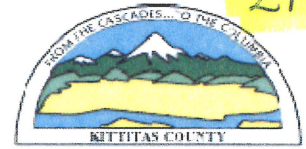


21161

**Kittitas County  
Review Form  
Grants & Contract Agreement**



Today's Date 11/24/2014	Agenda Date
Fund/Department 116-Public Health	

**Contract/Grant Information**

Contract /Grant Agency: Yakima Neighborhood Health Services	
Period Begin Date: October 8, 2013	Period End Date: February 28, 2015
Total Grant/Contract Amount: \$1150.78 (\$575.39 per month for two months)	
Grant/Contract Number:	
Contract/Grant Summary: The Yakima Neighborhood Health Services agreement extends the existing work plan and deliverables of the Central Washington Healthplanfinder subcontract. (Extends the current contract period of performance to have the In Person Assistants enroll Kittitas County residents into health insurance and adds additional funds)	

**Recommendation for Board of Health and Board of Health Review on \_\_\_\_\_**

Department Head Signature:	Administrator Date: 1/12/15
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**Kittitas County Prosecutor, Auditor, and Board of Health Review and Comment:**

APPROVED AS TO FORM:

	12/4/2014
Signature of Prosecutor's Office	Date
	12/5/14
Signature of Auditor's Office	Date
_____ Signature of Board of Health member	Date

**Financial Information**

Total Amount \$1150.78	State Funds \$	Federal Funds \$1150.78
Percentage County Funds	Matching Funds \$	CFDA# 93.525

	In-Kind \$ Explain
Is Equipment being purchased?	Who owns equipment?
New Personnel being hired?	Contact HR hiring – reporting requirements
Future impacts or liability to Kittitas County:	

### Budget Information

Budget Amendment Needed?	Yes <input type="checkbox"/> attach budget form	No <input checked="" type="checkbox"/> Why not
New Division Created?		Will include in 2015 budget
Revenue Code 116-612.30.333.93.525		

### Pass Through Information

Agency to Pass Through	
Amount to Pass Through	\$
Sub-Contract Approved	Date:

### Prosecutor Review

Has the Prosecutor reviewed this agreement?	Yes <input type="checkbox"/> No <input type="checkbox"/>
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### County Departments Impacted

Auditor	Facilities Maintenance
Information Services	Human Resource
Prosecutor	Treasurer

### Submitted

Signature:	Date:
Department:	

### Assignment of Tracking Information

Auditor's Office	
Human Resource	
Prosecutor's Office	
Who Signed the grant application	

Reviewer	Date
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Yakima Neighborhood Health Services  
12 South 8<sup>th</sup> St, PO Box 2605  
Yakima WA 98907-2605  
Phone (509) 454-4143 Fax (509) 454-3651  
www.ynhs.org

**Yakima Neighborhood Health Services  
Sub-Contract Amendment  
Period Covered  
January – February 2015  
for  
Kittitas County Public Health Department**


This agreement extends the existing Work Plan and Deliverables of the Central Washington Healthplanfinder Subcontract between Yakima Neighborhood Health Services (YNHS) and Kittitas County Public Health Department (KCPHD).

**Description of the Amendment:**

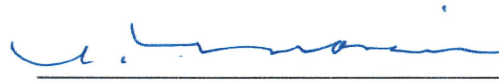
YNHS and KCPHD entered an agreement on October 8, 2013. All terms and conditions set forth in that Agreement remain in full force and effect, except that such terms and conditions are modified as follows:

1. The period of performance is extended from December 31, 2014 to February 28, 2015.
2. The sub-contractor will be paid **\$575.39 per month for two months** as monthly performance compensation for each of the two months of the extended period. This amount is based on the original allocation to sub-contractors.
3. Sub-contractor will be required to provide monthly progress reports for January and February, due by the fifth (5<sup>th</sup>) of the following month, as a condition of payment.
4. Funding for this project is dependent on the continued availability of federal and/or state funds.

Sub-Contractor hereby acknowledges and accepts the terms and conditions of this amendment. Signature is required below.

 1/12/15  
date

For Kittitas County Public Health Department

 1/24/15  
date

for Yakima Neighborhood Health Services



Accredited by the Joint Commission



Patient Centered Medical Home Level 3