AMENDMENT 1 TO CONTRACT 2191-40399
for
CONTRACTED SERVICES
Between
HARBORVIEW MEDICAL CENTER
And
WASHINGTON STATE DEPARTMENT OF SOCIAL & HEALTH SERVICES

This Amendment ("Amendment") is made and entered into effective as of September 30, 2022, by and between Harborview Medical Center (HMC) and Washington State Department of Social & Health Services (DSHS) and amends the Contract 2191-40399 ("Contract") made and entered into effective as of September 30, 2021, by and between HMC and DSHS. Any terms and conditions of the Contract that are not expressly amended here shall remain in effect.

The following sections below shall replace the same-titled section of the Contract.

RECITALS
Harborview Medical Center is a comprehensive healthcare facility dedicated to the control of illness and the promotion and restoration of health. Its primary mission is to provide healthcare for the most vulnerable residents of King County; to provide and teach exemplary patient care; to provide care for a broad spectrum of patients from throughout the region; and to develop and maintain leading centers of emphasis.

Washington State Department of Social & Health Services is the State of Washington's largest agency and provides shelter, care, protection, and support to 2.4 million people. The mission of DSHS is to transform lives through their various sub-agencies on Aging and Long-term Support, Behavioral Health, Child Protection, Developmental Disabilities, Economic Services, Rehabilitation, Facilities, Finance and Analytics, and Services Enterprise Support.

The Harborview Medical Center Medication Assisted Treatment - Prescription Drug and Opioid Addiction Project (HMC MAT-PDOA III) is a grant awarded to HMC beginning 9/30/2021.

Harborview Medical Center Targeted Capacity Expansion: Special Projects, is a grant awarded to HMC beginning 9/30/2022.

The purpose of these grants is to expand access to integrated medication assisted treatment for individuals with opioid use disorder and an effort to address the rising rates of opioid-related problems in Washington State, including overdose deaths and addiction treatment admissions.

DSHS RDA has experience in analyzing the type of data required for these grants, in the protection of human subjects, measuring outcomes and providing technical assistance for data subject to the Government Performance and Results Act.

HMC and DSHS, in consideration of their shared mission, wish to commemorate their relationship in this Contract for Services.
SERVICES
HMC and DSHS shall work together to furnish the necessary personnel, equipment, material and/or services and otherwise do all things necessary for or incidental to the performance of the work set forth in Exhibit A and Exhibit B attached hereto and incorporated within.

PERIOD OF PERFORMANCE
The period of this contract will be from September 30, 2021, until November 29, 2026, unless terminated sooner as provided herein.

For the period beginning September 30, 2022, until September 29, 2025, DSHS will provide additional work, outlined in the RECITALS, for the Targeted Capacity Expansion: Special Projects grant.

BILLING AND PAYMENT
The parties estimate that the cost of accomplishing the work for the HMC MAT-PDOA III grant will not exceed a maximum value of $227,087 over the entire period of performance.

The parties estimate that the cost of accomplishing the work for the Targeted Capacity Expansion: Special Projects grant will not exceed a maximum value of $75,000 over the period of performance beginning September 30, 2022, until September 29, 2025.

The total value of this contract is $302,087. Payment will not exceed this amount without a prior written amendment. HMC will authorize payment only upon satisfactory completion and acceptance of deliverables and for allowable costs as outlined in the Recitals.

DSHS agrees to comply with the applicable rules and regulation associated with these funds. DSHS is a contractor to HMC on this grant.

<table>
<thead>
<tr>
<th>Name of Award</th>
<th>Period of Performance</th>
<th>Estimated Payment</th>
</tr>
</thead>
<tbody>
<tr>
<td>HMC MAT-PDOA III</td>
<td>09/30/2021 – 11/29/2026</td>
<td>$227,087</td>
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<tr>
<td>Targeted Capacity Expansion: Special Projects</td>
<td>09/30/2022 – 09/29/2025</td>
<td>$75,000</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>$302,087</td>
</tr>
</tbody>
</table>

Signatures appear on the following page:
HARBORVIEW MEDICAL CENTER

By:

Sommer Klewen-Walley
Chief Executive Officer

Date 10/6/2022

WASHINGTON STATE DEPARTMENT OF SOCIAL AND HEALTH SERVICES

By:

Amel A. Alsalam
Procurement Program Contracts Manager

Date 10/06/2022
Contract for Services
Between
Harborview Medical Center
And
Washington State Department of Social & Health Services
For
Purchase of Performance Assessment and Outcome Evaluation Services

EXHIBIT B

Statement of Work

PURPOSE:
This statement of work details the obligations of DSHS as contractor on HMC’s Targeted Capacity Expansion: Special Projects grant award.

Project: Special Projects Collaborative - Opioid Use Disorder (SPC-OUD)

Subcontractor:
Department of Social & Health Services (DSHS)
1115 Washington Street NE
Olympia, WA 98504-45204
Contract Contact: Jim Mayfield

Employee Identification Number: 91-6001088-02
Unique Entity Identifier: SEYQXMXJLUP5

Project: The Harborview Medical Center Special Projects Collaborative - Opioid Use Disorder (SPC-OUD) project.

Project Timeline: September 30, 2022 – September 29, 2025
Final Reporting and Invoicing: September 30, 2025 – November 30, 2025
Total Projected Budget: $75,000

- HMC will maintain a participant log using the GPRA IDs that will include other data describing critical services and milestones, screening and assessment results, prescription information, referrals, and other key measures to be determined prior to implementation.
- A crosswalk file linking the GPRA IDs to patient identifiers will be kept by HMC and not shared with RDA.
- The participant log will be provided to RDA on the first Friday of each month, for the previous month, through a secure server.
- RDA will download GPRA data from SPARS and link it to the patient-level measures in the participant log.
- From this linked file, RDA will create monthly program monitoring reports that include measures such as total persons served, demographics, retention rates, substance use profiles, and any other programmatically relevant measures to track. RDA will provide these monthly reports to HMC by the 2nd Friday of each month (one week from the time they receive the data).
- These reports will be reviewed with HMC leadership on a monthly basis on the 2nd Friday of the month to ensure the program is meeting its grant obligations for data collection, achieving its programmatic goals, and assess any disparities in services
across demographics.

- The RDA analyst will attend the meeting on the 2nd Friday of the month to present their data.
- Any disparities identified will be addressed by identifying culturally competent and gender specific program approaches.
- The combination of GPRA and HMC participant level data will support the project’s reporting requirements to SAMHSA, ongoing performance monitoring and quality improvement efforts.
- HMC will conduct biannual local performance assessments of nurse (outpatient) and physician (inpatient) billing and level of service data in support of future sustainability planning.
- RDA will provide education and tools to new data collectors.
- DSHS will provide the Services of Lyz Speaker, Research Manager, (or her successor) for the above referenced deliverables provided by RDA.

Payment will be contingent upon delivering services as outlined above.

**HMC ROLES AND RESPONSIBILITIES**

HMC will serve as the lead organization on this project and have responsibility for oversight of the project. HMC will coordinate with DSHS regarding the above outlined deliverables.

HMC will pay invoices within 30 days of receipt. DSHS will submit invoices to:

Elsa Tamru  
Project Director  
325 9TH Ave, Box 359892  
Seattle, WA 98104  
(206) 744-8516  
tamru@uw.edu