this Agreement under a separate contract with Contractor. The term "Subcontractor" means subcontractor(s) of any tier.

"Substance Use Disorder" means a diagnosable and persistent substance related disorder that seriously limits the individual's major life activities and/or ablility to live independently.

"Trueblood Class Members" means persons who are in jail and waiting to receive competency evaluation or competency restoration services as ordered by the court, people who have a history of receiving competency evaluation or competency restoration services, or people who have a higher likelihood of needing competency evaluation or competency restoration services in the future.

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IN CONSIDERATION of the mutual promises as set forth in this Contract, the parties agree as follows:

2. STATEMENT OF WORK

Contractor will furnish the necessary personnel, equipment, material and/or service(s) and otherwise do all things necessary for or incidental to the performance of work set forth in the Attachment 1, Statement of Work (SOW).

3. PERIOD OF PERFORMANCE

Subject to its other provisions, the period of performance of this Contract will commence on **Date of Execution (date of last signature)** and be completed on **June 30, 2025,** unless terminated sooner or extended upon written agreement between the parties.

4. PAYMENT

Compensation for the work provided in accordance with this Agreement has been established under the terms of RCW 39.34.130. The parties have determined that the cost of accomplishing the work herein will not exceed **\$175,000**. Payment for satisfactory performance of the work will not exceed this amount unless the parties mutually agree to a higher amount. Compensation for services will be based on the following rates or in accordance with the following terms, per the Attachment 1, SOW.

5. BILLING PROCEDURE

- 5.1. Contractor must submit accurate invoices to the following address for all amounts to be paid by HCA via e-mail to: <u>HCAAdminAccountsPayable@hca.wa.gov</u>. Include the HCA Contract number in the subject line of the email.
- 5.2. Invoices must describe and document to HCA's satisfaction a description of the work performed, the progress of the project, and fees. If expenses are invoiced, invoices must provide a detailed breakdown of each type. Any single expense in the amount of \$50.00 or more must be accompanied by a receipt in order to receive reimbursement. All invoices will be reviewed and must be approved by the Contract Manager or designee prior to payment.
- 5.3. Contractor must submit properly itemized invoices to include the following information, as applicable:
 - A. The HCA Contract number;
 - B. Contractor name, address, phone number;
 - C. Description of Services;
 - D. Date(s) of delivery;
 - E. Net invoice price for each item;
 - F. Applicable taxes;

- G. Total invoice price; and
- H. Payment terms and any available prompt payment discount.
- 5.4. Contractor will return incorrect or incomplete invoices for correction and reissue. The Agreement number must appear on all invoices, bills of lading, packages, and correspondence relating to this Agreement.
- 5.5. Payment will be considered timely if made within thirty (30) calendar days of receipt of properly completed invoices. Payment will be directly deposited in the bank account or sent to the address Contractor designated in this Agreement.
- 5.6. Upon expiration or termination any claims for payment for costs due and payable under this Agreement that are incurred prior to the expiration date must be submitted by Contractor within sixty (60) calendar days after the expiration date. There will be no obligation to pay any claims that are submitted sixty-one (61) or more calendar days after the expiration date ("Belated Claims"). Belated Claims will be paid at HCA's sole discretion, and any such potential payment is contingent upon the availability of funds.

6. ACCESSIBILITY

- 6.1. **REQUIREMENTS AND STANDARDS.** Each information and communication technology (ICT) product or service furnished under this Contract shall be accessible to and usable by individuals with disabilities in accordance with the Americans with Disabilities Act (ADA) and other applicable Federal and State laws and policies, including OCIO Policy 188, et seq. For purposes of this clause, Contractor shall be considered in compliance with the ADA and other applicable Federal and State laws if it satisfies the requirements (including exceptions) specified in the regulations implementing Section 508 of the Rehabilitation Act, including the Web Content Accessibility Guidelines (WCAG) 2.1 Level AA Success Criteria and Conformance Requirements (2008), which are incorporated by reference, and the functional performance criteria.
- 6.2. **DOCUMENTATION.** Contractor shall maintain and retain, subject to review by HCA, full documentation of the measures taken to ensure compliance with the applicable requirements and functional performance criteria, including records of any testing or simulations conducted.
- 6.3. **REMEDIATION.** If the Contractor claims that its products or services satisfy the applicable requirements and standards specified in this Section and it is later determined by HCA that any furnished product or service is not in compliance with such requirements and standards, HCA will promptly inform Contractor in writing of noncompliance. Contractor shall, at no additional cost to HCA, repair or replace the non-compliant products or services within the period specified by HCA. If the repair or replacement is not completed within the specified time, HCA may cancel the contract, delivery, task order, or work order, or purchase line item without termination liabilities or have any necessary changes made or repairs performed by employees of HCA or by another contractor, and Contractor shall reimburse HCA for any expenses incurred thereby.

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6.4. **INDEMNIFICATION.** Contractor agrees to indemnify and hold harmless HCA from any claim arising out of failure to comply with the aforesaid requirements.

7. AGREEMENT CHANGES, MODIFICATIONS AND AMENDMENTS

This Agreement may be amended by mutual agreement of the parties. Such amendments are not binding unless they are in writing and signed by an Authorized Representative of each party.

8. SUBCONTRACTING

Neither the Contractor nor any Subcontractor shall enter into subcontracts for any of the work contemplated under this Agreement without obtaining HCA's prior written approval. HCA shall have no responsibility for any action of any such Subcontractors.

9. ASSIGNMENT

The work to be provided under this Agreement, and any claim arising thereunder, is not assignable or delegable by either party in whole or in part, without the express prior written consent of the other party, which consent will not be unreasonably withheld.

10. CONTRACT MANAGEMENT

The Contract Manager for each of the parties, named on the face of this Contract, will be responsible for and will be the contact person for all communications and billings regarding the performance of this Agreement. Either party must notify the other party within thirty (30) days of change of Contract Management. Changes in Contract Management shall require an amendment.

11. DISALLOWED COSTS

The Contractor is responsible for any audit exceptions or disallowed costs incurred by its own organization or that of its Subcontractors.

12. DISPUTES

In the event that a dispute arises under this Agreement, it will be determined by a dispute board in the following manner: Each party to this Agreement will appoint one member to the dispute board. The members so appointed will jointly appoint an additional member to the dispute board. The dispute board will review the facts, Agreement terms and applicable statutes and rules and make a determination of the dispute. The dispute board will thereafter decide the dispute with the majority prevailing. The determination of the dispute board will be final and binding on the parties hereto. As an alternative to this process, either of the parties may request intervention by the Governor, as provided by RCW 43.17.330, in which event the Governor's process will control.

13. GOVERNANCE

This Agreement is entered into pursuant to and under the authority granted by the laws of the state of Washington and any applicable federal laws. The provisions of this Agreement will be construed to conform to those laws.

In the event of an inconsistency in the terms of this Agreement, or between its terms and any applicable statute or rule, the inconsistency will be resolved by giving precedence in the following order:

- A. Applicable Federal and State of Washington statutes and regulations;
- B. Attachment 1: Statement of Work; and
- C. Any other provisions of the agreement, including materials incorporated by reference.

14. INDEPENDENT CAPACITY

The employees or agents of each party who are engaged in the performance of this Agreement will not be considered for any purpose to be employees or agents of the other party.

15. RECORDS MAINTENANCE

- 15.1. The parties to this Agreement will each maintain books, records, documents and other evidence which sufficiently and properly reflect all direct and indirect costs expended by either party in the performance of the services described herein. These records will be subject to inspection, review or audit by personnel of both parties, other personnel duly authorized by either party, the Office of the State Auditor, and federal officials so authorized by law. All books, records, documents, and other material relevant to this Agreement will be retained for six years after expiration and the Office of the State Auditor, federal auditors, and any persons duly authorized by the parties will have full access and the right to examine any of these materials during this period.
- 15.2. Records and other documents, in any medium, furnished by one party to this Agreement to the other party, will remain the property of the furnishing party, unless otherwise agreed. The receiving party will not disclose or make available this material to any third parties without first giving notice to the furnishing party and giving it a reasonable opportunity to respond. Each party will use reasonable security procedures and protections to assure that records and documents provided by the other party are not erroneously disclosed to third parties.

16. TREATMENT OF ASSETS

16.1. Ownership

HCA shall retain title to all property furnished by HCA to Contractor under this contract. Title to all property furnished by the Contractor, for the cost of which the Contractor is entitled to

Washington State Health Care Authority HCA IAA K7241 Revised 07/2023 reimbursement as a direct item of cost under this contract, excluding intellectual property provided by the Contractor, shall pass to and vest in HCA upon delivery of such property by the Contractor. Title to other property, the cost of which is reimbursable to the Contractor under this Contract, shall pass to and vest in HCA upon (i) issuance for use of such property in the performance of this Contract, (ii) commencement of use of such property in the performance of this Contract, or (iii) reimbursement of the cost thereof by HCA, in whole or in part, whichever occurs first.

16.2. Use of Property

Any property furnished to Contractor shall, unless otherwise provided herein, or approved in writing by the HCA Contract Manager, be used only for the performance of and subject to the terms of this Contract. Contractor's use of the equipment shall be subject to HCA's security, administrative and other requirements.

16.3. Damage to Property

Contractor shall continuously protect and be responsible for any loss, destruction, or damage to property which results from or is caused by Contractor's acts or omissions. Contractor shall be liable to HCA for costs of repair or replacement for property or equipment that has been lost, destroyed or damaged by Contractor or Contractor's employees, agents or subcontractors. Cost of replacement shall be the current market value of the property and equipment on the date of the loss as determined by HCA.

16.4. Notice of Damage

Upon the loss of, destruction of, or damage to any of the property, Contractor shall notify the HCA Contract Manager thereof within one (1) Business Day and shall take all reasonable steps to protect that property from further damage.

16.5. Surrender of Property

Contractor will ensure that the property will be returned to HCA in like condition to that in which it was furnished to Contractor, reasonable wear and tear excepted. Contractor shall surrender to HCA all property upon the earlier of expiration or termination of this Contract.

17. RIGHTS IN DATA

Unless otherwise provided, data which originates from this Agreement will be "works for hire" as defined by the U.S. Copyright Act of 1976 and will be owned by HCA. Data will include, but not be limited to, reports, documents, pamphlets, advertisements, books, magazines, surveys, studies, computer programs, films, tapes and/or sound reproductions. Ownership includes the right to copyright, patent, register and the ability to transfer these rights.

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18. CONFIDENTIALITY

Each party agrees not to divulge, publish or otherwise make known to unauthorized persons confidential information accessed under this Agreement. Contractor agrees that all materials containing confidential information received pursuant to this Agreement, including, but not limited to information derived from or containing patient records, claimant file and medical case management report information, relations with HCA's clients and its employees, and any other information which may be classified as confidential, shall not be disclosed to other persons without HCA's written consent except as may be required by law.

19. SEVERABILITY

If any provision of this Agreement or any provision of any document incorporated by reference will be held invalid, such invalidity will not affect the other provisions of this Agreement, which can be given effect without the invalid provision if such remainder conforms to the requirements of applicable law and the fundamental purpose of this agreement, and to this end the provisions of this Agreement are declared to be severable.

20. FUNDING AVAILABILITY

HCA's ability to make payments is contingent on funding availability. In the event funding from state, federal, or other sources is withdrawn, reduced, or limited in any way after the effective date and prior to completion or expiration date of this Agreement, HCA, at its sole discretion, may elect to terminate the Agreement, in whole or part, or to renegotiate the Agreement subject to new funding limitations and conditions. HCA may also elect to suspend performance of the Agreement until HCA determines the funding insufficiency is resolved. HCA may exercise any of these options with no notification restrictions.

21. TERMINATION

Either party may terminate this Agreement upon 30-days' prior written notification to the other party. If this Agreement is so terminated, the parties will be liable only for performance rendered or costs incurred in accordance with the terms of this Agreement prior to the effective date of termination.

22. TERMINATION FOR CAUSE

If for any cause, either party does not fulfill in a timely and proper manner its obligations under this Agreement, or if either party violates any of these terms and conditions, the aggrieved party will give the other party written notice of such failure or violation. The responsible party will be given the opportunity to correct the violation or failure within 30 days. If failure or violation is not corrected, this Agreement may be terminated immediately by written notice of the aggrieved party to the other.

23. WAIVER

A failure by either party to exercise its rights under this Agreement will not preclude that party from subsequent exercise of such rights and will not constitute a waiver of any other rights under this Agreement unless stated to be such in a writing signed by an Authorized Representative of the party and attached to the original Agreement.

24. ALL WRITINGS CONTAINED HEREIN

This Agreement contains all the terms and conditions agreed upon by the parties. No other understandings, oral or otherwise, regarding the subject matter of this Agreement will be deemed to exist or to bind any of the parties hereto.

25. SURVIVORSHIP

The terms, conditions and warranties contained in this Agreement that by their sense and context are intended to survive the completion of the performance, expiration or termination of this Agreement shall so survive. In addition, the terms of the sections titled Rights in Data, Confidentiality, Disputes and Records Maintenance shall survive the termination of this Agreement.

ATTACHMENTS

Attachment 1: Statement of Work

ATTACHMENT 1: STATEMENT OF WORK

The Contractor must provide the services and staff, and otherwise do all things necessary for or incidental to the performance of work in the region (county or counties), as set forth herein.

- Trueblood Background: The Trueblood v. Washington State Department of Social and Health Services (DSHS) a class action lawsuit challenged unconstitutional delays in competency evaluation and restoration services for people detained in city and county jails. The state worked with the Disability Rights Washington to develop a Trueblood Contempt Settlement Agreement which establishes a plan for providing services to those involved in the criminal court system and for providing treatment to people when needed so they are less likely to become involved in the criminal court system.
- 2. Purpose: This Contract is for the purposes of assisting the Trueblood Settlement Agreement Phase 3 region of Salish to coordinate the projects within the Trueblood Settlement Agreement which requires an investment of resources. The Trueblood elements require the behavioral health system, court system, law enforcement and provider community to coordinate and communicate for successful implementation. Department of Social and Health Services (DSHS) and HCA have spent countless hours discussing the intersection and interdependencies between the projects. These same discussions also need to occur at the local level with the community stakeholders. Outreach and Education to local communities within the Phase 3 regions are woven throughout each of the Trueblood Settlement Agreement projects. Behavioral Health Administrative Service Organizations (BHA-SO's) play a pivotal role in facilitating presentations and updates to educate and inform local stakeholders. Funds would be issued through BHA-SO's to orchestrate the conversations between the programs that are implementing projects with multiple stakeholders. BH-ASO's play a pivotal role as a conduit between health, behavioral health, and the legal system.

3. The Contractor will provide the following:

- 3.1 The Contractor will collaborate between the local BHA-SO's and the Managed Care Organizations (MCO's) for Care Coordination. The intersection of the Trueblood Settlement Agreement projects is critical to the success of the implementation plan. Access to Crisis Services for individuals who have been identified as being in a mental health crisis and in need of Crisis Stabilization, Crisis Triage or Evaluation and Treatment, Washington Association of Sheriffs, and Police Chiefs (WASPC's) co-responder/field response projects, contempt fine projects are critical coordination strategies to divert individuals from the criminal justice system. Providing education and alignment around equity and trauma informed approaches are strategies within this objective.
- 3.2 The Contractor will coordinate and collaborate with the local Continuum of Care Programs, mobile crisis teams, homeless outreach teams such as the Projects to Assist in the Transition from Homelessness (PATH); Forensic PATH, Forensic Housing and Recovery through Peer Services (HARPS) and any contempt fine projects are necessary to address the shelter and housing needs of vulnerable individuals.

- 3.3 The Contractor will facilitate change management training events for the behavioral health system, court system, law enforcement and provider community in order to address a paradigm shift in how individuals with serious mental illness are entwined in the criminal justice system.
- 3.4 Facilitation of these events will require travel and accommodation costs for participation of the rural stakeholder and partners. Administration of these activities are to orchestrate the coordination of local behavioral health system, court system, law enforcement and provider community is challenging and will require professional facilitation.

4. Performance and Payment Chart:

	Contract Deliverables	Deliverables/Performance Measures	Due Dates	Payment
1.	Conduct training events (virtual or in-person) based on stakeholder feedback with topics such as change management, trauma informed approaches, equity, and motivational interviewing for behavioral health system, court system, law enforcement and provider community.	Provide a quarterly report with the number of individuals attending (virtual or in-person) from each of the organizations/systems represented.	Quarterly reports due on: 2024: 01/10/2024 04/01/2024 06/30/2024 10/10/2024 2025: 01/10/2025 04/01/2025 06/30/2025	\$3,750 per quarterly report submitted. Up to a total of \$26,250

2.	Facilitate conversations (virtual or in-person) between courts, law enforcement, prosecutors, District Attorney (DA), and Trueblood Settlement Agreement projects (maybe existing council or may need to be created). Ensure rural partners are included at their discretion.	Provide a quarterly report with the number of individuals attending (virtual or in-person) from each of the organizations/systems represented.	Quarterly reports due on: 2024: 1/10/2024 04/01/2024 06/30/2024 10/10/2024 2025: 01/10/2025 04/01/2025 06/30/2025	\$3,750 per quarterly report submitted. Up to a total of \$26,250
3.	Stakeholder communication/engagement (virtual or in-person) about Trueblood elements. Provide information on the type of questions or myths that exist within stakeholders and community members.	Provide a quarterly report with the number of individuals attending (virtual or in-person) from each of the organizations/systems represented.	Quarterly reports due on: 2024: 1/10/2024 04/01/2024 06/30/2024 10/10/2024 2025: 01/10/2025 04/01/2025 06/30/2025	\$3,750 per quarterly report submitted. Up to a total of \$26,250
4.	Facilitate MCO/BH-ASO Care Coordination meetings (virtual and in-person) for specific element projects such as mobile crisis and co- responder coordination.	Provide a quarterly report with the number of individuals attending (virtual or in-person) from each of the BH-ASO and MCO systems represented.	Quarterly reports due on: 2024: 1/10/2024 04/01/2024 06/30/2024 10/10/2024 2025: 01/10/2025	\$3,750 per quarterly report submitted. Up to a total of \$26,250

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5.	Facilitate a coordination event between the jail transition programs, contempt fine projects and Trueblood Settlement Agreement projects and community stakeholders such as the Homeless Continuum of Care, PATH.	Provide a quarterly report with the number of individuals attending (virtual or in-person) from each of the organizations/systems represented.	Quarterly reports due on: 2024: 1/10/2024 04/01/2024 06/30/2024 10/10/2024 2025: 01/10/2025 04/01/2025 06/30/2025	\$3,750 per quarterly report submitted. Up to a total of \$26,250
6.	Quarterly BH- ASO/HCA/DSHS debrief to discuss implementation strategies.	Provide a quarterly report with the number of individuals attending (virtual or in-person) from each of the organizations/systems represented.	Quarterly reports due on: 2024: 1/10/2024 04/01/2024 06/30/2024 10/10/2024 2025: 01/10/2025 04/01/2025 06/30/2025	\$6,250 per quarterly report submitted. Up to a total of \$43,750

- 5. **Consideration:** Total consideration payable to the Contractor for satisfactory performance of the work under this Contract and all Amendments is up to a maximum of **\$175,000** including any and all expenses and will be based upon receipt and acceptance of reports and documents established in the Performance and Payment Chart, section 4, above.
 - 5.1 If performance does not meet the requirements under the Performance and Payment Chart, payment will be earned after receipt and approval by the HCA Contract Manager with a corrective action plan that clearly and satisfactorily describes how and when performance will be met.