

North Sound Behavioral Health Administrative Services Organization Blake Recovery Navigator Cost Reimbursement Budget Whatcom County Human Services		
Annual Budget July 1, 2024 to June 30, 2025		
Revenues		
Blake Navigator Program	\$	512,455.00
*RNP Reserve Funds	\$	204,000.00
Total	\$	716,455.00
Expenses		
Blake Navigator Program Expense	\$	716,455.00
Total	\$	716,455.00
Budget Amount	\$	716,455.00
Expenses		-
Balance	\$	716,455.00

***RNP Reserve Funds Include:**

\$154,000 Second half of 7/1/23-6/30/24 budget allocation.

\$50,000 Full year of 7/1/24-6/30/25 budget.



EXHIBIT E(a): PROVIDER DELIVERABLES

PROVIDER: WHATCOM COUNTY

CONTRACT: NORTH SOUND BH-ASO-WHATCOM COUNTY-RNP-23

CONTRACT PERIOD: July 1, 2023 – June 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 [here](#)). 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 deliverables@nsbhaso.org 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 by emailing deliverables@nsbhaso.org.

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
Quarterly Data Collection Tool	Quarterly	15 th of the month following the quarter following the quarter being reported (1/15, 4/15, 7/15, 10/15)	Chapter 19; Section 19.11
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

DELIVERABLE	FREQUENCY	DUE DATE	SUPPLEMENTAL PROVIDER SERVICE GUIDE REFERENCE
Ownership and Control Disclosure Form	Annual	Initial credentialing and as changes occur	Not applicable