



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@state.or.us](mailto:dhs-oha.publicationrequest@state.or.us) or call 503-378-3486 (voice) or 503-378-3523 (TTY) to arrange for the alternative format.

**SECOND AMENDMENT TO  
OREGON HEALTH AUTHORITY  
2019-2021 INTERGOVERNMENTAL AGREEMENT FOR THE FINANCING OF  
MENTAL HEALTH, ADDICTION TREATMENT, RECOVERY, & PREVENTION,  
AND PROBLEM GAMBLING SERVICES AGREEMENT #159184**

This Second Amendment to Oregon Health Authority 2019-2021 Intergovernmental Agreement for the Financing of Community Mental Health, Addiction Treatment, Recovery, & Prevention, and Problem Gambling Services effective as of July 1, 2019 (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 **Yamhill 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 are 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.

B.O. 19-448

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

6. Signatures.

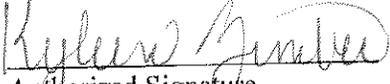
Yamhill County

By:

	<u>Mark Olson</u>	<u>COMMISSIONER COUNTY</u>	<u>11-7-19</u>
Authorized Signature	Printed Name	Title	Date

State of Oregon acting by and through its Oregon Health Authority

By:

	<u>Kyleen Zimmer</u>	<u>Deputy BTH Director</u>	<u>11-13-19</u>
Authorized Signature	Printed Name	Title	Date

Approved by: Director, OHA Health Systems Division

By:

	<u>Jon Collins PhD</u>	<u>Deputy HSD</u>	<u>11/13/19</u>
Authorized Signature	Printed Name	Title	Date

Approved for Legal Sufficiency:

Approved by Steven Marlowe, Senior Assistant Attorney General, Department of Justice, Tax and Finance Section, on April 30, 2019; e-mail in contract file.

OHA Program:

Approved by Carmen Armendariz on October 30, 2019; e-mail in contract file.

Accepted by Yamhill County  
Board of Commissioners on  
11/7/19 by Board Order  
# 19-448

**ATTACHMENT 1**

**EXHIBIT C  
Financial Pages**

MODIFICATION INPUT REVIEW REPORT

MOD#: M0035

CONTRACT#: 159184

CONTRACTOR: YAMHILL COUNTY

INPUT CHECKED BY: \_\_\_\_\_ DATE CHECKED: \_\_\_\_\_

SE#	FUND	CODE	CPMS	PROVIDER	EFFECTIVE DATES	SLOT CHANGE/TYPE	RATE	OPERATING DOLLARS	STARTUP PART DOLLARS ABC	PART IV	PAAF CD	BASE	CLIENT CODE	SP#
FISCAL YEAR: 2020-2021														
		CMHS		MH BLOCK GRANT										
20	301	BLOCK			7/1/2020 - 12/31/2020	0 /NA	\$0.00	\$82,937.03	\$0.00	A	1	N		2
		BASE		NON-RESIDENTIAL MENT										
20	804	MHNRMH			7/1/2020 - 12/31/2020	0 /NA	\$0.00	-\$82,937.03	\$0.00	A	1	Y		1
TOTAL FOR SE# 20								\$0.00	\$0.00					
TOTAL FOR 2020-2021								\$0.00	\$0.00					
TOTAL FOR M0035 159184								\$0.00	\$0.00					

OREGON HEALTH AUTHORITY  
Financial Assistance Award Amendment (FAAA)

CONTRACTOR: YAMHILL COUNTY  
DATE: 10/25/2019

Contract#: 159184  
REF#: 003

REASON FOR FAAA (for information only):

Non-Residential Community Mental Health Services For Adults (MHS 20) funds are removed from SE 20 fund 804 and funds are awarded to SE 20 fund 301.

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.

- M0035 1 Special condition #M0000-8 in Base Agreement, regarding "MHS 20" applies.
- M0035 2 A) These funds may only be used in accordance with federal regulations related to Mental Health Block Grant. B) These funds are for MHS 20.

B.O. 19-448  
Exhibit "A"