

**NORTH SOUND BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES ORGANIZATION, LLC
(NORTH SOUND BH-ASO)
CONTRACT AMENDMENT #2**

CONTRACT # NORTH SOUND BH-ASO-LIFELINE CONNECTIONS-MHBG-20-22

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 Lifeline Connections (Provider) November 10, 2020, (as amended by North Sound BH-ASO and Provider July 12, 2021, collectively the "Contract") is hereby amended as follows:

The purpose of this amendment is to provide the new performance payment exhibit:

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

1. Replace Exhibit C with Exhibit C-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

LIFELINE CONNECTIONS

Joe Valentine Date
Executive Director

Joe Foster Date
VP of Finance and Operations

EXHIBIT C-i

HARPS Housing Bridge Subsidy Guidelines July 1 - June 30

Goal	Task	Performance Measure	Due Date*	Payment	Total
1	Weekly updates on number of referrals from state psychiatric hospitals (Western State Hospital and Eastern State Hospital)	Send a Word Document via email to the HCA HARPS Program Manager with the number of individuals referred by the State Hospital(s), date of the referral, and current housing status for participants referred by the state hospitals. <i>(Do NOT include any identifying personal information in the updates)</i>	Tuesday of each following week	\$200 per HARPS team weekly update x 4 weeks per month x 12 month for a maximum of 12 months	\$9,600
2	At least two (2) FTE from the HARPS team attend an HCA facilitated training event on the SAMHSA model Evidence-Based Practice of Permanent Supportive Housing (EBH PSH)	Sign in sheet verifying program staff attended the HCA facilitated EBP PSH Training Event	by 6/30/2021	1 payment of \$5,000 for EBP PSH Training	\$5,000
3	Document HARPS Landlord Outreach and Engagement Activities in monthly HARPS Participant Excel Log using the Landlord Outreach Tab submitted to the HCA through the FTP site, or an alternative acceptable secured email transmission no later than the 15th of following month.	At least 5 landlord/property manager contacts documented in the Landlord Outreach Tab of the Monthly HARPS Participant Excel Log Report the submitted to HCA and approved by the Program Manager.	Due by the 15th of each following month	12 months (assuming full staffing and start of services July 1 st @ \$4,000 per report received and approved	\$60,000

Goal	Task	Performance Measure	Due Date*	Payment	Total
4	Document expenditures of subsidies and submit monthly HARPS Participant Excel Log. Monthly and aggregate information is needed on HARPS subsidies. Monthly HARPS Participant Excel report of number of individuals enrolled, actively receiving supportive housing supportive services, housed and number of individuals achieving 6 months of housing retention. (Retention may consist of moving into different dwellings but continually housed). Payment will be pro-rated for unfilled positions based upon 3 FTE.	Monthly HARPS Participant Excel Log Report submitted to HCA via secure process and approved by the Program Manager Reporting Template can be found at: https://nsbhaso.org/for-providers/forms	Due by the 15th of each following month	12 months (assuming full staffing and start of services July 1 st @ \$4,000 per monthly participant Excel log received	\$60,000
5	Quarterly report with results of the project activities for the period including a participant success story with a signed media release. Report shall include: <ul style="list-style-type: none"> • Describe staff development activities for reporting period (including orientation and training). • Indicate any other project activities or events, including meetings with local Continuums of Care, Coordinated Entry Programs, Peer Bridger's, housing, and housing services providers meetings. • Date(s)/duration of the training or meeting • Subject of the training or meeting • Discuss value/impact on the pilot project • A Participant Success Story 	Due by the 20th of the month following the quarter Quarter 1, July-September, report due October 20th Quarter 2, October-December, report due January 20th Quarter 3, January-March, report due April 20th Quarter 4, April-June, report due July 20 th Reporting Template can be found at: https://nsbhaso.org/for-providers/forms	Quarterly HARPS Report submitted to HCA and approved by the program manager.	4 quarterly reports (assuming start of services July 1 st @ \$8,000 per report	\$55,840

Goal	• Task	Performance Measure	Due Date*	Payment	Total
	TOTAL				\$190,440