

 <p>Washington State Department of Social &amp; Health Services</p> <p><i>Transforming lives</i></p>	<h2>COUNTY PROGRAM AGREEMENT AMENDMENT</h2>	DSHS Agreement Number 2163-23564  Amendment No. 01	
This Program Agreement Amendment is by and between the State of Washington Department of Social and Health Services (DSHS) and the County identified below.		Administration or Division Agreement Number <a href="#">Click here to enter text.</a> County Agreement Number	
DSHS ADMINISTRATION Developmental Disabilities Admin	DSHS DIVISION Division of Developmental Disabilities	DSHS INDEX NUMBER 1227	CCS CONTRACT CODE 1227
DSHS CONTACT NAME AND TITLE Wendi Winchel		DSHS CONTACT ADDRESS PO BOX 45315 Olympia, WA 98504-5315	
DSHS CONTACT TELEPHONE (360) 725-4264	DSHS CONTACT FAX (360) 586-6502	DSHS CONTACT E-MAIL winchwa@dshs.wa.gov	
COUNTY NAME Lewis County Lewis County DDA County Services		COUNTY ADDRESS 360 NW North St Chehalis, WA 98532-	
COUNTY FEDERAL EMPLOYER IDENTIFICATION NUMBER		COUNTY CONTACT NAME Sara Sons	
COUNTY CONTACT TELEPHONE (360) 740-1418	COUNTY CONTACT FAX <a href="#">Click here to enter text.</a>	COUNTY CONTACT E-MAIL sara.sons@lewiscountywa.gov	
IS THE COUNTY A SUBRECIPIENT FOR PURPOSES OF THIS PROGRAM AGREEMENT? No		CFDA NUMBERS	
AMENDMENT START DATE 07/01/2021	PROGRAM AGREEMENT END DATE 06/30/2023		
PRIOR MAXIMUM PROGRAM AGREEMENT AMOUNT \$936,293.00	AMOUNT OF INCREASE OR DECREASE \$931,697.00	TOTAL MAXIMUM PROGRAM AGREEMENT AMOUNT \$1,867,990.00	
REASON FOR AMENDMENT; CHANGE OR CORRECT CHOOSE ONE:			
<b>EXHIBITS.</b> When the box below is marked with a check (4) or an X, the following Exhibits are attached and are incorporated into this Program Agreement Amendment by reference: <input type="checkbox"/> Exhibits (specify):			
This Program Agreement Amendment, including all Exhibits and other documents incorporated by reference, contains all of the terms and conditions agreed upon by the parties as changes to the original Program Agreement. No other understandings or representations, oral or otherwise, regarding the subject matter of this Program Agreement Amendment shall be deemed to exist or bind the parties. All other terms and conditions of the original Program Agreement remain in full force and effect. The parties signing below warrant that they have read and understand this Program Agreement Amendment, and have authority to enter into this Program Agreement Amendment.			
COUNTY SIGNATURE(S)	PRINTED NAME(S) AND TITLE(S)	DATE(S) SIGNED	
DSHS SIGNATURE	PRINTED NAME AND TITLE	DATE SIGNED	

This Program Agreement between the County and the State of Washington Department of Social and Health Services (DSHS) is hereby amended as follows:

1. The **Total Maximum Contract Amount** is hereby increased in the amount of \$931,697.00 for a new Contract Amount of \$1,867,990.00
2. **Section 1. Definitions Specific to Program Agreement**, items o, r, and u are hereby replaced with the following language:
  - o. "Employment Outcome Payment" means a payment to providers for transition students born between specific dates; have high acuity; are authorized for Individual Employment, and student obtains a competitive integrated job within specific timeframes. If the job is a minimum of ten hours of work per week an additional amount will be included in the payment.
  - r. "Job Foundation Report" means a document derived from [employment readiness activities](#) performed by students who are between ages 19 through 20 that identifies actionable next steps for employment. The employment service providers developing the Job Foundation report will be supporting students with employment activities on average 35 hours.
  - u. "Quality Assurance" means an adherence to all Program Agreement requirements, including [DDA Policy 6.13, Provider Qualifications for Employment and Day Program Services](#), County Guidelines, and the Criteria for Evaluation, as well as a focus on reasonably expected levels of performance, quality and practice.
3. **Section 4. Credentials and Minimum Requirements**, item h. is hereby replaced with the following language:
  - h. Qualified Service Providers: The County assures that all service providers meet qualifications as outlined in the DDA Policy 6.13, Provider Qualifications for Employment and Day Program Services.
4. **Section 6. Statement of Work**, items k. (4), (5) and (11), t. and u. are hereby replaced with the following language:
  - (4) All Clients will have an individualized employment or Community Inclusion plan to identify Client's preferences. Minimum plan elements are outlined in the reference document "Criteria for Evaluation". A copy of the Client's individualized plan will be provided to the Client, their CRM, guardian, and others as appropriate.
  - (5) Six-month progress reports describing the progress made towards achieving Client's goal will be provided by the service provider to the CRM, participant, and/or guardian, if any, within 30 days following the six-month period. The report will summarize activities and outcomes made towards Client's individualized goal(s).
  - (11) For Group Supported Employment (GSE), Clients must have paid work. The total number of direct service staff hours provided to the group should be equal to or greater than the group's collective amount of authorized service hours. If the direct service staff hours are less than the collective amount, then the provider will be reimbursed only for the number of hours staff actually provide.

t. Partnership Project.

  - (1) A Job Foundation document will be completed per guidelines for eligible students. Eligible students are DDA Clients who were born between:

- For fiscal year 2021 9/1/00 through 8/31/01
- For fiscal year 2022 9/1/01 through 8/31/02
- For fiscal year 2023 9/1/02 through 8/31/03
- For fiscal year 2024 9/1/03 through 8/31/04

These students currently attending school and have completed an application to participate in this Value Based Payment (VBP) project. The VBP project application will include the following minimum criteria identified in the sample application found at:

[https://www.dshs.wa.gov/sites/default/files/DDA/dda/documents/Job%20Foundation%20Application\\_040720%20%28002%29.docx](https://www.dshs.wa.gov/sites/default/files/DDA/dda/documents/Job%20Foundation%20Application_040720%20%28002%29.docx)

(2) Qualified providers will collaborate with School District staff to complete the Job Foundation document and then provide a copy to the County. To be a qualified provider for the Partnership Project the Counties must require the provider to have a current contract with the Division of Vocational Rehabilitation; a contract in good standing with the County and cannot be in provisional status; a minimum of two years' experience providing Individual Employment with demonstrated job placement skills. The Job Foundation recommendation will only have actionable next steps towards integrated competitive employment.

(3)A County participating in the Partnership Project must have the ability to work collaboratively with School Districts to identify DDA students in high school, collect and track information, be proficient in electronic spreadsheets, and ability to evaluate if completed Job Foundation document(s) meet quality standards.

u. Employment Outcome Payment. Providers with transition students born between

- For fiscal year 2023 9/1/00 through 8/31/01
- For fiscal year 2024 9/1/01 through 8/31/02
- For fiscal year 2025 9/1/02 through 8/31/03
- For fiscal year 2026 9/1/03 through 8/31/04

with high acuity and are authorized for Individual Employment, may receive one outcome payment if student obtains a competitive integrated job approved by the County within timeframes described in the chart below. If the County is also the service provider DDA will provide the job approval. If the job is at a minimum of ten hours of work per week an additional amount will be included in the payment.

**5. Section 7. Consideration**, item b. (2) is hereby replaced with the following language:

(2) Spending Plan: DDA will provide the initial spending plan / Program Agreement Budget / Exhibit B. Funding shall be distributed under State and Medicaid in the revenue section. The planned expenditures for Consumer Supports are based on authorized Clients, their acuity level and work history for a given point in time. The Additional Consumer Support are the Consumer Supports multiplied by a percentage. The spending plan may only be modified by mutual agreement of the parties in writing and shall not require a program agreement amendment.

**6. Section 8. Billing and Payment**, items f. and i. are hereby replaced with the following language:

f. Program Administration: The County will provide program administration and coordination including such activities as planning, budgeting, contracting, monitoring, and evaluation. Monthly claims for administration can be 1/12 of the maximum amount identified in Exhibit B under Administration or for the actual costs incurred in the given month but will be the lesser of the two. Administration cost

reimbursement will not exceed 7% unless the Assistant Secretary of DDA approves a request for an exception under chapter 388-850 WAC.

- i. Timeliness of and Modification to Billings: All initial invoices with signed documentation must be received by the DDA Region within forty-five (45) calendar days following the last day of the month in which the service is provided. Corrected invoices and documentation including re-posted billing information will be accepted throughout the fiscal year as long as they are received within sixty (60) calendar days of the associated fiscal year unless an extension is approved by the DDA Regional Administrator or designee. Payment will not be made on any invoice submitted past sixty (60) calendar days after the Program Agreement fiscal year.

7. Exhibit B. **Program Agreement Budget** is hereby replaced with the following Exhibit B1, Program Agreement Budget.

All other terms and conditions of this Program Agreement remain in full force and effect.

## Program Agreement Budget

Original Budget                       Budget Revision

### REVENUES

Fiscal Year	Fund Source	Original	1 <sup>st</sup> Revision	2 <sup>nd</sup> Revision	3 <sup>rd</sup> Revision
2022	State only	491,780			
	Medicaid	443,505			
	<b>Total Rev.</b>	<b>\$936,293</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

Fiscal Year	Fund Source	Original	1 <sup>st</sup> Revision	2 <sup>nd</sup> Revision	3 <sup>rd</sup> Revision
2023	State only		492,179		
	Medicaid		439,518		
	<b>Total Rev.</b>		<b>\$931,697</b>	<b>\$</b>	<b>\$</b>

### FY2023

Account Title / BARS	Job Foundation Funds	PASRR Funds	State Funds	Medicaid Funds	TOTAL
ADMINISTRATION 11,12,13,14	726	1,730	32,084	26,251	60,791
OTHER CONSUMER SUPPORTS 31, 32, 41, 92, 93, 94, 97	726	0	30,937	25,312	56,975
CONSUMER SUPPORT <b>STATE-ONLY</b> 62, 64, 65, 67, 69	0	0	0		0
Child Development 61			52,051		52,051
<b>MEDICAID CLIENTS</b> 62, 64, 65, 67, 69 95, 96	10,368	24,720	363,396	363,396	761,880
<b>ROADS to COMMUNITY LIVING</b> 62, 64, 65, 67, 69			0	0	0
<b>TOTAL</b>	11,820	26,450	478,468	414,959	931,697

**FY2022**

Account Title / BARS	Job Foundation Funds	PASRR Funds	State Funds	Medicaid Funds	TOTAL
ADMINISTRATION 11,12,13,14	1,008	1,730	32,084	26,251	61,073
OTHER CONSUMER SUPPORTS 31, 32, 41, 92, 93, 94, 97	0	0	31,491	25,766	57,257
CONSUMER SUPPORT <b>STATE-ONLY</b> 62, 64, 65, 67, 69	0	0	0		0
Child Development 61			52,051		52,051
<b>MEDICAID CLIENTS</b> 62, 64, 65, 67, 69 95, 96	14,440	24,720	363,396	363,396	765,912
<b>ROADS to COMMUNITY LIVING</b> 62, 64, 65, 67, 69			0	0	0
<b>TOTAL</b>	15,408	26,450	479,022	415,413	936,293