

March 19, 2015

Board of County Commissioner
Clackamas County

Members of the Board:

Approval of a Revenue Intergovernmental Agreement with Multnomah County to create a workgroup to identify needs and information specific to County's School Based Health Centers (SBHC) in coordination with the SBHC Alternative Payment Innovation Project (APIP)

Purpose/Outcomes	Provide consultation and create a work group to identify needs specific to Multnomah County's school based health centers.
Dollar Amount and Fiscal Impact	Contract maximum value is \$15,000.
Funding Source	This is a Revenue Agreement. No County General Funds are involved.
Safety Impact	None
Duration	Effective October 1, 2014 and terminates on June 30, 2015
Previous Board Action	No previous action
Contact Person	Deborah Cockrell, Health Center Director – 503-742-5495
Contract No.	7022

BACKGROUND:

Clackamas County Health Centers Division (CCHCD) of the Health, Housing & Human Services requests the approval of a Revenue Intergovernmental Agreement with Multnomah County to provide consultation and create a work group to identify needs specific to Multnomah County's school based health centers.

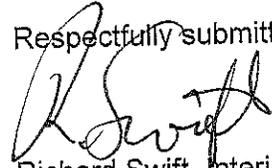
Multnomah County is providing funds for CCHCD to participate in their Alternative Payment Innovation Project. CCHCD will consult and create a work group to identify needs and information specific to their SCHC regarding Informatics capabilities, identifying patients, billing and finance systems, and services provided.

The maximum contract value is \$15,000. The Agreement is effective October 1, 2014 and terminates June 30, 2015. This Agreement is retro-active due to language negotiations and late receipt from Multnomah County.

Recommendation

We recommend approval of this agreement and that Richard Swift be authorized to sign on behalf of the Board of County Commissioners.

Respectfully submitted

A handwritten signature in black ink, appearing to read "R. Swift", written in a cursive style.

Richard Swift, Interim Director

INTERGOVERNMENTAL AGREEMENT

Contract # 7072

Contract Number 4400001489

This is an Agreement between **Clackamas County** hereafter called **Contractor** and **Multnomah County** hereafter called County.

PURPOSE:

The purpose of this agreement is to provide funds to Clackamas County to support their participation with the SBHC Alternative Payment Innovation Project (APIP).

The parties agree as follows:

1. The term of this agreement shall be from 10/01/2014 to 06/30/15.
2. **RESPONSIBILITIES OF Clackamas County** Clackamas County agrees to.
 - Create a workgroup comprised of staff that are familiar with the services and financial systems of the School Based Health Center Program.
 - Convene workgroup monthly to identify needs and information specific to County's school based health centers in coordination with the SBHC Alternative Payment Innovation Project workgroup, including but not limited to:
 - Informatics capabilities
 - Identifying Health Share patients vs. Family Care patients
 - Billing and finance systems
 - Services provided
 - Send County representative to participate in the larger SBHC APIP workgroup.
 - Complete APIP activity sheet and send meeting agendas and minutes to APIP project coordinator.
3. **RESPONSIBILITIES OF COUNTY.** The County agrees to
 - Provide technical assistance via consultants hired for the larger APIP workgroup.
4. **COMPENSATION TERMS.** The maximum payment under this Agreement, including expenses shall not exceed \$ 15,000.00 COUNTY shall compensate CONTRACTOR within thirty (30) days of providing the COUNTY with an invoice of services rendered. The invoice shall include the date and cost of the services.

A. The invoice shall include the date and cost of the expense, and must:

- 1) Be "Billed to Multnomah County"
- 2) Include invoice number and invoice date
- 3) Include vendor name and address
- 4) Reference Multnomah County Agreement number 4400001489
- 5) Describe the goods or services delivered

B. Payment terms are net 30 days after receipt of an accurate and acceptable invoice. Notwithstanding any of the foregoing, payment is subject to the COUNTY's determination that services claimed have been completed and delivered satisfactorily in accordance with the terms of the Agreement. In the event that part or all of an invoice is disputed, CONTRACTOR will be requested to resubmit an acceptable invoice.

C. Invoices shall be submitted to:

Multnomah County Health Department
Courtney Kappes
3505 SE 182nd Ave
Gresham, OR 97030
Courtney.kappes@multco.us
503-988-9254

D. COUNTY certifies that sufficient funds are available and authorized to finance costs of this Agreement. In the event that funds cease to be available to COUNTY in the amounts anticipated, either COUNTY or CONTRACTOR may terminate the Agreement or the parties by mutual agreement may reduce Agreement funding accordingly. COUNTY will notify CONTRACTOR as soon as it receives notification from funding source. Reduction or termination will not affect payment for accountable expenses prior to the effective date of such action.

E. All final billings affecting Agreement payment must be received within thirty (30) days after the end of the Agreement period. Final billings not received within this specified time period will be the sole responsibility of CONTRACTOR.

5. TERMINATION This agreement may be terminated by either party upon 30 day's written notice.

6. INDEMNIFICATION Subject to the conditions and limitations of the Oregon Constitution and the Oregon Tort Claims Act, ORS 30.260 through 30.300, County shall indemnify, defend and hold harmless Contractor from and against all liability, loss and costs arising out of or resulting from the acts of County, its officers, employees and agents in the performance of this agreement. Contractor shall indemnify, defend and hold harmless County from and against all liability, loss and costs arising out of or resulting from the acts of Contractor, its officers, employees and agents in the performance of this agreement.

7. INSURANCE Each party shall each be responsible for providing worker's compensation insurance as required by law. Neither party shall be required to provide or show proof of any other insurance coverage.

8. ADHERENCE TO LAW Each party shall comply with all federal, state and local laws and ordinances applicable to this agreement.

9. NON-DISCRIMINATION Each party shall comply with all requirements of federal and state civil rights and rehabilitation statutes and local non-discrimination ordinances.

10. ACCESS TO RECORDS Each party shall have access to the books, documents and other records of the other which are related to this agreement for the purpose of examination, copying and audit, unless otherwise limited by law.

11. SUBCONTRACTS AND ASSIGNMENT Neither party will subcontract or assign any part of this agreement without the written consent of the other party.

12. THIS IS THE ENTIRE AGREEMENT This Agreement constitutes the entire Agreement between the parties. This Agreement may be modified or amended only by the written agreement of the parties.

13. ADDITIONAL TERMS AND CONDITIONS:
N/A

MULTNOMAH COUNTY, OREGON:

CONTRACTOR:

County Chair or Designee: Deborah Kaufmanyles
Date: 3/3/15

Signature: _____

Print Name: _____

Dept Director or Designee: _____
Date: _____

Title: _____

Date: _____

JENNY M. MADKOUR
COUNTY ATTORNEY FOR MULTNOMAH COUNTY

Approved as to form by: _____

By Assistant County Attorney Bernadette Nunley /WES
Date: 02/17/2015

Date: _____