



TILLAMOOK COUNTY BOARD OF COMMISSIONERS NOTICE OF MEETING AGENDAS

BOARD OF COMMISSIONERS

David Yamamoto, Chair
dyamamoto@co.tillamook.or.us

Erin D. Skaar, Vice-Chair
eskaar@co.tillamook.or.us

Mary Faith Bell, Commissioner
mfbell@co.tillamook.or.us

CONTACT

Tillamook County Courthouse
201 Laurel Avenue
Tillamook, Oregon 97141
503.842.3403
www.co.tillamook.or.us

COMMUNITY UPDATE MEETING

Tuesday, September 20, 2022 at 8:00 a.m.
Teleconference and KTIL-FM at 95.9

BOARD MEETING

Wednesday, September 21, 2022 at 9:00 a.m.
Nehalem Room

County Courthouse, Teleconference, and Live Video at tctvonline.com

AGENDAS

COMMUNITY UPDATE – 2022-09-20 COMMUNITY UPDATE AUDIO.MP4

CALL TO ORDER: Tuesday, September 20, 2022 8:01 a.m.

1. 00:41 Welcome and Board of Commissioners' Roll Call
2. 01:14 Adventist Health Tillamook
3. 06:41 Coastal Caucus
4. 21:54 Tillamook County Community Health Center
5. 27:13 Tillamook Family Counseling Center
6. 29:17 Emergency Management
7. 32:23 Board of Commissioners
8. Cities
 - 49:26 Manzanita
 - 50:29 Tillamook
 - 54:18 South County

ADJOURN – 8:57 a.m.

MEETING – 2022-09-21 BOCC MEETING AUDIO.MP4

CALL TO ORDER: Wednesday, September 21, 2022 9:00 a.m.

1. 02:22 Welcome & Request to Sign Guest List
2. 02:25 Pledge of Allegiance
3. 02:55 Public Comment: There were none.
4. 02:58 Non-Agenda Items
One unscheduled item/Commissioner Yamamoto

PRESENTATIONS

5. ----- Tillamook County Wellness Presentation/ Marlene Putman, Administrator, Health and Human Services

Chair Yamamoto recessed the meeting at 9:08 a.m.

Chair Yamamoto reconvened the meeting at 9:18 a.m.

AGENDA ITEM POSTPONED

LEGISLATIVE – ADMINISTRATIVE – 2022-09-21 BOCC MEETING AUDIO.MP4 PART II

6. 00:34 Discussion and Consideration of an Order in the Matter of a Notice of Intent to Award a Contract for Tillamook County Health Department Building Addition and Remodel/Marlene Putman, Administrator, Health and Human Services

A motion was made by Commissioner Bell and seconded by Vice-Chair Skaar. The motion passed with three aye votes. The Board signed Order #22-057.
7. 05:25 Discussion and Consideration of Professional Services Agreement 22/22-005 with Dental Care, LLC to Hire Dental Staff, Provide Oversight and Training/Marlene Putman, Administrator, Health and Human Services

A motion was made by Commissioner Bell and seconded by Vice-Chair Skaar. The motion passed with three aye votes. The Board signed the agreement.
8. 09:49 Discussion and Consideration of State of Oregon Intergovernmental Grant Agreement #177254 for Behavioral Health Resource Network (BHRN) Treatment and Support Services/Marlene Putman, Administrator, Health and Human Services

A motion was made by Commissioner Bell and seconded by Vice-Chair Skaar. The motion passed with three aye votes. The Board signed the agreement.

9. 18:29 Discussion and Consideration of a Non-Prevailing Wage Rate Contract for Construction with TFT Construction, Inc. for the 2022 Micro-Milling Project/Chris Laity, Director, Public Works
- A motion was made by Commissioner Bell and seconded by Vice-Chair Skaar. The motion passed with three aye votes. The Board signed the contract.
10. 27:32 Discussion and Consideration of a Professional Services Agreement with Environmental Science Associates (ESA) for the Memaloose Boat Ramp Dredging Monitoring and Support Project/JoAnn Woelfle, Director, Parks Department
- A motion was made by Commissioner Bell and seconded by Vice-Chair Skaar. The motion passed with three aye votes. The Board signed the agreement.
11. 29:56 Discussion and Consideration of an Order in the Matter of Declaring County-Owned Property as Surplus/Melissa Rondeau, Office Manager, Parks Department
- A motion was made by Commissioner Bell and seconded by Vice-Chair Skaar. The motion passed with three aye votes. The Board signed Order #22-058.
12. 31:30 Discussion and Consideration of an Order in the Matter of the Appointment and Reappointment of Members to the Board of Property Tax Appeals/Christy Biggs, Chief Deputy Clerk
- A motion was made by Commissioner Bell and seconded by Vice-Chair Skaar. The motion passed with three aye votes. The Board signed Order #22-059.
13. 40:05 Discussion and Consideration of an Order and Resolution in the Matter of the Appointment of a Member to the Northwest Oregon Housing Authority (NOHA) Board of Directors/Commissioner Mary Faith Bell
- A motion was made by Commissioner Bell and seconded by Vice-Chair Skaar. The motion passed with three aye votes. The Board signed Order #22-060.
14. 44:03 Discussion and Consideration of an Order in the Matter of the Appointment of a Member to the Tillamook County Library Board/Commissioner Mary Faith Bell
- A motion was made by Commissioner Bell and seconded by Vice-Chair Skaar. The motion passed with three aye votes. The Board signed Order #22-061.
15. 45:47 Discussion and Consideration of a Resolution in the Matter of Authorizing the Contribution to Tillamook Lightwave, Intergovernmental Agency for the Purchase of Diesel Backup Generators for the Owned Cable Landing Station/Commissioner David Yamamoto
- A motion was made by Commissioner Bell and seconded by Vice-Chair Skaar. The motion passed with three aye votes. The Board signed R#22-011.

53:58

UNSCHEDULED: Discussion and Consideration of a Letter to Governor Kate Brown Regarding Oregon Department of Forestry's (ODF) Draft Habitat Conservation Plan (HCP)/Commissioner David Yamamoto

A motion was made by Commissioner Bell and seconded by Vice-Chair Skaar. The motion passed with three aye votes. The Board signed the letter.

16. 1:01:25 Board Concerns – Non-Agenda Items: There were none.

17. 1:22:51 Board Announcements

ADJOURN – 10:41 a.m.

JOIN THE BOARD OF COMMISSIONERS' MEETINGS

The board is committed to community participation and provides opportunity for public attendance during meetings via in-person and teleconference.

- **Community Update Meetings: Tuesdays at 8:00 a.m.**
 - Teleconference: Dial 971-254-3149, Conference ID: 736 023 979#
 - Radio: KTIL-FM at 95.9

- **Board Meetings: Wednesdays at 9:00 a.m.**
 - County Courthouse: Nehalem Room, 201 Laurel Avenue, Tillamook
 - Teleconference: Dial 971-254-3149, Conference ID: 736 023 979#
 - Live Video: tctvonline.com

MEETING INFORMATION AND RULES

- Matters for discussion and consideration by the board shall be placed on an agenda prepared by the staff and approved by the board chair. Any commissioner may request items on the agenda.
- Public hearings are formal proceedings publicized through a special public notice issued to media and others. Public hearings held by the board are to provide the board an opportunity to hear from the public about a specific topic. Public hearings are therefore different regarding audience participation at board meetings.
- Commissioners shall be addressed by their title followed by their last name.
- Commissioners shall obtain approval from the chair before speaking or asking questions of staff, presenters, and public. As a courtesy, the chair shall allow an opportunity, by the commissioner who has the floor, to ask immediate follow-up questions.
- A majority of the board shall constitute a quorum and be necessary for the transaction of business.
- All board meeting notices are publicized in accordance with public meeting laws.
- All board meetings shall commence with the Pledge of Allegiance.
- The chair will utilize the gavel as needed to maintain order, commence and adjourn meetings, and signal approval of motions.
- The board reserves the right to recess to executive session as may be required at any time during these meetings, pursuant to ORS 192.660(1).
- The courthouse is accessible to persons with disabilities. If special accommodations are needed for persons with hearing visual, or manual impairments who wish to participate in the meeting, contact (503) 842-3403 at least 24 hours prior to the meeting so that the appropriate communications assistance can be arranged.

PUBLIC COMMENT

- Providing public comment is an opportunity for constituents to be heard and express their views to the board.
- The board allows public comment at board meetings during the public comment period designated on the agenda.
- Comments are limited to one per person and per agenda item.
- Comments must be related to the agenda item(s) previously registered to comment on.
- The allotted time for public comments is two minutes per person; this time may not be allotted to another speaker. The chair may, at their sole discretion, further limit or expand the amount of time.
- The public comment opportunity is not a discussion, debate, or dialogue between the speaker and the board, which may or may not respond.
- Members of the public do not have the right to disrupt the meeting; the board may prohibit demonstrations such as booing, hissing, or clapping.
- Remarks containing hate speech, profanity, obscenity, name calling or personal attacks, defamation to a person, people, or organization, or other remarks the board deems inappropriate will not be allowed.
- Failure to follow all rules and procedures may result in not being able to provide public comment and/or being removed from the meeting.

In-Person Procedures

- Sign in before the meeting begins and indicate your desire to provide public comment and which agenda item you would like to comment on. When your name is announced, please come forward to the table placed in front of the dais and for the record, first identify yourself, area of residence, and organization represented, if any.

Virtual Procedures

- Register by sending an email to publiccomments@co.tillamook.or.us by 12:00 p.m. on the Tuesday prior to the board meeting. The email must contain all of the following information:
 - Full name, area of residence, and phone number.
 - Agenda item(s), you wish to comment on.
- Once registered, and before the start of the meeting, board staff will email a Microsoft Teams meeting link.
- When logged in to the meeting you must remain muted with your camera off until your name is called, then you unmute and turn on your camera.
- The chair may require those providing virtual comment to turn on their camera while providing comment or testimony.

Written Procedures

- Written comments may be mailed to 201 Laurel Avenue, Tillamook, Oregon 97141 or emailed to: publiccomments@co.tillamook.or.us.
- Written comments received by 12:00 p.m. on the Tuesday prior to the board meeting will be distributed to the board and posted online. All written comments submitted become part of the permanent public meeting record.

AGENDAS

COMMUNITY UPDATE

CALL TO ORDER: Tuesday, September 20, 2022 8:00 a.m.

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3. Coastal Caucus
4. Tillamook County Community Health Center
5. Nehalem Bay Health Center & Pharmacy
6. Tillamook Family Counseling Center
7. Sheriff's Office
8. Emergency Management
9. Board of Commissioners
10. Cities
 - a. Manzanita
 - b. Nehalem
 - c. Wheeler
 - d. Rockaway Beach
 - e. Garibaldi
 - f. Bay City
 - g. Tillamook
 - h. South County

ADJOURN

MEETING

CALL TO ORDER: Wednesday, September 21, 2022 9:00 a.m.

1. Welcome & Request to Sign Guest List
2. Pledge of Allegiance
3. Public Comment
4. Non-Agenda Items

PRESENTATIONS

5. Tillamook County Wellness Presentation/ Marlene Putman, Administrator, Health and Human Services

LEGISLATIVE – ADMINISTRATIVE

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8. Discussion and Consideration of State of Oregon Intergovernmental Grant Agreement #177254 for Behavioral Health Resource Network (BHRN) Treatment and Support Services/Marlene Putman, Administrator, Health and Human Services
9. Discussion and Consideration of a Non-Prevailing Wage Rate Contract for Construction with TFT Construction, Inc. for the 2022 Micro-Milling Project/Chris Laity, Director, Public Works
10. Discussion and Consideration of a Professional Services Agreement with Environmental Science Associates (ESA) for the Memaloose Boat Ramp Dredging Monitoring and Support Project/JoAnn Woelfle, Director, Parks Department
11. Discussion and Consideration of an Order in the Matter of Declaring County-Owned Property as Surplus/Melissa Rondeau, Office Manager, Parks Department
12. Discussion and Consideration of an Order in the Matter of the Appointment and Reappointment of Members to the Board of Property Tax Appeals/Christy Biggs, Chief Deputy Clerk
13. Discussion and Consideration of an Order and Resolution in the Matter of the Appointment of a Member to the Northwest Oregon Housing Authority (NOHA) Board of Directors/Commissioner Mary Faith Bell

14. Discussion and Consideration of an Order in the Matter of the Appointment of a Member to the Tillamook County Library Board/Commissioner Mary Faith Bell
15. Discussion and Consideration of a Resolution in the Matter of Authorizing the Contribution to Tillamook Lightwave, Intergovernmental Agency for the Purchase of Diesel Backup Generators for the Owned Cable Landing Station/Commissioner David Yamamoto
16. Board Concerns – Non-Agenda Items
17. Board Announcements

ADJOURN

OTHER MEETINGS AND ANNOUNCEMENTS

The Local Public Safety Coordinating Council (LPSCC) teleconference will be held on **Monday, September 19, 2022** at **12:00 p.m.** The teleconference number is 1-971-254-3149, Conference ID: 113 785 794#.

The Commissioners will hold a Board Briefing on **Wednesday, September 21, 2022** at **2:00 p.m.** to discuss weekly Commissioner updates. The meeting will be held at the Courthouse in the Nehalem Room, 201 Laurel Avenue, Tillamook, Oregon. The teleconference number is 1-971-254-3149, Conference ID: 736 023 979#.

The Commissioners will attend a Port of Garibaldi Board Workshop on Monday, **September 26, 2022** at **9:00 a.m.** The workshop will be held at the Port of Garibaldi Meeting Room, 402 S. 7th Street, Garibaldi, Oregon. The teleconference number is 1-971-254-3149, Conference ID: 736 023 979#.

TILLAMOOK COUNTY BOARD OF COMMISSIONERS' MEETING

WEDNESDAY, SEPTEMBER 21, 2022

PUBLIC COMMENT SIGN-IN SHEET

PLEASE PRINT

NAME	AREA OF RESIDENCE	NAME OF ORGANIZATION (IF ANY)	AGENDA ITEM
<i>None</i>			
<i>There were none</i>			



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Cover Page for Faxing Documents to your DocuSign Envelope

1. Write the number of pages on the line below.
2. Fax the document and cover page to the appropriate number below:

U.S. and Canada: +1 888 258 5388, +1 206 452 7455
London: +44 330 822 0429
Singapore: +65 3158 6882
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From:	Marlene Putman
Envelope Subject:	<input type="checkbox"/> 177254-0 Tillamook County Community Health BHRN Contract
Attachments to Fax:	
Envelope ID:	5edf2994-384d-45d9-bc3c-46a1b9569eb3
Sender Account Name:	Carahsoft OBO Oregon Health Authority - CLM
Number of Pages: (Including cover page)	_____

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Grant Agreement Number 177254

**STATE OF OREGON
INTERGOVERNMENTAL GRANT AGREEMENT**

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-OAC_publicationrequest@state.or.us or call 503-378-3486 (voice) or 503-378-3523 (TTY) to arrange for the alternative format.

This Agreement is between the State of Oregon, acting by and through its Oversight and Accountability Council, which is staffed by Oregon Health Authority (OHA) and the OHA's Health System Division:

**Health Systems Division
500 Summer St SE, E86
Salem, Oregon 97301**

hereinafter referred to as "OAC," and

**Tillamook County Community Health
201 Laurel Avenue
Tillamook, OR 97141
Attention: Marlene Putman
Telephone: 503-842-3922
E-mail address: mputman@co.tillamook.or.us**

hereinafter referred to as "Recipient."

1. Effective Date and Duration.

This Agreement shall become effective on the date this Agreement has been fully executed by every party and, when required, approved by the Oregon Department of Justice (the "Effective Date"). Unless extended or terminated earlier in accordance with its terms, this Agreement shall expire on **December 31, 2023**. Agreement termination shall not extinguish or prejudice OAC's right to enforce this Agreement with respect to any default by Recipient that has not been cured.

2. Agreement Documents.

a. This Agreement consists of this document and includes the following listed exhibits and attachments, which are incorporated into this Agreement:

- (1) Exhibit A, Part 1: Program Description
- (2) Exhibit A, Part 2: Payment and Financial Reporting
- (3) Exhibit A, Part 3: Special Terms and Conditions
- (4) Exhibit B: Standard Terms and Conditions
- (5) Exhibit C: Insurance Requirements
- (6) Exhibit D: Approved Budget
- (7) Exhibit E: Proposal Powerpoint
- (8) Attachment 1: Template Memorandum of Understanding

There are no other Agreement documents unless specifically referenced and incorporated into this Agreement.

b. In the event of a conflict between two or more of the documents comprising this Agreement, the language in the document with the highest precedence shall control. The documents comprising this Agreement shall be in the following descending order of precedence: this Agreement less all exhibits, Exhibits B, A (including Exhibit D to the extent incorporated therein), and C.

3. Grant Disbursement Generally.

The maximum not-to-exceed amount payable to Recipient under this Agreement, which includes any allowable expenses, is **\$436,943.69**. OAC will not disburse grant funds to Recipient in excess of the not-to-exceed amount and, notwithstanding any other provision of this Agreement, will not disburse grant funds until this Agreement has been signed by all Recipient(s) and, when required, approved by the Oregon Department of Justice. OAC will disburse the grant to Recipient as described in Exhibit A.

4. Contractor or Subrecipient Determination.

In accordance with the State Controller's Oregon Accounting Manual, policy 30.40.00.104, OAC's determination is that:

- Recipient is a subrecipient Recipient is a contractor Not applicable

5. Catalog of Federal Domestic Assistance (CFDA) #(s) of federal funds to be paid through this Agreement: N/A

6. Recipient Data and Certification.

a. Recipient Information. Recipient shall provide the information set forth below.

PLEASE PRINT OR TYPE THE FOLLOWING INFORMATION

Recipient Name (exactly as filed with the IRS): _____

Street address: _____

City, state, zip code: _____

Email address: _____

Telephone: () _____ Facsimile: () _____

Business Designation: (Check one box):

- Professional Corporation Nonprofit Corporation Limited Partnership
- Limited Liability Company Limited Liability Partnership Sole Proprietorship
- Corporation Partnership Other

Recipient Proof of Insurance. Recipient shall provide proof of all insurance listed and required by Exhibit C in accordance with the deadline established in Exhibit C, Section 8.

b. Certification. Without limiting the generality of the foregoing, by signature on this Agreement, each signatory for Recipient hereby certifies under penalty of perjury that:

- (1) Recipient is in compliance with all insurance requirements in Exhibit C of this Agreement and Recipient shall deliver to the OAC Agreement Administrator (see page 1 of this Agreement) the required Certificate(s) of Insurance in accordance with the deadline established in Exhibit C, Section 8. By certifying compliance with all insurance as required by this Agreement, Recipient acknowledges it may be found in breach of the Agreement for failure to obtain required insurance. Recipient may also be in breach of the Agreement for failure to provide Certificate(s) of Insurance as required and to maintain required coverage for the duration of the Agreement;
- (2) The information shown in Section 6a. "Recipient Information", is Recipient's true, accurate and correct information;
- (3) To the best of the Recipient's knowledge, Recipient has not discriminated against and will not discriminate against minority, women or emerging

small business enterprises certified under ORS 200.055 in obtaining any required subcontracts;

- (4) Recipient is not subject to backup withholding because:
 - (a) Recipient is exempt from backup withholding;
 - (b) Recipient has not been notified by the IRS that Recipient is subject to backup withholding as a result of a failure to report all interest or dividends; or
 - (c) The IRS has notified Recipient that Recipient is no longer subject to backup withholding;

and

- (5) Recipient Federal Employer Identification Number (FEIN) or Social Security Number (SSN) provided is true and accurate. If this information changes, Recipient shall provide OAC with the new FEIN or SSN within 10 days.

RECIPIENT, BY EXECUTION OF THIS AGREEMENT, HEREBY ACKNOWLEDGES THAT RECIPIENT HAS READ THIS AGREEMENT, UNDERSTANDS IT, AND AGREES TO BE BOUND BY ITS TERMS AND CONDITIONS.

- 1. **Signatures.** This Agreement and any subsequent amendments may be executed in several 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 the Agreement and any amendments so executed shall constitute an original. Copies of signature by facsimile, electronic scan, or other electronic means will be considered original signatures.

***Tillamook County Community Health (IGA)**

By:

Authorized Signature

Title
_____ Marlene Putman
Printed Name

Date

State of Oregon acting by and through its Oversight and Accountability Council

By:

Authorized Signature
_____ Ronald Williams
Printed Name
_____ OAC Tri-Chair
Title

Date

Authorized Signature
_____ Lakeesha Dumas
Printed Name
_____ OAC Tri-Chair
Title

Date

Authorized Signature
_____ Blue Valentine
Printed Name
_____ OAC Tri-Chair
Title

Date

Approved by: Director, OHA Health Systems Division

By:

Authorized Signature

Printed Name

Title

Date

Approved for Legal Sufficiency:

Via e-mail by Steven Marlowe, Assistant Attorney General
Department of Justice

July 6, 2022
Date

EXHIBIT A

Part 1 Program Description

1 Background

In November 2020, Oregon voters passed Measure 110, the Drug Addiction Treatment and Recovery Act of 2020 (hereinafter referred to as “Measure 110” or the “Act”), which became effective on December 4, 2020, to better serve people actively using substances or diagnosed with a substance use disorder. Effective in July, 2021, the Legislature amended the Act with Senate Bill (SB) 755 (Regular Session 2021) (hereinafter referred to as SB 755). People who provide drug treatment and recovery services and advocates for criminal justice reform wrote Measure 110 in response to the high rate of drug addiction and overdoses in Oregon, and the disproportionate impact of those outcomes on Oregon’s communities of color and tribal communities. Their goal was to establish a more equitable and effective approach to substance use disorder. The OAC and the Oregon Health Authority (“OHA”) agree with the advocates and voters that a holistic, health-based approach to addressing addiction and overdoses is more helpful, caring and cost-effective than punishing and criminalizing people who need help.

Measure 110 centers on equity, based on the knowledge that communities of color and tribal communities are disproportionately harmed by laws that criminalize drug possession. People in these communities are less likely to have access to culturally and linguistically specific and responsive services (and health services, generally), and experience greater harm from using drugs. Measure 110 makes health assessment, low-barrier access to care, low barrier treatment, harm reduction, and recovery services available to all those who need and want access to those services, and will make it a priority to provide additional support and assistance to people and communities who experience a higher burden of disease in order to access these critical services.

Measure 110 established the Oversight and Accountability Council (“OAC”). The OAC oversees grant funds and approves grants for providers and servicers who meet the criteria for a Behavioral Health Resource Network (“BHRN”) that will ensure an increase in access to care for all communities, including communities who have disproportionately been impacted by rates of incarceration.

2 Purpose

As a part of the OAC’s effort to increase substance use treatment and support services statewide and to improve access, the OAC is funding at least one BHRN for each county and the 9 federally recognized tribes. All services provided through these networks, previously referred to as Addiction Recovery Centers (“ARCs”), now called BHRNs, must be evidence-informed, trauma informed, culturally and linguistically specific and responsive, person-centered and nonjudgmental.

A “Behavioral Health Resource Network” (BHRN) means an entity or network of entities that receives funds from the OAC through OAC under ORS 430.389(2)(a). The BHRNs will

provide services to all¹ in need of treatment and support for substance use concerns, including but not limited to: housing, harm reduction, peer support, supported employment and substance use disorder treatment. They will also assist people who have received a Class E violation for possession of a personal use amount of substances in the process of waiving the fine and accessing requested substance use support and other services.

Each grant recipient to receive funding as a BHRN shall fulfill all requirements of ORS 430.389(2)(d) and be able to provide evidence of the basic operational requirements outlined in the OAC rules, OAR 944, Division 1, to be eligible to receive Drug Treatment and Recovery Services Funds. Each grant recipient must provide one or more of the component services specified in ORS 430.389(2)d. If a grant recipient is unable to provide all such component services in the grant recipient’s county, OAC will provide assistance to help the grant recipient to partner with other organizations in the county, so that each county BHRN collectively fulfills all the requirements of ORS 430.389(2).

3 Program Activities

- 3.1 Recipient’s program activities shall be free of charge to clients, regardless of the client’s ability to pay or insurance status. Services provided must be accessible at no cost to all people, including those who experience substance use disorder, without need for referral or designated pathway to recovery. Recipient will bill insurance for services where insurance is available, but Recipient will not bill any client for any balance. BHRN entities cannot delay services for purposes of billing insurance or awaiting processing of any such billing.
- 3.2 Recipient shall ensure that BHRN program activities conducted by Recipient are conducted in accordance with ORS 430.389(2)(d) and OAR 944-001-0020 (Operational, Policy, and Service and Support Requirements of Behavioral Health Resource Networks), as the foregoing may be amended from time to time.

3.3 BHRN Grant Activities –

Recipient shall provide (required are those marked with an ‘X’ in the table below):

	Required if marked by “X”
Screening Assessments in accordance with OAR 944-001-0020(3)(a); OAR 944-001-0020(4); and OAR 944-001-0020(5).	X
Comprehensive Behavioral Health Needs Assessment in accordance with OAR 944-001-0020(3)(b).	X
Ongoing peer counseling and support from screening and assessment through implementation of individual intervention plans in accordance with OAR 944-001-0020(3)(c), and assessment and	X

¹ “It is the policy of the State of Oregon that screening, health assessment, treatment and recovery services for drug addiction are available to all those who need and want access to those services.” ORS 430.389.

outreach in accordance with ORS 430.389(2)(d)(E). These include services provided by the following certified peer professional types: (i) Addiction Peer Support Specialists certified under OAR 410 Div 180; (ii) Addiction Peer Wellness Specialists certified under OAR 410 Div 180; (iii) Certified Recovery Mentors certified by the Mental Health and Addiction Certification Board of Oregon; and (iv) Youth Support Specialists certified under OAR 410 Div 180.	
Harm reduction services and information and education about harm reduction services in accordance with OAR 944-001-0020(3)(d)	X
Low-barrier substance use disorder treatment in accordance with OAR 944-001-0020(3)(e), including assessment and outreach in accordance with ORS 430.389(2)(d)(E)	X
Transitional and supportive housing for individuals with substance use disorders in accordance with OAR 944-001-0020(3)(f)	
Supported employment	

4 Reporting Requirements

4.1 Financial recordkeeping and reporting

In general, the State of Oregon has a statutory obligation to provide services at the highest level of desired effectiveness at the lowest possible cost. (ORS 297.065(1)). It is the responsibility of the Secretary of State Audit Division to conduct performance audits of state agencies, including OAC, in part to identify whether or not the agencies are meeting these requirements. This also includes individual departments, commissions, and boards. The Division of Audits will follow established, national standards, such as those of the United States Government Accountability Office, when completing performance audits. (ORS 297.070(1))

Oversight and Accountability Council must include its contractors, grant recipients, and governmental entities, including but not limited to municipal corporations, in its compliance with the statutes and rules governing such audits. Therefore, OAC requires those receiving public funding for the delivery of program or other services to adhere to certain requirements for record retention and provide access to all documentation related to the performance of services.

The distribution of funding and delivery of services has become more interrelated and interdependent between government, NGOs, and other service providers such that the decision as to what records are retained or destroyed is a matter of statewide public policy. The interest and concern of citizens in public records recognizes no jurisdictional boundaries and extends to such records wherever they may be found in Oregon. As local programs become beneficiaries of state-provided funding, the State of Oregon and its political subdivisions have a responsibility to apply orderly requirements for the retention and destruction of all public records, whether current or noncurrent, including financial information. As such, the same approach applies to the contractors, grant recipients, and other service providers.

The retention of records allows the state, including its agencies, councils, and boards to demonstrate distribution of funding and associated terms, conditions, goals, objectives, and expected outcomes of its contractors and recipients. The Audit Division will also examine financial records to determine adherence to Generally Accepted Accounting Principles (GAAP) or such other national standard as may be applied to service providers. Therefore, in addition to the requirements in Exhibit B.10, Records Maintenance, Access, Recipient shall provide or give access to OAC and/or the Secretary of State Audit division the Records, described in Exhibit B.10, within 5 business days of receipt of written notice to Recipient.

4.2 Client Data Collection and Reporting

4.2.1 Recipient shall, at a minimum, collect and report the following aggregate information to OHA and OAC no later than the deadlines established by the OAC which can be found at the following website, under the BHRN Grantee Resources, Data collection and reporting link: <https://www.oregon.gov/oha/hsd/amh/pages/measure110.aspx>:

- Number of clients with substance use disorder receiving services from Recipient.
- Average duration of client participation and client outcomes
- The number of individuals seeking assistance from Recipient, who are denied or not connected to substance use disorder treatment and other services; and the reasons for the denials
- The average time it takes for clients to access services and fulfill their individual intervention plan and the reason for any delays, such as waiting lists at referred services
- Whether the average time to access services to which clients are referred, such as housing or medication assisted treatment, has increased or decreased since Recipient received funding
- Demographic data on clients served, including self-reported demographic data on race, ethnicity, gender, and age in accordance with OAR 943 Division 070.

4.2.2 In addition to the information required to be reported to OHA and OAC in Section 4.2.1, Recipient must submit to OHA and OAC during the first reporting period a summary of how demographics are collected, including any tools used and the staff person or network participant who will collect the data.

4.3 Recipient shall provide the data required to be collected and reported under section 4.2 in accordance with OAC and OHA instructions, which can be found at the following website, under the BHRN Grantee Resources, Data collection and reporting link: <https://www.oregon.gov/oha/hsd/amh/pages/measure110.aspx>.

5 Performance Requirements:

- Recipient must use evidence-based practice(s) or Tribal-based practices, or both, to meet the needs of the community Recipient serves.
- Recipient shall ensure services are in accordance with OAR 944-001-0020(2)(c) and (d)², as may be amended;

² OAR 944-001-0020(2)(c) and (d), as of the Agreement effective date, says operational and policy requirements must include, “(c) An individual who is authorized to perform peer delivered supports, mentoring, and recovery services or a certified alcohol and drug counselor who is available in-person, by phone, or electronically 24 hours a day, seven days a week for anyone contacting the BHRN;” and “(d) Posting regular office hours, access information 177254/KLM

- Recipient assures that clients who are Black, Latinx, Native American, LGBTQIA2S+, Asian, Pacific Islander, houseless, incarcerated, veterans, or have lived experience of substance use disorder can access intersectional, culturally and linguistically specific and responsive services within 48 hours of seeking services.
- Recipient complies with ADA requirements for housing services.
- In accordance with OAR 944-001-0030(2), Recipient shall execute and submit to OHA a fully executed Memorandum of Understanding (MOU), substantially in the form attached hereto as Attachment 1, as specified in Section 6.
- Recipient must, to the greatest extent possible, seek reimbursement for services provided from a client's health insurer, including but not limited to the Oregon Health Plan and private insurers.

6 Grant Milestones

- Submission of MOU(s) to OHA and OAC: 30 calendar days of the Effective Date.
- Recipient must submit the following Policies and Procedures to OHA and OAC: **October 11, 2022**
 - Culturally and Linguistically Specific Services
 - Culturally and Linguistically Responsive Services
 - Accessibility for People with Intellectual and Developmental Disabilities
 - Accessibility for People with Physical Disabilities
 - Gender Affirming and Responsive Care
 - LGBTQIA2S+ Affirming and Inclusive Services
 - Youth Friendly and Inclusive Services
 - Patient Centered and Non-Stigmatizing Services, including on use of person-first, non-stigmatizing language
 - Trauma informed engagement and care
 - Services for parents with young children
 - Process and procedures for data collection in compliance with OAR 944-001-0040 and this Agreement
- Submission of Data and Reports – See Section 4. Reporting Requirements in Exhibit A Part I Program Description.

for the 24-hour telephonic line, and electronic access to the BHRN's website, and each component organization's website. Each BHRN entity does not need to maintain a website as long as the information is available on the OAC website.”

177254/KLM

OAC BHRN (Intergovernmental – MOU) Grant Agreement

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Updated June 29, 2022

**Exhibit A
Part 2
Payment and Financial Reporting**

1. Payment and Financial Reporting.

- a. OAC no longer issues paper checks. To receive grant funding, Recipient must enroll in Electronic Funds Transfer (EFT), also known as direct deposit. To enroll, Recipient must submit a completed Direct Deposit Authorization Form found at:

<https://sharedsystems.dhsOAC.state.or.us/DHSForms/Served/me0189.docx> If Recipient already has EFT set up for any type of payment that comes from the Oregon Health Authority or OAC, Recipient should not send in another form. Recipient may contact the EFT Coordinator at (503) 945-5710 for technical assistance. Due to the confidential nature of bank account information, Recipient should only provide bank information to the EFT Coordinator or OAC Financial Services.

- b. OAC will grant funds to Recipient, subject to the following:

- i. Grant funds may be expended only for costs that are directly and reasonably related to services provided under this Agreement and in accordance with the terms and conditions of this Agreement.
- ii. Grant funds may be expended only for costs in accordance with Recipient’s budget approved by OAC, which is attached to this Agreement as Exhibit D, as it may be revised by Recipient and approved in writing from time to time by OAC.
- iii. Grant funds may not be used to supplant other funding sources.
- iv. Grant funds may be expended for travel-related costs only in accordance with the requirements of the Oregon Accounting Manual applicable to travel-related costs, as the same may be amended from time to time.

- c. OAC will disburse the grant funds to Recipient as follows:

Disbursement Schedule for Recipient		Disbursement Amounts (Total for Recipient)
Upon the later of: (i) the Effective Date; or (ii) OAC’s receipt of a fully executed MOU in accordance with Section 5 of Exhibit A, Part 1 of this Agreement	1st Quarterly Payment	\$72,823.94
Beginning the quarter following the initial payment (not including the quarter in which such initial payment occurs), OAC shall provide Recipient with quarterly payments no later than 10 days after the end of the calendar quarters ending March 31, June 30, September 30, and December 31.	5	\$72,823.95/quarter
Total Payments for Recipient		Not-to-exceed \$436,943.69

EXHIBIT A

Part 3 Special Terms and Conditions

1. **Real Property Purchase, Renovation, or Improvement.** When OAC funds in the amount of \$10,000 and above are to be used for purchase or renovation of real property, Recipient shall contact the Social Determinants of Health team of OHA and follow procedures as prescribed by that unit.
2. **Vehicle funding reporting requirements.** Recipient will follow Exhibit A Part 1, 4.3 Additional Reporting Requirements for authorized vehicle purchase.
3. **Vehicle funding request for grants:**

When OAC payments in the amount of \$1,000 and above are to be used for purchase of a vehicle, as security for the Recipient's performance of its obligations under this Agreement, the Recipient grants to OAC a security interest in all of the Recipient's rights, title, and interest in and to the goods, i.e. the vehicle. The Recipient agrees that from time to time, at its expense, the Recipient will promptly execute and deliver all further instruments and documents, and take all further action, that may be necessary or desirable, or that OAC may reasonably request, in order to perfect and protect the security interest granted under this Agreement or to enable OAC to exercise and enforce its rights and remedies under this Agreement with respect to the vehicle. Recipient must forward by e-mail a copy of the title application showing the OAC c/o Oregon Health Authority, Health Systems Division as the Security Interest Holder to OAC within five (5) calendar days of the acquisition from the seller.

Recipient shall submit copy of the title application to the OAC Agreement Administrator listed on page 1 of this Agreement, with a CC to AMHcontract.Administrator@dhsosha.state.or.us:

File Security Interest Holder information as follows:

OAC c/o
Oregon Health Authority
Health Systems Division
500 Summer Street NE
Salem, OR 97302

4. **Dedicated Use Requirement**

Vehicles costing \$1,000 or more must be used to provide the service for which OAC approved the payments. Dedicated use must continue for the useful life of the vehicle or five years whichever is less.

5. **Removal of Liens**

The following steps describe the process for removal of liens prior to the expiration of the dedicated use period described in Section 4 of this Exhibit A, Part 3:

To release a vehicle title on which OAC is listed security interest holder, Recipient must make a request in writing to OAC. The request must specify why the vehicle is being disposed of and the intended use of any payments realized for the transaction. OAC may approve or deny the request in its sole discretion.

EXHIBIT B

Standard Terms and Conditions

1. Governing Law, Consent to Jurisdiction.

This Agreement shall be governed by and construed and enforced in accordance with the laws of the State of Oregon without regard to principles of conflicts of law. Any claim, action, suit or proceeding (collectively, "Claim") between OAC or any other agency or department of the State of Oregon, or both, and Recipient that arises from or relates to this Agreement shall be brought and conducted solely and exclusively within the Circuit Court of Marion County for the State of Oregon; provided, however, if a Claim must be brought in a federal forum, then it shall be brought and conducted solely and exclusively within the United States District Court for the District of Oregon. In no event shall this Section be construed as a consent by the State of Oregon to the jurisdiction of any court or a waiver by the State of Oregon of any form of defense to or immunity from any Claim, whether sovereign immunity, governmental immunity, immunity based on the eleventh amendment to the Constitution of the United States, or otherwise. Recipient hereby consents to the exclusive jurisdiction of such courts, waives any objection to venue, and waives any claim that any such forum is an inconvenient forum.

2. Compliance with Law.

Recipient shall comply with all federal, state and local laws, regulations, executive orders and ordinances applicable to the Recipient and this Agreement. Without limiting the generality of the foregoing: (i) the Recipient shall comply with Health Insurance Portability and Accountability Act and the federal regulations implementing the Act (collectively referred to as HIPAA) and 42 CFR Part 2 to the extent they are applicable to the services provided by the Recipient; and (ii) no grant funds may be used for any harm reduction activities that would violate Oregon's drug paraphernalia law, ORS 475.525, including but not limited to the purchase or delivery of safe smoking supplies, drug testing strips, or devices used to prepare controlled substances, unless the Recipient maintains documentation that demonstrates the activities fall within an exemption under ORS 475.525(4) or (5), or the Recipient is a syringe service program providing sterile needles and syringes and other items as part of their activities, in accordance with ORS 475.757. Failure to comply with any of the foregoing requirements is grounds for termination of the grant.

3. Independent Parties; Conflict of Interest.

- a. Recipient is not an officer, employee, or agent of the State of Oregon as those terms are used in ORS 30.265 or otherwise.
- b. If Recipient is currently performing work for the State of Oregon or the federal government, Recipient by signature to this Agreement, represents and warrants that Recipient's participation in this Agreement creates no potential or actual conflict of interest as defined by ORS Chapter 244 and that no statutes, rules or regulations of the State of Oregon or federal agency for which Recipient currently performs work would prohibit Recipient's participation under this Agreement. If

disbursement under this Agreement is to be charged against federal funds, Recipient certifies that it is not currently employed by the federal government.

4. Grant Funds; Payments.

- a. Recipient is not entitled to compensation under this Agreement by any other agency or department of the State of Oregon. Recipient understands and agrees that OAC's payment of grant funds under this Agreement is contingent on OAC receiving appropriations, limitations, allotments and other expenditure authority sufficient to allow OAC, in the exercise of its reasonable administrative discretion, to pay the grant funds to Recipient as set forth in this Agreement.
- b. Disbursement Method. Disbursements under this Agreement will be made by Electronic Funds Transfer (EFT) and shall be processed in accordance with the provisions of OAR 407-120-0100 through 407-120-0380 or OAR 410-120-1260 through OAR 410-120-1460, as applicable, and any other OAC Oregon Administrative Rules that are program-specific to the billings and payments. Upon request, Recipient must provide its taxpayer identification number (TIN) and other necessary banking information to receive EFT payment. Recipient must maintain at its own expense a single financial institution or authorized payment agent capable of receiving and processing EFT using the Automated Clearing House (ACH) transfer method. The most current designation and EFT information will be used for all disbursements under this Agreement. Recipient must provide this designation and information on a form provided by OAC. In the event that EFT information changes or the Recipient elects to designate a different financial institution for the receipt of any payment made using EFT procedures, Recipient will provide the changed information or designation to the EFT Coordinator identified in Exhibit A, Part 2, Section 1.

5. Recovery of Overpayments.

Any funds disbursed to Recipient under this Agreement that are expended in violation or contravention of one or more of the provisions of this Agreement ("Misexpended Funds") or that remain unexpended on termination or expiration of this Agreement ("Unexpended Funds") must be returned to OAC. Recipient shall return all Misexpended Funds to OAC promptly after OAC's written demand and no later than 15 days after OAC's written demand. Recipient shall return all Unexpended Funds to OAC within 14 days after the termination or expiration of this Agreement, as applicable. OAC, in its sole discretion, may recover Misexpended Funds or Unexpended Funds by withholding from payments due to Recipient such amounts, over such periods of time, as are necessary to recover the amount of the Misexpended Funds or Unexpended Funds. If Recipient objects to the amount withheld or proposed to be withheld, Recipient shall notify OAC that it wishes to engage in dispute resolution in accordance with Section 13 of this Exhibit.

6. Ownership of Work Product. Reserved.

7. Contribution.

If any third party makes any claim or brings any action, suit or proceeding alleging a tort as now or hereafter defined in ORS 30.260 ("Third Party Claim") against a party (the

"Notified Party") with respect to which the other party ("Other Party") may have liability, the Notified Party must promptly notify the Other Party in writing of the Third Party Claim and deliver to the Other Party a copy of the claim, process, and all legal pleadings with respect to the Third Party Claim. Either party is entitled to participate in the defense of a Third Party Claim, and to defend a Third Party Claim with counsel of its own choosing. Receipt by the Other Party of the notice and copies required in this paragraph and meaningful opportunity for the Other Party to participate in the investigation, defense and settlement of the Third Party Claim with counsel of its own choosing are conditions precedent to the Other Party's liability with respect to the Third Party Claim.

With respect to a Third Party Claim for which the State is jointly liable with the Recipient (or would be if joined in the Third Party Claim), the State shall contribute to the amount of expenses (including attorneys' fees), judgments, fines and amounts paid in settlement actually and reasonably incurred and paid or payable by the Recipient in such proportion as is appropriate to reflect the relative fault of the State on the one hand and of the Recipient on the other hand in connection with the events which resulted in such expenses, judgments, fines or settlement amounts, as well as any other relevant equitable considerations. The relative fault of the State on the one hand and of the Recipient on the other hand shall be determined by reference to, among other things, the parties' relative intent, knowledge, access to information and opportunity to correct or prevent the circumstances resulting in such expenses, judgments, fines or settlement amounts. The State's contribution amount in any instance is capped to the same extent it would have been capped under Oregon law if the State had sole liability in the proceeding.

With respect to a Third Party Claim for which the Recipient is jointly liable with the State (or would be if joined in the Third Party Claim), the Recipient shall contribute to the amount of expenses (including attorneys' fees), judgments, fines and amounts paid in settlement actually and reasonably incurred and paid or payable by the State in such proportion as is appropriate to reflect the relative fault of the Recipient on the one hand and of the State on the other hand in connection with the events which resulted in such expenses, judgments, fines or settlement amounts, as well as any other relevant equitable considerations. The relative fault of the Recipient on the one hand and of the State on the other hand shall be determined by reference to, among other things, the parties' relative intent, knowledge, access to information and opportunity to correct or prevent the circumstances resulting in such expenses, judgments, fines or settlement amounts. The Recipient's contribution amount in any instance is capped to the same extent it would have been capped under Oregon law if it had sole liability in the proceeding.

Recipient shall take all reasonable steps to cause its contractor(s) that are not units of local government as defined in ORS 190.003, if any, to indemnify, defend, save and hold harmless the State of Oregon and its officers, employees and agents ("Indemnitee") from and against any and all claims, actions, liabilities, damages, losses, or expenses (including attorneys' fees) arising from a tort (as now or hereafter defined in ORS 30.260) caused, or alleged to be caused, in whole or in part, by the negligent or willful acts or omissions of Recipient's contractor or any of the officers, agents, employees or subcontractors of the contractor ("Claims"). It is the specific intention of the parties that

the Indemnitee shall, in all instances, except for Claims arising solely from the negligent or willful acts or omissions of the Indemnitee, be indemnified by the contractor from and against any and all Claims.

8. Default; Remedies; Termination.

- a. Default by Recipient. Recipient shall be in default under this Agreement if:
- (1) Recipient institutes or has instituted against it insolvency, receivership or bankruptcy proceedings, makes an assignment for the benefit of creditors, or ceases doing business on a regular basis; or
 - (2) Recipient no longer holds a license or certificate that is required for Recipient to perform its obligations under this Agreement and Recipient has not obtained such license or certificate within 14 calendar days after OAC's notice or such longer period as OAC may specify in such notice; or
 - (3) Recipient fails to return Misexpended Funds or Unexpended Funds in accordance with Section 5 of this Exhibit B; or
 - (4) Recipient commits any material breach or default of any covenant, warranty, obligation or agreement under this Agreement, fails to perform any obligation under this Agreement within the time specified herein or any extension thereof, or so fails to pursue performance of any obligation as to endanger Recipient's performance under this Agreement in accordance with its terms, and such breach, default or failure is not cured within 14 calendar days after OAC's notice, or such longer period as OAC may specify in such notice.
- b. OAC's Remedies for Recipient's Default. In the event Recipient is in default under Section 8.a., OAC may, at its option, pursue any or all of the remedies available to it under this Agreement and at law or in equity, including, but not limited to:
- (1) termination of this Agreement under Section 8.e.(2);
 - (2) withholding all or part of monies not yet disbursed by OAC to Recipient;
 - (3) initiation of an action or proceeding for damages, specific performance, or declaratory or injunctive relief; or
 - (4) exercise of its right of recovery of Misexpended Funds or Unexpended Funds under Section 5 of this Exhibit B.
- These remedies are cumulative to the extent the remedies are not inconsistent, and OAC may pursue any remedy or remedies singly, collectively, successively or in any order whatsoever. If a court determines that Recipient was not in default under Section 8.a., then Recipient shall be entitled to the same remedies as if this Agreement was terminated pursuant to Section 8.e.(1).
- c. Default by OAC. OAC shall be in default under this Agreement if OAC commits any material breach or default of any covenant, warranty, or obligation under this

Agreement, and such breach or default is not cured within 30 calendar days after Recipient's notice or such longer period as Recipient may specify in such notice.

- d. Recipient's Remedies for OAC's Default. In the event OAC terminates this Agreement under Section 8.e.(1), or in the event OAC is in default under Section 8.c. and whether or not Recipient elects to exercise its right to terminate this Agreement under Section 8.e.(3), Recipient's sole remedy will be a claim for payment of grant funds for costs or expenses incurred and for which payment is authorized by this Agreement. In no event shall OAC be liable to Recipient for any expenses related to termination of this Agreement or for anticipated profits or loss.
- e. Termination.
- (1) OAC's Right to Terminate at its Discretion. At its sole discretion, OAC may terminate this Agreement:
- (a) For its convenience upon 30 days' prior written notice by OAC to Recipient;
 - (b) Immediately upon written notice if OAC fails to receive funding, appropriations, limitations, allotments or other expenditure authority sufficient to allow OAC, in the exercise of its reasonable administrative discretion, to pay the grant funds to Recipient as set forth in this Agreement;
 - (c) Immediately upon written notice if federal or state laws, regulations, or guidelines are modified or interpreted in such a way that OAC's support of the program under this Agreement is prohibited or OAC is prohibited from paying for such support from the planned funding source; or
 - (d) Immediately upon written notice to Recipient if there is a threat to the health, safety, or welfare of any person receiving funds or benefitting from services under this Agreement, including any Medicaid Eligible Individual, under its care.
- (2) OAC's Right to Terminate for Cause. In addition to any other rights and remedies OAC may have under this Agreement, OAC may terminate this Agreement immediately upon written notice to Recipient, or at such later date as OAC may establish in such notice, if Recipient is in default under Section 8.a.
- (3) Recipient's Right to Terminate for Cause. Recipient may terminate this Agreement upon 30 days' prior written notice to OAC or at such later date as Recipient may establish in such notice, if OAC is in default under Section 8.c. and OAC fails to cure such default within 30 calendar days after OAC receives Recipient's notice or such longer period as Recipient may specify in such notice.

- (4) Mutual Termination. This Agreement may be terminated immediately upon mutual written consent of the parties or at such other time as the parties may agree in the written consent.
- (5) Return of Property. Upon termination of this Agreement for any reason whatsoever, Recipient shall immediately deliver to OAC all of OAC's property that is in the possession or under the control of Recipient.
- (6) Effect of Termination. Upon termination of this Agreement, Recipient shall immediately cease all activities under this Agreement unless, in a written notice issued by OAC, OAC expressly directs otherwise.

9. Insurance.

Recipient shall maintain insurance as set forth in Exhibit C, attached hereto.

10. Records Maintenance, Access.

Recipient shall maintain all financial records relating to this Agreement in accordance with generally accepted accounting principles. In addition, Recipient shall maintain any other records, books, documents, papers, plans, records of shipments and payments and writings of Recipient, whether in paper, electronic or other form, that are pertinent to this Agreement, in such a manner as to clearly document Recipient's performance. All financial records, other records, books, documents, papers, plans, records of shipments and payments and writings of Recipient whether in paper, electronic or other form, that are pertinent to this Agreement, are collectively referred to as "Records." Recipient acknowledges and agrees that OAC and the Secretary of State's Office and the federal government and their duly authorized representatives shall have access to all Records to perform examinations and audits and make excerpts and transcripts. Recipient shall retain and keep accessible all Records for the longest of:

- a. Six years following final payment and termination of this Agreement;
- b. The period as may be required by applicable law, including the records retention schedules set forth in OAR Chapter 166; or
- c. Until the conclusion of any audit, controversy or litigation arising out of or related to this Agreement.

11. Information Privacy/Security/Access.

If this Agreement requires or allows Recipient or, when allowed, its subcontractor(s), to have access to or use of any OAC or OHA computer system or other OAC or OHA Information Asset for which OAC or OHA imposes security requirements, and OAC or OHA grants Recipient or its subcontractor(s) access to such OAC or OHA Information Assets or Network and Information Systems, Recipient shall comply and require all subcontractor(s) to which such access has been granted to comply with OAR 943-014-0300 through OAR 943-014-0320, as such rules may be revised from time to time. For purposes of this Section, "Information Asset" and "Network and Information System"

have the meanings set forth in OAR 943-014-0305, as such rule may be revised from time to time.

12. Assignment of Agreement, Successors in Interest.

- a. Recipient shall not assign or transfer its interest in this Agreement without prior written consent of OAC. Any such assignment or transfer, if approved, is subject to such conditions and provisions required by OAC. No approval by OAC of any assignment or transfer of interest shall be deemed to create any obligation of OAC in addition to those set forth in this Agreement.
- b. The provisions of this Agreement shall be binding upon and inure to the benefit of the parties, their respective successors, and permitted assigns.

13. Resolution of Disputes.

The parties shall attempt in good faith to resolve any dispute arising out of or related to this Agreement. In addition, the parties may agree to utilize a jointly selected mediator or arbitrator (for non-binding arbitration) to resolve the dispute short of litigation.

14. Subcontracts.

Recipient shall not enter into any subcontracts for any part of the program supported by this Agreement without OAC's prior written consent. In addition to any other provisions OAC may require, Recipient shall include in any permitted subcontract under this Agreement provisions to ensure that OAC will receive the benefit of subcontractor activity(ies) as if the subcontractor were the Recipient with respect to Sections 1, 2, 3, 6, 7, 9, 10, 11, 12, 14, 15, and 16 of this Exhibit B. OAC's consent to any subcontract shall not relieve Recipient of any of its duties or obligations under this Agreement.

15. No Third Party Beneficiaries.

OAC and Recipient are the only parties to this Agreement and are the only parties entitled to enforce its terms. Nothing in this Agreement gives, is intended to give, or shall be construed to give or provide any benefit or right, whether directly, indirectly or otherwise, to third persons any greater than the rights and benefits enjoyed by the general public unless such third persons are individually identified by name herein and expressly described as intended beneficiaries of the terms of this Agreement.

16. Severability.

The parties agree that if any term or provision of this Agreement is declared by a court of competent jurisdiction to be illegal or in conflict with any law, the validity of the remaining terms and provisions shall not be affected, and the rights and obligations of the parties shall be construed and enforced as if the Agreement did not contain the particular term or provision held to be invalid.

17. Notice.

Except as otherwise expressly provided in this Agreement, any communications between the parties hereto or notices to be given hereunder shall be given in writing by personal delivery, facsimile, e-mail, or mailing the same, postage prepaid to Recipient or OAC at the address or number set forth in this Agreement, or to such other addresses or numbers as either party may indicate pursuant to this Section. Any communication or notice so addressed and mailed by regular mail shall be deemed received and effective five days after the date of mailing. Any communication or notice delivered by e-mail shall be deemed received and effective five days after the date of e-mailing. Any communication or notice delivered by facsimile shall be deemed received and effective on the day the transmitting machine generates a receipt of the successful transmission, if transmission was during normal business hours of the Recipient, or on the next business day if transmission was outside normal business hours of the Recipient. Notwithstanding the foregoing, to be effective against the other party, any notice transmitted by facsimile must be confirmed by telephone notice to the other party. Any communication or notice given by personal delivery shall be deemed effective when actually delivered to the addressee.

OAC: Oregon Health Authority
Health Systems Division
500 Summer St SE, E86
Salem, Oregon 97301

18. Headings; Interpretation.

The headings and captions to sections of this Agreement have been inserted for identification and reference purposes only and shall not be used to construe the meaning or to interpret this Agreement. This Agreement will be interpreted according to its fair meaning and not strictly for or against any party to this Agreement. Any provision of this Agreement that would reasonably be expected to survive its termination or expiration will do so, including but not limited to Sections 1, 2, 5, 7, 8(e)(5), 13, 15, 16, 17, 18, and 19 of Exhibit B of this Agreement.

19. Amendments; Waiver; Consent.

No amendment, waiver, or consent under this Agreement shall bind either party unless it is in writing and signed by both parties and when required, approved by the Oregon Department of Justice. Such amendment, waiver, or consent shall be effective only in the specific instance and for the specific purpose given. The failure of either party to enforce any provision of this Agreement shall not constitute a waiver by that party of that or any other provision.

20. Prohibition on Supplanting.

Grant funds may not supplant or replace other funds that have been contracted for the same purpose. Recipient shall ensure that the activities provided under this Agreement will be in addition to, and not in substitution for, comparable activities.

21. Merger Clause.

This Agreement constitutes the entire agreement between the parties on the subject matter hereof. There are no understandings, agreements, or representations, oral or written, not specified herein, regarding this Agreement.

EXHIBIT C

Insurance Requirements

Recipient shall require its first tier contractor(s) (each, a “Contractor”) that are not units of local government as defined in ORS 190.003, if any, to obtain the insurance specified in this Exhibit C prior to performing under this Agreement and maintain it in full force throughout the duration of this Agreement, as required by any extended reporting period or tail coverage requirements, and all warranty periods that apply. Contractor shall obtain the following insurance from insurance companies or entities that are authorized to transact the business of insurance and issue coverage in the State of Oregon and that are acceptable to OAC. Coverage shall be primary and non-contributory with any other insurance and self-insurance, with the exception of Professional Liability and Workers’ Compensation. Contractor shall pay for all deductibles, self-insured retention and self-insurance, if any.

1. WORKERS’ COMPENSATION & EMPLOYERS’ LIABILITY

All employers, including Contractor, that employ subject workers, as defined in ORS 656.027, shall comply with ORS 656.017 and provide workers’ compensation insurance coverage for those workers, unless they meet the requirement for an exemption under ORS 656.126(2). Contractor shall require and ensure that each of its subcontractors complies with these requirements. If Contractor is a subject employer, as defined in ORS 656.023, Contractor shall also obtain employers’ liability insurance coverage with limits not less than \$500,000 each accident. If Contractor is an employer subject to any other state’s workers’ compensation law, Contractor shall provide workers’ compensation insurance coverage for its employees as required by applicable workers’ compensation laws including employers’ liability insurance coverage with limits not less than \$500,000 and shall require and ensure that each of its out-of-state subcontractors complies with these requirements.

2. COMMERCIAL GENERAL LIABILITY:

Required

Commercial General Liability Insurance covering bodily injury and property damage in a form and with coverage that are satisfactory to the State. This insurance shall include personal and advertising injury liability, products and completed operations, contractual liability coverage for the indemnity provided under this Agreement, and have no limitation of coverage to designated premises, project or operation. Coverage shall be written on an occurrence basis in an amount of not less than \$1,000,000 per occurrence. Annual aggregate limit shall not be less than \$2,000,000.

3. PROFESSIONAL LIABILITY:

Required

Professional Liability insurance covering any damages caused by an error, omission or any negligent acts related to the services to be provided under this Agreement by the Contractor and Contractor’s subcontractors, agents, officers or employees in an amount not less than \$1,000,000 per claim. Annual aggregate limit shall not be less than \$2,000,000. If coverage is on a claims made basis, then either an extended reporting period of not less than 24 months shall be included

in the Professional Liability insurance coverage, or the Recipient shall provide Tail Coverage as stated below.

4. EXCESS/UMBRELLA INSURANCE:

A combination of primary and excess/umbrella insurance may be used to meet the required limits of insurance.

5. ADDITIONAL INSURED:

All liability insurance, except for Workers' Compensation, Professional Liability, and Network Security and Privacy Liability (if applicable), required under this Agreement must include an additional insured endorsement specifying the State of Oregon, its officers, employees and agents as Additional Insureds, including additional insured status with respect to liability arising out of ongoing operations and completed operations, but only with respect to Contractor's activities to be performed under this Agreement. Coverage shall be primary and non-contributory with any other insurance and self-insurance. Insurance must have an endorsement providing that the insurer may not invoke sovereign immunity up to the limits of the policy in any court. The Additional Insured endorsement with respect to liability arising out of Contractor's ongoing operations must be on ISO Form CG 20 10 07 04 or equivalent and the Additional Insured endorsement with respect to completed operations must be on ISO form CG 20 37 07 04 or equivalent.

6. WAIVER OF SUBROGATION:

Contractor shall waive rights of subrogation which Contractor or any insurer of Contractor may acquire against the OAC or State of Oregon by virtue of the payment of any loss. Contractor will obtain any endorsement that may be necessary to effect this waiver of subrogation, but this provision applies regardless of whether or not the OAC has received a waiver of subrogation endorsement from the Contractor or the Contractor's insurer(s).

7. TAIL COVERAGE:

If any of the required insurance is on a claims made basis and does not include an extended reporting period of at least 24 months, Contractor shall maintain either tail coverage or continuous claims made liability coverage, provided the effective date of the continuous claims made coverage is on or before the effective date of this Agreement, for a minimum of 24 months following the later of (i) Contractor's completion and OAC's acceptance of all Services required under this Agreement, or, (ii) OAC or Recipient's termination of this Agreement, or, iii) The expiration of all warranty periods provided under this Agreement.

8. CERTIFICATE(S) AND PROOF OF INSURANCE:

Contractor shall provide to OAC Certificate(s) of Insurance for all required insurance before conducting any activities required under this Agreement. The Certificate(s) shall list the State of Oregon, its officers, employees and agents as a Certificate holder and as an endorsed Additional Insured. The Certificate(s) shall also include all required endorsements or copies of the applicable policy language effecting coverage required by this Agreement. If excess/umbrella insurance is used to meet the minimum insurance requirement, the Certificate of Insurance must include a list of all policies that fall under the excess/umbrella insurance. As proof of insurance

OAC has the right to request copies of insurance policies and endorsements relating to the insurance requirements in this Agreement.

9. NOTICE OF CHANGE OR CANCELLATION:

The Contractor or its insurer must provide at least 30 days' written notice to OAC before cancellation of, material change to, potential exhaustion of aggregate limits of, or non-renewal of the required insurance coverage(s).

10. INSURANCE REQUIREMENT REVIEW:

Recipient agrees to periodic review of insurance requirements by OAC under this Agreement and to provide updated requirements as mutually agreed upon by Recipient and OAC.

11. STATE ACCEPTANCE:

All insurance providers are subject to OAC acceptance. If requested by OAC, Contractor shall provide complete copies of insurance policies, endorsements, self-insurance documents and related insurance documents to OAC's representatives responsible for verification of the insurance coverages required under this Exhibit C.

Attachment 1

TEMPLATE MEMORANDUM OF UNDERSTANDING (MOU)

TILLAMOOK COUNTY BEHAVIORAL HEALTH RESOURCE NETWORK (“the BHRN”)

This Memorandum of Understanding (MOU) is made by and between the following signatories of this MOU (later referred to as “signatories”) in establishing the BHRN:

1. [Entity Name]
2. [Entity Name]
3. [Add more lines as needed]

RECITALS

1. The signatories have been awarded funding under Ballot Measure 110 (2020), SB 755 (2021), and the rules developed under Oregon Administrative Rule (OAR) 944 Division 001.
2. The signatories to this MOU wish to meaningfully engage with other signatories to serve people in Tillamook county and to support the implementation of Ballot Measure 110 (2020), SB 755 (2021), and OAR 944 Division 001. The signatories enter this MOU to memorialize their understanding of the strategic partnership to accomplish this.

AGREEMENT

Signatories agree:

1. **PURPOSE.** This MOU memorializes the signatories’ framework for engaging in the required activities described in Ballot Measure 110 (2020), SB 755 (2021), OAR 944 Division 001, and their respective funding agreements with the State of Oregon, Oversight and Accountability Council (“OAC”). It provides the framework under which the signatories will coordinate services to collectively provide all required services as a BHRN.
2. **AUTHORITY.** Each signatory to this MOU represents it is duly authorized to participate in the activities described in this MOU under all applicable local, state, and federal laws, rules, policies, and executive actions. Each signatory further represents as follows:
 - 2.1. No signatory is an agent or representative of any other. No signatory has the right or authority to incur or create any obligation for or bind any other signatory in any way. This MOU does not grant any signatory authority to make any statements, representations, or commitments of any kind, or take any action binding on the State of Oregon or any other signatory.
 - 2.2. Each signatory is responsible for verifying and has verified that its participation in the activities described in this MOU does not and will not violate any provision of any applicable law, rule, regulation, or order of any court, regulatory commission, board, or other administrative agency; and that its participation does not and will not result in the breach of, or constitute a default or require any consent under, any other agreement or instrument to which it is party or by which it may be bound or affected.

3. EFFECTIVE DATE AND DURATION; SIGNATORIES. This MOU is effective when two or more signatories has each executed this MOU. This MOU remains in effect, subject to at least one review per year by all signatories, until all signatories have withdrawn. A signatory may withdraw from the MOU on written notice to OHA and other then-current signatories. Additional signatories may be added to the MOU upon award of grant to other entities and consent of other then-current signatories.

4. RESPONSIBILITIES. While each signatory anticipates it will be able to participate as described in this MOU, it is not responsible or liable to any other signatory for any gaps in its participation under this MOU. Signatories acknowledge that there may be consequences under their respective funding agreements with OHA/OAC for failure to comply with those funding agreements, or failure to refer between or collaborate with other signatories or recipients of OAC funds, including but not limited to failure to comply with this MOU.

4.1. Each signatory will:

4.1.1. Establish and maintain a funding agreement with OAC for funds under Ballot Measure 110 (2020), SB 755 (2021), and OAR 944 Division 001.

4.1.2. Comply with laws, rules, and policies applicable to its security practices and sharing of information about its practices, and disclosure of confidential information (including information protected by law) and information that is otherwise held as sensitive.

4.1.3. Protect confidential and sensitive information it receives from any other signatory in accordance with applicable law, rule, and policy, and hold all information not verified or received as public information with the presumption that it is confidential or otherwise sensitive.

4.1.4. Not disclose to other signatories confidential or sensitive information received from a third party without the express consent of the owner or subject of the information, unless permitted or required by law.

4.1.5. Meet at least once every ___ months, to review how each signatory is working with the other signatories, identify best practices and opportunities for development, and discuss strategies to effectively serve persons with substance use issues and disorders within the counties to be served.

4.1.6. Notify other signatories if it is unable or unwilling to meaningfully participate in the activities described in this MOU.

4.1.7. Operate in a manner that honors tribal sovereignty and self-determination.

4.2. Required roles. The following shall be responsible for each required component of this BHRN (OAR 944-001-0020(3)), and signatories shall seek to refer clients to other signatory entities as appropriate:

4.2.1. *[Name of signatory/ies]* provide(s) screening by Addiction Peer Support Specialist, Certified Recovery Mentor, Addiction Peer Wellness Specialist, or other addiction professional 24 hours a day, seven days a week, every calendar day of

the year to each individual immediately upon first contact. *[Describe how coverage will be allocated among multiple signatories.]*

- 4.2.2. *[Name of signatory/ies] provide(s) comprehensive behavioral health needs assessment, including a substance use disorder assessment by a certified alcohol and drug counselor or other credentialed addiction treatment professional within 24 hours of an individual's request for assessment. [Describe how coverage will be allocated among multiple signatories.]*
- 4.2.3. *[Describe which signatory/ies provide(s) peer-delivered outreach, supports, mentoring, and recovery services. Describe how these will be allocated among signatories.]*
- 4.2.4. *[Describe which signatory/ies provide(s) harm reduction services, information, and education. Describe services and how these will be allocated among signatories.]*
- 4.2.5. *[Describe which signatory/ies provide(s) low-barrier substance use disorder treatment and addiction recovery services as described in OAR 944-001-0020(3)(e). Describe the services and how these will be allocated among signatories.]*
- 4.2.6. *[Describe which signatory/ies provide(s) flexible and low barrier housing for individuals who use substances that cause harm or have a substance use disorder. Describe how signatories will allocate responsibilities to serve populations at all points on the substance use continuum, including gender affirming housing options including responsive housing and shelter options for those who are transgender, gender-nonconforming, and intersex, and family housing options.]*
- 4.2.7. *[Describe which signatory/ies provide(s) rental assistance: Project-based vouchers, tenant-based vouchers, rapid-rehousing and eviction prevention, assistance for fair market rate and privately held housing, assistance attached to a development, assistance attached to wrap around services or assistance paid directly to individuals, any other types of rental assistance; rental assistance for single family and multifamily housing development, barrier busting assistance, including deposit funds, repairs, and landlord incentives, and mobile units, camping equipment, and campsites; assessing supports needed to maintain housing or remediation steps for those experiencing relapse in abstinence-only living environments.]*
- 4.2.8. *[Describe how the signatories will maintain a list of current partnerships and clear referral pathways to the following services: Employment, training and education; family counseling, parenting support and childcare; youth services; state and federal public benefits; assistance to address food insecurity; coordination with other local, county, and state agencies as appropriate, such as social services, child welfare, or corrections; referral and coordination with agencies providing services to those who have experienced physical abuse, sexual abuse, or other types of domestic violence; and primary care services, including primary pediatric care and immunizations for children of those seeking care.]*

- 4.2.9. *[Describe which signatories will provide expungement services or referrals to expungement services to facilitate housing, employment, and receipt of other recovery services.]*
- 4.2.10. *[Describe how signatories will provide supported employment services.]*
- 4.2.11. *[Describe how the signatories will assess the need for, and provision of, mobile or virtual outreach services in accordance with ORS 430.389(2)(d)(E).]*
- 4.2.12. *[List other services that are funded through Measure 110/SB 755, and describe how the signatory provides those in its role in the BHRN.]*
- 4.3. **Workflow.** Signatories share the goal of ensuring uninterrupted and seamless service delivery, and adopt the following processes to accomplish that goal: *[Describe here.]*
- 4.4. **Referrals.** Each signatory acknowledges that tightly linked referral pathways are necessary, and shall implement the following methods for transitioning and referring clients between signatory entities:
 - 4.4.1.1. Obtain valid consent from clients prior to sharing their information with other signatories or providers, whenever required by law.
 - 4.4.1.2. *[Describe referral and transition method(s).]*
- 4.5. **Minimum staffing.** To meet the minimum staffing required under OAR 944-001-0020(4),
 - 4.5.1. *[Name of signatory/ies]* shall maintain a certified alcohol and drug counselor or other credentialed addiction treatment professional on their staff;
 - 4.5.2. *[Name of signatory/ies]* shall maintain a case manager on their staff;
 - 4.5.3. *[Name of signatory/ies]* shall maintain a Certified Addiction Peer Support or Peer Wellness Specialist or certified recovery mentors on their staff; and
 - 4.5.4. *[Name of signatory/ies]* shall maintain an Addiction Peer Support and Addiction Peer Wellness Specialist Supervisor or Peer Delivered Services Supervisor on their staff.
- 4.6. **Service capacity monitoring.** *[Describe signatory/ies roles in monitoring service capacity.]*
- 4.7. **Verification.** *[Describe how signatory/ies shall allocate responsibilities for obtaining consent and sending verification of completion of screenings.]*
- 4.8. **Communications.**
 - 4.8.1. *[Describe how signatories shall address media or public inquiries addressed to the BHRN or affecting other signatories, and who may speak on behalf of the BHRN].*
 - 4.8.2. Each signatory shall designate in writing to all other signatories and to OHA an authorized representative who will be the primary point of contact and will coordinate and communicate with other signatories. The primary point of contact

may delegate coordination and communication in writing. A signatory may change its authorized representative by written notice to other then-current signatories and OHA.

4.9. Reporting. *[Describe how signatory/ies shall allocate responsibility for reporting obligations.]*

5. CHANGES TO THIS MOU. Signatories may agree from time to time to change this MOU. Any change must be agreed upon in writing by all then-current signatories, with a copy to be sent to OHA.

6. INTENDED BENEFICIARIES. Signatories who have executed this MOU are the only parties to this MOU. Nothing in this MOU provides, is intended to provide, or may be construed to provide any direct or indirect benefit or right to any third party, including any natural person or group of persons.

7. NO OBLIGATION AND NO TRANSFER OF RIGHTS. This MOU is not an obligation or commitment of funds for a basis of transfer of funds. This MOU does not create any contractual obligation or commitment by any signatory or other person. This MOU does not create, transfer, or grant any rights in data, works of authorship, or other intellectual property.

8. COSTS AND EXPENDITURES. Each signatory's expenditures in support of the activities described in this MOU are subject to its respective budget processes and approvals.

9. DISPUTE RESOLUTION. Disagreements between two or more signatories arising under or relating to this MOU will be resolved by consultation between them, and as necessary referral of the dispute to appropriate management officials of the signatories. If the dispute is unable to be resolved, which may include a change to this MOU, a signatory may withdraw its participation in accordance with this MOU. Signatories acknowledge that failure to maintain an MOU with other participants in the BHRN may have consequences under OAR 944 Div 001 or their agreement(s) with the state of Oregon.

10. COUNTERPARTS. This MOU may be executed in several counterparts, all of which when taken together constitute one document, notwithstanding that each signatory has not signed the same counterpart. Each copy of the MOU so executed constitutes an original. An electronic signature is deemed to be an original signature.

11. SIGNATURES. Each signatory represents that the individual signing below on its behalf is authorized to act on its behalf, and the individual named below as the signatory's point of contact is authorized to act on behalf of signatory as described in this MOU.

Name of Signatory 1:

Signature & Date

Printed Name and Title

Point of Contact:

Printed Name and Title

Mailing Address

Physical Address

Telephone

Fax

Email

Name of Signatory 2:

Signature & Date

Printed Name and Title

Point of Contact:

Printed Name and Title

Mailing Address

Physical Address

Telephone

Fax

Email

[Insert additional signatory lines as needed]

Confidential
CONTRACTOR TAX IDENTIFICATION INFORMATION
For Accounting Purposes Only

The State of Oregon requires contractors to provide their Federal Employer Identification Number (FEIN) or Social Security Number (SSN). This information is requested pursuant to ORS 305.385 and OAR 125-246-0330(2). Social Security numbers provided pursuant to this section will be used for the administration of state, federal and local tax laws. The State of Oregon may report this information to the Internal Revenue Service (IRS). Contractors must keep this information current at all times. Contractors are required to notify the State of Oregon contract administrator within 10 business days if this information changes. The State of Oregon reserves the right to ask contractors to update this information at any time during the document term.

Document number: _____

Legal name *(tax filing)*: _____

DBA name *(if applicable)*: _____

Billing address: _____

City: _____ State: _____ Zip: _____

Phone: _____

FEIN: _____

- OR -

SSN: _____

AHTM Budget for Behavioral Health Resource Network Single Entity

Provide an itemized budget for costs between execution of the Grant and July 31, 2023, noting any costs that are one-time only for start-up purposes, and will not be ongoing. Please detail your intent to pay equitable and living wages to all staff working on the grant.

	Feb (1)	Mar (2)	April (3)	May (4)	June (5)	July (6)	Aug (7)	Sept (8)	Oct (9)	Nov (10)	Dec (11)	Jan (12)	Feb (13)	Mar (14)	Apr (15)	May (16)	June (17)	July (18)	Total
Personnel Costs:																			
LCSW / CADC Certified (68,554/annual + 40% fringe)																			
Case Manager (1) (68,554/annual + 40% fringe)																			
Substance Use Navigator (523/hr + 80% fringe)																			
Provider Outreach Time																			
BHRN Coordinator (528/hr + 40% fringe)																			
Program Staff Training Costs:																			
Prevention Training			6,000.00				6,000.00				6,000.00				6,000.00				24,000.00
Stigma Training				6,000.00				6,000.00				6,000.00				6,000.00			24,000.00
Provider Training					6,000.00				6,000.00				6,000.00				6,000.00		24,000.00
Services and Supplies Costs:																			
Injectable MOUD(s) (\$1,200 per shot x 8 patients)	12,000.00	12,000.00	12,000.00	12,000.00	12,000.00	12,000.00	12,000.00	12,000.00	12,000.00	12,000.00	12,000.00	12,000.00	12,000.00	12,000.00	12,000.00	12,000.00	12,000.00	12,000.00	216,000.00
Contingency Management funding																			
UDS and outreach engagement supplies	800	800	800	800	800	800	800	800	800	800	800	800	800	800	800	800	800	800	14,400.00
Tele-Behavioral Health SUD therapy																			
Capital Outlay Costs:																			
Indirect Costs (10%)	1280	1280	1880	1880	1880	1280	1880	1880	1880	1280	1880	1880	1880	1280	1880	1880	1880	1880	30,240.00
Total:																			332,640.00

Budget Narrative:

Rinehart Clinic & Pharmacy Budget for Behavioral Health Resource Network Single Entity

Provide an itemized budget for costs between execution of the Grant and July 31 2023, noting any costs that are one-time only for Start-Up purposes, and will not be on-going.																			
Please detail your intent to pay equitable and living wages to all staff working on the grant.																			
	Feb (1)	Mar (2)	April (3)	May (4)	June (5)	July (6)	Aug (7)	Sept (8)	Oct (9)	Nov (10)	Dec (11)	Jan (12)	Feb (13)	Mar (14)	Apr (15)	May (16)	June (17)	July (18)	Total
Personnel Costs:																			
Driver + 40% fringe (Recovery Support Services Transportation)																			
CADC (Masters Level) + 40% fringe				7,998.20	7,998.20	7,998.20	7,998.20	7,998.20	7,998.20	7,998.20	7,998.20	7,998.20	7,998.20	7,998.20	7,998.20	7,998.20	7,998.20	7,998.20	119,973.00
Data Reporting				2,322.00	2,322.00	2,322.00	2,322.00	2,322.00	2,322.00	2,322.00	2,322.00	2,322.00	2,322.00	2,322.00	2,322.00	2,322.00	2,322.00	2,322.00	34,830.00
Program Staff Training Costs:																			
Increased ART training																			
Services and Supplies Costs:																			
Recovery group Marketing, Supplies, Incentives				555.00	555.00	555.00	555.00	555.00	555.00	555.00	555.00	555.00	555.00	555.00	555.00	555.00	555.00	560.00	8,330.00
Linguava Translation Services Fees																			
(\$800 iPad Support per month=\$13,200/annual and document translation \$79 x 120=\$9,480)			9,480.00																9,480.00
Capital Outlay Costs:																			
Indirect Cost (10%)			948.00	1,167.52	1,167.52	1,167.52	1,167.52	1,167.52	1,167.52	1,167.52	1,167.52	1,167.52	1,167.52	1,167.52	1,167.52	1,167.52	1,167.52	1,168.02	18,461.30
Total:																			203,074.30

Tillamook County Community Health Centers Budget for Behavioral Health Resource Network Single Entity

Provide an itemized budget for costs between execution of the Grant and July 31 2023, noting any costs that are one-time only for Start-Up purposes, and will not be on-going.
Please detail your intent to pay equitable and living wages to all staff working on the grant.

	M1 July 22	M2 Aug 22	M3 Sep 22	M4 Oct 22	M5 Nov 22	M6 Dec 22	M7 Jan 23	M8 Feb 23	M9 Mar 23	M10 Apr 23	M11 May 23	M12 Jun 23	M13 Jul 23	M14 Aug 23	M15 Sep 23	M16 Oct 23	M17 Nov 23	M18 Dec 23	Total
Personnel Costs:																			
CAC - 1.0 FTE (or 5 each) Bilingual prefer		3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	53,664.13
Medical Asst - 1.0 FTE - BHI Lead		7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	128,571.00
PHPR - 1.0 FTE - BHI & Harm Red. Bilingual prefer																			
PH Nurse - .2 FTE - harm reduction - wknd care, etc.																			
CHW - 1.0 FTE - BHI & Harm Red. - Bilingual prefer																			
Peer Support Specialist w/TFCC - 1.0 Contract & BAA		1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	17,894.71
Data Specialist/Admin. - .5 FTE (reporting)		2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	40,263.14
BHC Asst. Mgr. - SUD/BH - Coord & develop. JFTE - Karen	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	22,736.88
PR/Market/Comm/Website - .2 FTE or Contract	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	18,947.34
Subtotal	2,315.79	16,457.73	282,097.20																
Program Staff Training Costs:																			
CHW Training & certification		263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	4,736.88
Trauma Informed Care - All staff															2,500.00	2,500.00			5,000.00
Peer Support Trainings & Meetings																			
Subtotal	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	2,763.16	2,763.16	263.16	263.16	9,736.88
Services and Supplies Costs:																			
Mobile Clinic/Van & Retro Fit	2,894.74	2,894.74	2,894.74	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	54,378.97
Harm Reduction Supplies	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	23,684.22
Point of Care Testing Equip Lease	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	2,273.76
POC Testing supplies	555.55	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	9,502.99
Treatment - per normal CHC protocol (Hep C, etc.)																			0.00
Multi-language line - video & telephone- instant	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	9,473.76
Storage Unit/Lease/ (ITCC)																			0.00
Laptops for remote use - 2 (PHPR & CHW)	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	2,273.76
Telephone w/hotspot - 2 (PHPR & CHW) (with-80x2x32)	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	4,600.00
Subtotal	5,745.04	5,715.81	5,715.81	5,880.72	105,387.46														
Capital Outlay Costs:																			
Storage Building/Modular Unit - 8th Street																			
Subtotal	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Indirect Costs (10%)	832.40	2,243.67	2,243.67	2,260.16	2,260.16	2,260.16	2,260.16	2,260.16	2,260.16	2,260.16	2,260.16	2,260.16	2,260.16	2,260.16	2,510.16	2,510.16	2,260.16	2,260.16	39,722.15
Total:																			436,943.89

Tillamook Family Counseling Center Budget for Behavioral Health Resource Network Single Entity

Provide an itemized budget for costs between execution of the Grant and July 31 2023, noting any costs that are one-time only for Start-Up purposes, and will not be on-going.
Please detail your intent to pay equitable and living wages to all staff working on the grant.

	Feb (1)	Mar (2)	April (3)	May (4)	June (5)	July (6)	Aug (7)	Sept (8)	Oct (9)	Nov (10)	Dec (11)	Jan (12)	Feb (13)	Mar (14)	Apr (15)	May (16)	June (17)	July (18)	Total
Personnel Costs:																			
1 FTE Peer (alternative/flexible hours)	4,833.00	4,833.00	4,833.00	4,833.00	4,833.00	4,833.00	4,833.00	4,833.00	4,833.00	4,833.00	4,837.00	4,833.00	4,833.00	4,833.00	4,833.00	4,833.00	4,833.00	4,833.00	86,998.00
1 FTE Peer (alternative/flexible hours)	4,833.00	4,833.00	4,833.00	4,833.00	4,833.00	4,833.00	4,833.00	4,833.00	4,833.00	4,833.00	4,837.00	4,833.00	4,833.00	4,833.00	4,833.00	4,833.00	4,833.00	4,833.00	86,998.00
Program Staff Training Costs:																			
1 peer IPS certification training		650.00																	650.00
1 peer IPS certification training		650.00																	650.00
1 peer hotel and car rental for IPS training		700.00																	700.00
1 peer hotel and car rental for IPS training		700.00																	700.00
Meals for IPS training 2 peers		388.00																	388.00
Services and Supplies Costs:																			
2 Desks with Hutch - 353.00x2		706.00																	706.00
2 computer chairs - 84.00x2		168.00																	168.00
2 Laptops -1,000.00x2		2,000.00																	2,000.00
2 Smart Phones - 549.00x2		1,098.00																	1,098.00
2 locking file cabinets - 86.00x2		172.00																	172.00
Peer Supplies	400.00	400.00	400.00	400.00	400.00	400.00	400.00	400.00	400.00	400.00	400.00	400.00	400.00	400.00	400.00	400.00	400.00	400.00	7,200.00
Capital Outlay Costs:																			
Indirect Cost (10%)	1,006.60	1,729.80	1,006.60	1,006.60	1,006.60	1,006.60	1,006.60	1,006.60	1,006.60	1,006.60	1,007.40	1,006.60	1,006.60	1,006.60	1,006.60	1,006.60	1,006.60	1,006.60	18,842.80
Total:																			207,270.80

Tilamook Serenity Club Budget for Behavioral Health Resource Network Single Entity

Provide an itemized budget for costs between execution of the Grant and July 31 2023, noting any costs that are one-time only for Start-Up purposes, and will not be on-going.
Please detail your intent to pay equitable and living wages to all staff working on the grant.

	Feb (1)	Mar (2)	April (3)	May (4)	June (5)	July (6)	Aug (7)	Sept (8)	Oct (9)	Nov (10)	Dec (11)	Jan (12)	Feb (13)	Mar (14)	Apr (15)	May (16)	June (17)	July (18)	Total
Personnel Costs:																			
ED																			
Full-time manager	3,500.00	3,500.00	3,500.00	3,500.00	3,500.00	3,500.00	3,500.00	3,500.00	3,500.00	3,500.00	3,500.00	3,500.00	3,500.00	3,500.00	3,500.00	3,500.00	3,500.00	3,500.00	63,000.00
Driver/maintenance																			
Half-time book keeper																			
Half-time admin assistant																			
Peer Support Specialist	2,950.00	2,950.00	2,950.00	2,950.00	2,950.00	2,950.00	2,950.00	2,950.00	2,950.00	2,950.00	2,950.00	2,950.00	2,950.00	2,950.00	2,950.00	2,950.00	2,950.00	2,950.00	53,100.00
Program Staff Training Costs:																			
Peer Support Certification				650.00															650.00
hotel, car rental, meals for training				1,088.00															1,088.00
Services and Supplies Costs:																			
Appliances/furniture																			
Supplies																			
Van insurance																			
Capital Outlay Costs:																			
Building purchase																			
Improvements																			
Utilities	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	2,200.00	39,600.00
Meeting Space support	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	18,000.00
Van for transport																			
Indirect Cost (10%)	965.00	965.00	965.00	1,138.80	965.00	965.00	965.00	965.00	965.00	965.00	965.00	965.00	965.00	965.00	965.00	965.00	965.00	965.00	17,543.80
Total:																			192,981.80

Total asks for OUR Tillamook (all partners combined)

Organization	Original Submitted BHRN Budget	Fin BHRN Budget final
Adventist Health Tillamook	\$ 1,175,610.96	\$ 332,640.00
CARE	\$ 1,670,166.44	\$ 858,214.33
Rinehart Clinic & Pharmacy	\$ 321,324.25	\$ 203,074.30
Tillamook County Community Health Centers	\$ 646,360.00	\$ 436,943.69
Tillamook Family Counseling Center	\$ 209,983.40	\$ 207,270.80
Tillamook Serenity Club	\$ 1,327,802.30	\$ 192,981.80
TOTAL	\$ 5,351,247.35	\$ 2,231,124.93

Goal number
\$ 2,231,126.00

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[ADVENTISTHEALTH:INTERNAL]

al/Total

Total Cuts	%
\$ 842,970.96	72%
\$ 811,952.11	49%
\$ 118,249.95	37%
\$ 209,416.31	32%
\$ 2,712.60	1%
\$ 1,134,820.50	85%
<u>\$ 3,120,122.42</u>	<u>58%</u>

Difference from Final Budget
\$ 1.07

Tillamook County Community Health Centers Budget for Behavioral Health Resource Network Single Entity

Provide an itemized budget for costs between execution of the Grant and July 31 2023, noting any costs that are one-time only for Start-Up purposes, and will not be on-going.																			
Please detail your intent to pay equitable and living wages to all staff working on the grant.																			
	M1 July-22	M2 Aug-22	M3 Sep-22	M4 Oct-22	M5 Nov-22	M6 Dec-22	M7 Jan-23	M8 Feb-23	M9 Mar-23	M10 Apr-23	M11 May-23	M12 Jun-23	M13 Jul-23	M14 Aug-23	M15 Sep-23	M16 Oct-23	M17 Nov-23	M18 Dec-23	Total
Personnel Costs:																			
CADC - 1.0 FTE (or 5 each) Bilingual prefer		3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	3,157.89	53,684.13
Medical Asst - 1 OFTE - BH Lead																			
PHN - 1.0 FTE - BH & Harm Red. Bilingual prefer		7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	7,563.00	128,571.00
PH Nurse - 2FTE - harm reduction - wound care, etc.																			
CHW - 1.0 FTE - BH & Harm Red. - Bilingual prefer																			
Peer Support Specialist w/TFCC - 1.0 - Contract & BAA		1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	17,894.71
Data specialist/Admin - 5 FTE (reporting)		2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	2,368.42	40,263.14
BHC Asst. Nrg. - SUD/BH - Coord & develop 2FTE Karen		1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	1,263.16	22,736.88
PR/Market/Comm/Website - 2FTE or Contract		1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	1,052.63	18,947.34
Subtotal		2,315.79	16,457.73	282,097.20															
Program Staff Training Costs:																			
CHW training & certification																			
CADC Training x1		263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	4,736.88
Trauma Informed Care - All staff																2,500.00	2,500.00		5,000.00
Peer Support Trainings & Meetings																			
Subtotal		263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	263.16	2,763.16	2,763.16	263.16	263.16	9,736.88
Services and Supplies Costs:																			
Mobile Clinic/Van & Retro Fit		2,894.74	2,894.74	2,894.74	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	3,059.65	54,576.97
Harm Reduction Supplies		1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	1,315.79	23,684.22
Point of Care Testing Equip Lease		126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	2,273.76
POC Testing supplies		555.55	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	9,502.99
Treatment - per normal CHC protocol (Hep. C. etc.)																			0.00
Multi-language line - video & telephone - instant		526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	526.32	9,473.76
Storage Unit/Case/TFCC																			0.00
Laptops for remote use - 2 (PHPR & CHW)		126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	126.32	2,273.76
Cellphone w/ hotspot - 2 (PHPR & CHW) (mfr-30x2x12)		200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	3,800.00
Subtotal		5,745.04	5,715.81	5,715.81	5,880.72	105,387.46													
Capital Outlay Costs:																			
Storage Building/Modular Unit - 6th Street		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Subtotal		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Indirect Costs (10%)		832.40	2,243.67	2,243.67	2,260.16	39,722.15													
Total:																			436,943.69

Behavioral Health Resource Network Proposal

Tillamook County Region

July 13, 2022



Tillamook County Region Initial Matrix

Organization	Screening	Planning	SUD	Peer Supports	Housing	Harm Reduction	Supported Employment
Project Quest	X	X	X	X	X	X	
Adventist health	X	X	X	X		X	
CARE					X		
Rinehart Clinic	X	X	X				
Tillamook County Community Health	X	X	X	X		X	
Tillamook Serenity Club				X			
Tillamook Family Counseling				X			

- Note: Tillamook County was initially missing supported employment

Tillamook Initial Budget Request

- TTL Tillamook County request \$5,351,247
- Tillamook County Allocation: \$2,231,126
- Over allocation: \$3,120,121

OAC Subcommittee Concerns

- **CARE budget for building/renovation costs too high**
 - Changed housing plan to cut back majority of services and only small individual units to remove renovation costs
- **Not funding harm reduction in Rinehart Clinic and Pharmacy**
 - Removed van and driver requests and staff training, no harm reduction funding
- **For Project Quest, fund peer supports only, not harm reduction**
 - They have removed themselves from the BHRN and no longer part of the Tillamook approved BHRN entities
- **For Tillamook County Community Health, assurances that van is for harm reduction and related services and paying peers a livable wage**
 - Changed peer position from 1 to 0.4 FTE, van budget would be used for harm reduction and other budget reductions removed certain workforce positions, CHW training, and other treatment options

OAC subcommittee concerns cont.

- **For Tillamook Family Counseling, fund peer support only**
 - Peer support is only work they are doing
- **For Tillamook Serenity Club, only fund peer support and take housing support**
 - Removed all housing related requests and many workforce positions, budget now focuses on peer support

Supported Employment

- Tillamook was able to include supported employment in the approved BHRN applicant CARE
 - CARE reported that Participants in the shelter program will automatically engage upon entry with our housing/supportive employment case manager to begin setting goals for housing and employment. The case manager will also work with referrals from other BHRN partners. This case manager will work with clients on budgeting, resumes, job applications, pre-employment screenings, acquisition of necessary IDs, and job coaching. The case manager will also develop relationships with employers through our homeless response system network, the local chamber of commerce, and with businesses individually to remove barriers, provide education, and support employers in being recovery friendly workplaces.

Budget Reconciliation

– Adventist Health Tillamook	\$332,640
– CARE	\$858,214
– Rinehart Clinic & Pharmacy	\$203,074
– Tillamook County Community Health Centers	\$436,944
– Tillamook Family Counseling Center	\$207,271
– Tillamook Serenity Club	\$192,982
– Total request:	\$2,231,125
– Under/Over Allocation	\$0

Additional budget considerations:

- CARE is taking on Supported Employment through a case manager to lead these services and supply costs added to the budget
- Project Quest removed themselves from the BHRN
- Large negotiated reductions in all other places

Final Matrix

Organization	Screening	Planning	SUD	Peer Supports	Housing	Harm Reduction	Supported Employment
Adventist health	X	X	X	X		X	
CARE					X		X
Rinehart Clinic	X	X	X				
Tillamook County Community Health	X	X	X	X		X	
Tillamook Serenity Club				X			
Tillamook Family Counseling				X			



Tillamook County Board of Commissioners

201 Laurel Avenue, Tillamook, OR 97141

Phone: 503-842-3403

TTY Oregon Relay Service

David Yamamoto, Chair

Erin D. Skaar, Vice-Chair

Mary Faith Bell, Commissioner

September 21, 2022

Honorable Kate Brown
Office of the Governor
900 Court Street NE
Suite 254
Salem, Oregon 97301

VIA EMAIL:

Governor's Natural Resource Policy Director:
Oregon State Forester:
Oregon Board of Forestry:

jason.miner@oregon.gov
cal.t.mukumoto@odf.oregon.gov
hilary.olivos-rood@oregon.gov

Governor Brown:

On behalf of Tillamook County, we are writing you to express our opposition to the draft Habitat Conservation Plan (HCP) prepared by the Oregon Department of Forestry (ODF) for western State Forests. These lands were deeded to the state from the counties, and are now managed by the Oregon Board of Forestry (BOF) to achieve the Greatest Permanent Value (GPV) (OAR 629-035-0020). Regrettably, the HCP ODF has prepared does not balance the social, economic, and environmental goals needed to meet GPV.

For years, Tillamook County and the Forest Trust Land Advisory Committee (FTLAC) (ORS 526.156) have adamantly expressed our concerns over the process to develop the HCP. We have repeatedly asked to be part of the drafting and review committees but have been refused each time. We have asked questions of both the ODF and the BOF on how this will impact our communities and have yet to receive adequate answers. To call FTLAC counties "partners" of the state, and then to turn around and ignore our requests and advice, is insincere and offensive.

Given the lack of meaningful consultation with the counties, it is disappointing but not surprising to us that the draft HCP fails to appropriately estimate or defend the human dimension and values of these forests. The first concern is that the HCP commits huge swaths of state land to "non-management" as a strategy for species protection. That is all too reminiscent of federal land management under the Northwest Forest Plan. We learned the hard way that non-management of our forests not only leads to economic harm and profound health costs through wildfire and smoke pollution, but it also fails to reverse population declines for iconic species like the Northern Spotted Owl.

The second and equally concerning aspect of the HCP is the 70-year timeline. The economic and physical conditions in our state are changing very rapidly and we must be able to change with them for the best outcomes. Committing to this plan for 70 years with very limited available actions, which will be controlled by the state, to respond to unavoidable changes, leaves Tillamook County with almost no say in our destiny. If this process had been done with full participation and full transparency among the "partners," perhaps this would be somewhat less concerning.

Tillamook County and many like it are trying to prepare for the increasing risk of natural disasters and protect our citizens and critical infrastructure. We face potential catastrophic earthquakes, tsunamis as well as more frequent and severe storms, and now, increased risk of wildfire. We need the ability to engage in activities that bolster economic resilience in today's economy and in tomorrow's. Instead, with this HCP, we are being forced to spend the next 70 years under a plan that limits our options, our opportunities, and our ability to choose our own future.

We understand that ODF has the legal authority to create and that BOF can adopt this HCP. Please consider the way in which this HCP was developed and the style of management it proposes. We ask that you intervene in this process to ensure that the state HCP does not create unnecessary risks and hardships for the counties that surround and depend on these forests.

Sincerely,

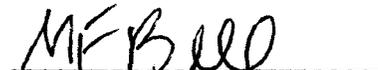
BOARD OF COMMISSIONERS FOR TILLAMOOK COUNTY, OREGON



David Yamamoto, Chair



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Mary Faith Bell, Commissioner