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

CONTRACT AMENDMENT #2

CONTRACT #NORTH SOUND BH-ASO-SEA MAR COMMUNITY HEALTH CENTERS-ICN-19-21

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 Sea Mar Community Health Centers (Contractor) dated March 28, 2019, (as amended by North Sound BH-ASO and Provider dated June 25, 2020, collectively the "Contract") is hereby amended as follows:

The purpose of this amendment is to add Behavioral Health Enhancement Funds for the recruitment and retention of the workforce serving Non-Medicaid individuals and Assisted Outpatient Treatment for individuals on Less Restrictive Orders and/or Conditional Releases.

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

- 1. NS-BH-ASO-Sea Mar-Budget-21
- 2. Replace Exhibit A-i with Exhibit A-ii
- 3. Replace Exhibit B with Exhibit B-i

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		SEA MAR COMMUNITY HE	EALTH CENTERS
Joe Valentine Executive Director	Date	Rogelio Riojas CEO	Date

SEA MAR Schedule of Services 2019-2021

Identification of Contracted Services

Provider shall provide behavioral health covered crisis services, as indicated in the Contracted Services Grid below, within the scope conditions and eligibility outlined in the Contract and/or Exhibits, and the requirements of any applicable government sponsored of Provider's business and practice, in accordance with the Sea Mar Base Provider Agreement, North Sound BH-ASO Behavioral Health Policies and Procedures, Supplemental Provider Service Guide, North Sound BH-ASO and HCA standards, the terms, program.

Contracted Services Grid

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Contracted Timeframe	Service	Supplemental Provider Service Guide Reference
Outpatient Services (Within Available Resources)	ilable Resources)	Section 20.1
Effective June 1, 2020	Mental Health Outpatient and Medication Management	Section 20.1
Effective July 1, 2019	Substance Use Disorder Outpatient Benefit	Section 19.1
	Medication-Assisted Treatment	Section 20.1
	Program for Assertive Community Treatment (PACT)	Section 20.8
Evaluation and Treatment		Section 20.4
	Sixteen-Bed Evaluation and Treatment Facility Services	Section 20.4
Crisis Services		Chapter 18
	Crisis Prevention and Intervention Teams	Section 20.2.2
	Crisis Stabilization	Chapter 18;20.2.4
	Involuntary Treatment Evaluation (ITA)	Chapter 18; 20.2.3
	Emergency Telephone Services (Toll Free Crisis Hotline)	Section 20.2.5
Regional Ombuds Services		Chapter 13
		\$18,000 mo.
	Ombuds Services	\$216,000 Annually
Withdrawal Management Servic	Withdrawal Management Services (Within in Available Resources)	Chapter 5
	Sub-Acute Withdrawal Management	Section 20.1
	Acute Withdrawal Management	Section 20.1

EXHIBIT A-ii

	Secure Detoxification	Chapter 18
Substance Use Disorder Residential (Within Available Resources)	ial (Within Available Resources)	Section 20.10
Effective July 1, 2019	Youth - Intensive Inpatient	Section 20.10.2
Effective July 1, 2019	Youth – Recovery House	Section 20.10.6
	Adult - Intensive Inpatient	Section 20.10.1
	Adult - Long-Term Care	Section 20.10.3
	Adult - Recovery House	Section 20.10.5
	Pregnant and Parenting Women Residential Treatment	Section 2.1
	Pregnant and Parenting Women Housing Support	Section 2.1; 20.12.4
Mental Health Services in a Resia	Mental Health Services in a Residential Setting (Within Available Resources)	Section 20.7
Crisis Triage (Within Available Resources)	sources)	Chapter 18
Legislative Proviso Services (Within Available Resources)	in Available Resources)	Chapter 19
	Jail Transition Services	Section 19.3
	E&T Discharge Planners	Section 17.2
	Program for Assertive Community Treatment (PACT)	Section 20.8
	Designated Marijuana Account (DMA)	Section 19.2
	Juvenile Drug Court	Section 19.4
Effective March 1, 2021	Assisted Outpatient Treatment	Section 19.1
PATH Grants		Chapter 15.1
	PATH Grant	Section 15.1
	PathFinder	Section 15.1
Federal Block Grant		Chapter 15
	Peer Bridgers	Section 19.5

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Outpatient Services Mental Health and Substa	Outpatient Services Mental Health and Substance Use Disorder (within available resources)	
FFS Per hour	Prescriber – Psychiatrist/MDs	\$497.00 to \$536.76
FFS Per hour	Prescriber – Nurse Practitioner/Physician Asst.	\$315.00 to \$340.20
FFS Per hour	Registered Nurse/LPN	\$198.00 to \$213.84
FFS Per hour	PhD and Masters-Level Providers	\$165.00 to \$277.56
FFS Per hour	Bachelor's, AA Level Clinician	\$123.00 to \$172.80
FFS Per hour	Peer Counselor	\$97.00 to \$136.08
FFS Per hour	Medical Assistant – Certified	\$97.00 to \$136.08
FFS Per hour	Request for Service	\$65.00 to \$70.20
FFS Group Rate per Person per Hour MH	Prescriber – Psychiatrist/MDs	\$124.25 to \$134.19
FFS Group Rate per Person per Hour MH	Prescriber – Nurse Practitioner/Physician Asst.	\$78.75 to \$85.05
FFS Group Rate per Person per Hour MH	Registered Nurse/LPN	\$49.50 to \$69.39
FFS Group Rate per Person per Hour MH	PhD and Masters-Level Providers	\$41.25 to \$57.78
FFS Group Rate per Person per Hour MH	Bachelor's, AA Level Clinician	\$30.75 to \$43.20
FFS Group Rate per Person per Hour MH	Peer Counselor	\$24.25 to \$34.02
Adult Group Rate per Person per Hour SUD	Chemical Dependency Professional	\$41.25 to \$57.78
Adult Group Rate per Person per Hour SUD	Chemical Dependency Professional Trainee	\$33.25 to \$46.71
Child Group Rate per Person per Hour SUD	Chemical Dependency Professional	\$57.26 to \$80.20
Child Group Rate per Person per Hour SUD	Chemical Dependency Professional Trainee	\$46.36 to \$65.12
Intensive Outpatient Services Mental Health (within available resources)	vithin available resources)	
FFS Per hour	Prescriber – Psychiatrist/MDs	\$497.00 to \$536.76
FFS Per hour	Prescriber – Nurse Practitioner/Physician Asst.	\$315.00 to \$340.20
FFS Per hour	Registered Nurse/LPN	\$227.70 to \$319.14
FFS Per hour	PhD and Masters-Level Providers	\$189.75 to \$265.79
FFS Per hour	Bachelor's, AA Level Clinician	\$141.45 to \$198.72

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FFS Per hour	Peer Counselor	\$111.55 to \$156.49
Medicaid Assisted Treatment		
Per Dose Inclusive Bundled Case Rate	Opiate Treatment Program (Opiate Substitution Treatment)	\$18.02 per dose
Program for Assertive Community Treatment (PACT) Non-Medicaid only	(PACT) Non-Medicaid only	
Expense Reimbursement Monthly	Program for Assertive Community Treatment (PACT) Snohomish & Skagit	\$2,918 per slot
Expense Reimbursement Monthly	Program for Assertive Community Treatment (PACT) Whatcom	{\$TBD}
Telepsychiatry		
	Tele Prescriber Services contracted and paid by ASO. Provider contracted telehealth services not in this category are paid on the	
Per Scheduled hour delivered	outpatient prescriber rates.	\$125.00 to \$270.00
FFS Per hour	Provider room and assistance fee for Tele prescriber services	\$65.00 to \$91.26
Jail Transitions Services		
Cost Reimbursement Monthly	Jail Transitions Services	Monthly Budget Range \$0 to \$19,238.18
Evaluation and Treatment		
Per Bed Day	Evaluation and Treatment Services 16 bed Facility-Mukilteo	\$1,060
Per Bed Day	Evaluation and Treatment Services 16 bed Facility-Sedro Woolley	{\$TBD}
Daily Rate	Out of Region E&T Services	\$780.00 to \$1,100.00
Discharge Planners	Evaluation & Treatment Facilities (Mukilteo & Sedro Woolley)	\$7,228 per month per facility
Crisis Services		
Capacity - Monthly	Crisis Prevention and Intervention Teams (CPIT)	\$0 to \$21,128
Capacity - Monthly	Stabilization & ITA Services	\$34,100 to \$195,726
Expense Reimbursement	ITA — Snohomish County	Monthly Budget \$0 to \$281,934.00
Capacity – Monthly	Emergency Telephone Services	\$97,584.00 to \$119,270
Capacity – Monthly	Emergency Chat Line Services	\$0 to \$24,758.00

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SEA MAR COMPENSATION SCHEDULE

Withdrawal Management Services (within available resources)	ailable resources)	
Daily Rate	Acute Withdrawal Management – 16 Beds	{\$TBD}
Daily Rate	Acute Withdrawal Management	{\$310.00 to \$385.00}
Daily Rate	Sub-Acute Withdrawal Management	{\$TBD}
Daily Rate	Secure Detoxification	{\$525.00 to \$630.00}
Daily Rate	Sub-Acute Withdrawal Management – 8 Beds	{\$TBD}
Substance Use Disorder Residential (within av	available resources)	
Daily Rate	Adult Intensive Residential	\$138.00 to \$332.20
Daily Rate	Adult Long Term Residential	\$69.60 to \$187.00
Daily Rate	Adult Recovery House Residential	\$53.50 to \$151.80
Daily Rate	PPW Intensive – 14 Beds Residential	{\$TBD}
Daily Rate	PPW Intensive – 9 Beds Residential	{\$TBD}
Daily Rate	Therapeutic Intervention for Children at 9 and 14 Bed facility	{\$TBD}
Daily Rate	PPW Intensive Residential without Child	\$147.64 to \$235.62
Daily Rate	PPW Intensive Residential with Child	\$182.52 to \$264.33
Daily Rate	Therapeutic Intervention for Children	\$58.05 to \$78.83
Daily Rate	Youth Intensive Residential	\$175.50 to \$418.00
Daily Rate	Youth Long Term Residential	\$160.00 to \$263.00
Daily Rate	Youth Recovery House Residential	\$160.00 to \$263.00
Mental Health Residential (within available re	resources)	
Bed Day	Assisted Living Home Residential Treatment 67 Beds	{\$TBD}
Bed Day	Adult Residential Treatment Facility - 16 Bed	\$346.00
Daily Rate	Residential Treatment Services (alternative payment method)	{\$73.60 to \$350.00}
Triage (within available resources)		
FFS	Stabilization Triage – Snohomish 16 Beds	{\$TBD}
FFS	Stabilization Triage – 8 Beds of a 16-bed unit	{\$TBD}
Regional Ombuds Services		\$18,000 mo. \$216,000 annually

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Projects for Assistance in Transition from Homelessness (PATH)	elessness (PATH)	
Cost Reimbursement	PATH Outreach Services-Snohomish	Budget {\$0 to \$360,335}
Cost Reimbursement	PATH Outreach Services-Whatcom	Budget {\$0 to \$124,466}
PATHFINDER		
Pay for Performance	PATH Peer -Snohomish	{\$0 to \$115,844}
Pay for Performance	PATH Peer- Whatcom	{\$0 to \$115,844}
Designated Marijuana Account (DMA		
Cost Reimbursement	DMA Services	\$48,411per month
Assisted Outpatient Treatment		
Cost Reimbursement	Assisted Outnatient Services	{\$1.200 per person-
Juvenile Drug Court		
Cost Reimbursement	Drug Court BH Services	\$11,651 per month

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