

July 17, 2025

BCC Agenda Date/Item: _____

Board of County Commissioners
Clackamas County

Approval of an Amendment to an Intergovernmental Agreement with the Oregon Health Authority for Community Mental Health, Addiction Treatment, Recovery & Prevention, and Problem Gambling Services. Amendment rescinds \$175,000 due to underutilization of funds. Total Agreement Value is reduced to \$17,344,981.22 for 18 months. Funding is through the Oregon Health Authority. No County General Funds are involved.

Previous Board Action/Review	<ul style="list-style-type: none"> • Original Agreement, March 7, 2024, Agenda Item 20240307 I.C.1; • Amendment #01 April 18, 2024, Agenda Item 20240418 III.D.4; • Amendment #02 May 2, 2024, Agenda Item 20240502 I.E.2; • Amendment # August 3 3 8, 2024, Agenda Item 20240808 III.D.10; • Amendment #04 July 25, 2024, Agenda Item 20240725 III.F.19; • Amendment #05 July 25, 2024, Agenda Item 20240725 III.F.20; • Amendment # September 6, 6 12, 2024, Agenda Item 20240912 I.C.6; • Amendment #07 September 7, 19, 2024, Agenda Item 20240919 II.D.1; • Amendment #08 November 27, 2024, Agenda Item 20241127 I.D.5; • Amendment #09 January 9, 2025, Agenda Item 20250109 III.D.3; • Amendment #10 March 6, 2025, Agenda Item 20250306 III.D.7; • Amendment #11 April 10, 2025, Agenda Item 20250410 IV.C.2 • Amendment #12 June 18, 2025 Agenda Item 0250618 XII.F.15 		
Performance Clackamas	Ensuring safe, healthy, and secure communities through the provision of mental health and substance use services.		
Counsel Review	Yes – Ryan Hammond	Procurement Review	No
Contact Person	Elise Thompson	Contact Phone	503-742-5353

EXECUTIVE SUMMARY: The Behavioral Health Division of the Health, Housing and Human Services Department requests approval of Amendment #13 to the 2024-25 Intergovernmental Agreement #44300-00026004 with the State of Oregon, acting by and through its Oregon Health Authority (OHA) for the financing and operation of Community Mental Health, Addiction Treatment, Recovery & Prevention Services and Problem Gambling programs in Clackamas County.

The Board of Commissioners is the Local Mental Health Authority for Clackamas County that operates a Community Mental Health Program (CMHP) funded by this Agreement. The Behavioral Health Division ensures that funds are administered in accordance with the terms set forth in this Agreement and all amendments, providing local administration, behavioral health, and addiction services to Clackamas County.

Amendment #13 rescinds \$175,000.00 through MHS 17, Invoice Services for Non-OHP Community and Residential Assistance.

The maximum agreement value is decreased to \$17,334,981.22

For Filing Use Only

RECOMMENDATION: Staff respectfully requests that the Board of County Commissioners approve this Amendment #13 (11455) and authorize Chair Roberts or designee to sign on behalf of Clackamas County.

Respectfully submitted,

Mary Rumbaugh

Mary Rumbaugh
Director of Health, Housing and Human Services

In compliance with the Americans with Disabilities Act, this document is available in alternate formats such as Braille, large print, audio recordings, Web-based communications, and other electronic formats. To request an alternate format, please send an e-mail to dhs-oha.publicationrequest@odhsoha.oregon.gov or call 503-378-3486 (voice) or 503-378-3523 (TTY) to arrange for the alternative format.

AGREEMENT # PO-44300-00026004

**THIRTEENTH AMENDMENT TO
OREGON HEALTH AUTHORITY
2024-2025 INTERGOVERNMENTAL AGREEMENT
FOR THE FINANCING OF COMMUNITY MENTAL HEALTH, ADDICTION TREATMENT,
RECOVERY, & PREVENTION, AND PROBLEM GAMBLING SERVICES**

This **Thirteenth** Amendment to Oregon Health Authority 2024-2025 Intergovernmental Agreement for the Financing of Community Mental Health, Addiction Treatment, Recovery, & Prevention, and Problem Gambling Services effective as of January 1, 2024 (as amended, the “Agreement”), is entered into, as of the date of the last signature hereto, by and between the State of Oregon acting by and through its Oregon Health Authority (“OHA”) and **Clackamas County** (“County”).

RECITALS

WHEREAS, OHA and County wish to modify the Financial Assistance Award set forth in Exhibit C of the Agreement.

NOW, THEREFORE, in consideration of the premises, covenants and agreements contained herein and other good and valuable consideration the receipt and sufficiency of which is hereby acknowledged, the parties hereto agree as follows:

AGREEMENT

1. The financial and service information in the Financial Assistance Award is hereby amended as described in Attachment 1 attached hereto and incorporated herein by this reference. Attachment 1 must be read in conjunction with the portion of Exhibit C of the Agreement that describes the effect of an amendment of the financial and service information.
2. Capitalized words and phrases used but not defined herein shall have the meanings ascribed thereto in the Agreement.
3. County represents and warrants to OHA that the representations and warranties of County set forth in section 4 of Exhibit F of the Agreement are true and correct on the date hereof with the same effect as if made on the date hereof.
4. Except as amended hereby, all terms and conditions of the Agreement remain in full force and effect.
5. This Amendment may be executed in any number of counterparts, all of which when taken together shall constitute one agreement binding on all parties, notwithstanding that all parties are not signatories to the same counterpart. Each copy of this Amendment so executed shall constitute an original.

IN WITNESS WHEREOF, the parties hereto have executed this amendment as of the dates set forth below their respective signatures.

6. Signatures.

Clackamas County

By:

_____	_____	_____	_____
Authorized Signature	Printed Name	Title	Date

State of Oregon, acting by and through its Oregon Health Authority

By:

_____	_____	_____	_____
Authorized Signature	Printed Name	Title	Date

Approved by: Director, OHA Health Systems Division

By:

_____	_____	_____	_____
Authorized Signature	Printed Name	Title	Date

Approved for Legal Sufficiency:

Exempt per OAR 137-045-0050(2)

_____	_____
Oregon Department of Justice	Date

ATTACHMENT 1
EXHIBIT C
Financial Pages

MODIFICATION INPUT REVIEW REPORT

MOD#: M1120

CONTRACT#: 026004

CONTRACTOR: CLACKAMAS COUNTY

INPUT CHECKED BY: DATE CHECKED:

EFFECTIVE SLOT

SLOT	CHANGE/TYPE
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RATE

OPERATING
DOLLARS

STARTUP PART
DOLLARS ABC

PAAF

BASE

CLIENT
CODE

#5

FISCAL YEAR: 2024-2025

BASE INVOICE SERVICES

17	804	INVOICE	7/1/2024 - 6/30/2025	0	/NA
17	804			0	

- \$175,000.00 \$0.00

1Y

TOTAL FOR SE# 17

- \$175,000.00

TOTAL FOR 2024-2025

- \$175,000.00

TOTAL FOR M1120 026004

-	\$175,000.00	\$0.00
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OREGON HEALTH AUTHORITY
Financial Assistance Award Amendment (FAAA)

CONTRACTOR: CLACKAMAS COUNTY
DATE: 06/04/2025

Contract#: 026004
REF#: 017

REASON FOR FAAA (for information only):

Non-OHP Community and Residential Assistance (MHS 17) funds have been removed.

The following special condition(s) apply to funds as indicated by the special condition number in column 9. Each special condition set forth below may be qualified by a full description in the Financial Assistance Award.

M1120	1 Special Condition #M0792-6 in Base Agreement regarding "MHS 17" Applies.
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