851. 23.015 20 Revision 2000 V9-08 1 2023 KC-486-20-E NOV 2 1 2023

CONTRACT AMENDMENT

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, amended March 8, 2022, November 14, 2022, March 13, 2023, and October 23, 2023, shall be amended as follows:

- 1. **Page 1: Amount** is amended as follows: \$130,074,19
- 2. **Page 1: Contract Term** is amended as follows: January 1, 2021 December 31, 2024
- 3. Attachment C: Budget is deleted entirely and replaced as attached.
- 4. 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.

5. 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, 2024.

Dated this 8 day of 700, 2024.

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

Katherine T. Wolker

Printine Royes

Katherine T. Walters, Chair

Christine Rolfes, Commissioner

Charlotte Garrido, Commissioner

Charlette Things

DATE

1-8-24

ATTEST

Dana Daniels, Clerk of the Board

CONTRACTOR: True Star Behavioral Health Services

Mark Ozias, Chair Clallam County Board of Commissioners

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

DATE

Approved as to form Deputy Prosecuting Attorney



Budget Summary Contractor: True Star Behavioral Health			
Contract No:	KC-486-20		
Contract Period:	01/01/21 - 12/31/24		
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	\$23,061.20	\$0.00	\$23,061.20
Period 2 Budget Total	\$23,061.20	\$0.00	\$23,061.20
Period 3: 01/01/23 - 12/31/23			
CJTA	\$32,417.66	\$0.00	\$32,417.66
Period 3 Budget Total	\$32,417.66	\$0.00	\$32,417.66
Period 4: 01/01/24 - 12/31/24			
CJTA	\$0.00	\$32,684.33	\$32,684.33
Period 4 Budget Total	\$0.00	\$32,684.33	\$32,684.33
Contract Total	\$97,389.86	\$32,684.33	\$130,074.19

Visit our tips page to learn how to best use the Exclusions Database. If you experience technical difficulties, please email the webmaster at webmaster@oig.hhs.gov.

Exclusions Search Results: Entities 9

No Results were found for

• True Star Behavioral Health

If no results are found, this individual or entity (if it is an entity search) is not currently excluded. Print this Web page for your documentation
Search Again
Search conducted 10/24/2023 2:12:50 PM EST on OIG LEIE Exclusions database.
Source data updated on 10/10/2023 8:00:00 AM EST

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:

Liability Coverage Afforded by the:

Clallam County, Washington Attn: Tom Reyes, Risk Manager 223 East Fourth St. Suite 16 Port Angeles, WA 98362 Washington Counties Risk Pool 2558 RW Johnson Rd SW. Suite 106 Tumwater, WA 98512-6103

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:
MLC EFFECTIVE DATE:
MLC EXPIRATION DATE:
LIMITS OF LIABLITY EACH OCCURRENCE
BI AND PD COMBINED:

20232024RISKPOOL-CLCO

10/1/2023

\$10,000,000

TYPES OF LIABILITY COVERAGE AFFORDED:

General Liability

Bodily Injury

Personal Injury Property Damage

Errors and Omissions/Professional

Advertising Injury

Automobile Liability

DESCRIPTION OF OPERATIONS/LOCATION/VEHICLE

Including:

CANCELLATION

Various contracts to provide services

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.

During the MT C Period 10/1/23 - 10/1/24

CERTIFICATE HOLDER:

ISSUE DATE:

September, 11th 2023

Mr M

Salish Behavioral Health Administrative Services Organization (SBHASO) Kitsap County 61d Division S1, MS-23 Port Orchard, WA 98366

Bryden Barbee, Risk Analyst