NORTH SOUND BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES ORGANIZATION, LLC (NORTH SOUND BH-ASO) CONTRACT AMENDMENT 3

CONTRACT #NORTH SOUND BH-ASO-PHS-ICN-23

Based on the Agreement of the parties to the above-referenced Contract between the North Sound Behavioral Health Administrative Services Organization, LLC (North Sound BH-ASO) and Pioneer Human Services (PHS) (Provider) dated March 14, 2023, (as amended by North Sound BH-ASO and Provider dated January 17, 2024, collectively the "Contract") is hereby amended as follows:

The purpose of this amendment is to provide funding for July 1, 2024 to December 31, 2024:

By mutual agreement of the parties, the following language is added to the agreement:

- Replace *Exhibit D_Provider Deliverables* with *Exhibit D(a)_Provider Deliverables*
- Replace Exhibit E(b)_Pioneer_Human_Services_ICN-Budget_24 with Exhibit E(c)_Pioneer Human Services_ICN_Budget

ALL TERMS AND CONDITIONS OF CONTRACT SHALL REMAIN IN FULL FORCE AND EFFECT.

THIS AMENDMENT IS EXECUTED BY THE PERSONS SIGNING BELOW, WHO WARRANT THAT THEY HAVE THE AUTHORITY TO EXECUTE THIS AMENDMENT.

THIS AMENDMENT SHALL BECOME EFFECTIVE ON THE DATE OF FINAL SIGNATURE BY THE PARTIES.

NORTH SOUND BH-ASO, LLC

PIONEER HUMAN SERVICES

JanRose Ottaway Martin Executive Director

Date

Anthony Wright CEO Date

North Sound Behavioral Health Administrative Services Organization Whatcom County Triage Cost Reimbursement Budget Pioneer Human Services Six Month Budget July 1, 2024 to December 31, 2024				
Revenues				
General State Funds Total	\$ \$	225,000.00 225,000.00		
Expenses				
Whatcom Triage Total	\$ \$	225,000.00 225,000.00		
Budget Amount Expenses Balance	\$	225,000.00 - 225,000.00		

North Sound Behavioral Health Administrative Services Organization Skagit County Triage Cost Reimbursement Budget Pioneer Human Services Six Month Budget July 1, 2024 to December 31, 2024				
Revenues				
General State Funds Total	\$ \$	100,000.00 100,000.00		
Expenses				
Skagit Triage Total	\$ \$	100,000.00 100,000.00		
Budget Amount Expenses Balance	\$	100,000.00 - 100,000.00		

North Sound Behavioral Health Administrative Services Organization Island County Triage Cost Reimbursement Budget Pioneer Human Services Six Month Budget July 1, 2024 to December 31, 2024				
Revenues				
General State Funds Total	\$ \$	225,000.00 225,000.00		
Expenses				
Island Triage Total	\$ \$	225,000.00 225,000.00		
Budget Amount Expenses Balance	\$	225,000.00 - 225,000.00		

North Sound Behavioral Health Administrative Services Organization Behavioral Health Enhancement Funds Cost Reimbursement Budget Pioneer Human Services Six Month Budget July 1, 2024 to December 31, 2024				
Revenues				
BHEF Proviso Funds Total	\$ \$	70,200.00 70,200.00		
Expenses				
Retention and Recruitment Total	\$ \$	70,200.00 70,200.00		
Budget Amount Expenses	\$	70,200.00		
Balance	\$	70,200.00		



EXHIBIT D(a): PROVIDER DELIVERABLES

PROVIDER: Pioneer Human Services

CONTRACT: NORTH SOUND BH-ASO-PHS-ICN-23

CONTRACT PERIOD: 01/01/2023 - 06/30/2025

Identification of Deliverables

Provider shall provide all deliverables as identified in the Required Deliverables Grid below. Templates for all reports that the provider is required to submit to North Sound BH-ASO may be found on the North Sound BH-ASO website under *Forms & Reports* (click <u>here</u>). North Sound BH-ASO may update the templates from time to time and will notify providers of any changes. Deliverables are to be submitted to <u>deliverables@nsbhaso.org</u> on or before the indicated due date unless otherwise Noted. For more information regarding a specific deliverable, please refer to the indicated Supplemental Provider Service Guide reference (as applicable) or email <u>deliverables@nsbhaso.org</u>.

DELIVERABLE	FREQUENCY	DUE DATE	SUPPLEMENTAL PROVIDER SERVICE GUIDE REFERENCE
Exclusion Attestation Monthly Report	Monthly	Last Business Day of each month following the month being reported	Chapter 11
Crisis Stabilization & Triage Monthly Funding Report	Monthly	10 th of each month following the month being reported	Not Applicable
Certification of Liability Insurance	Annual	Annually prior to expiration	Not Applicable
Compliance Training Attestation Statement	Annual	Annual notification will be sent by North Sound BH-ASO Compliance Officer with further information	Chapter 11
Ownership and Control Disclosure Form	Annual	Annually on January 31 st , or more frequently when changes occur	Not applicable