BOC only: Consent Agenda					
Regular Agenda					
LATE AGENDA I	TEM COVERSHEET	Г			
Agenda Item Title: Second Contract Amenda	nent with MedTrust				
Department: Counsel	Requested Agenda	a Date: 8/27/24			
Contact Person: Colton Totland	Phone/Ext.: 7690				
<b>Background and description of need or problem</b> : 2 <sup>nd</sup> Contract Amendment to adjust the compensation for future years for Jail Medical Services.					
Funding Source: N/A					
Requested Action: Approve and sign con	ract amendment wit	h MedTrust			
Date: 8/16/2024 Signature	of Dept. Head:	tton Polland			
For all matters, forward the document to Cour <b>Agenda deadline</b> . Counsel will forward to Tr		Monday prior to the			
If this is a contract or grant:  ☐ Is the contract or grant an original? ☐ Is the Contract/Grant Summary Form attact ☐ Is the contract signed first by the vendor (e) ☐ If insurance is required, is the insurance ced ☐ Is the Clerk's Coversheet attached? ☐ Do you want this returned to you for filing?	xcept state/federal grants	or contracts)?			
County Counsel					
Treasurer		<u></u>			
Human Resources					



Name/Agency Name and Address: MedTrust  Contact Person: Ken Palmobo JD	Contact Person: Ken Palmobo JD  Amount of Contract/Grant Award: Separated Payment Terms: Lump Sum (state in Effective Date: Upon Execution  End Date: Upon Completion (if knot County Department and Employee For Description: 2nd Contract Amendment Staff Requirements: New Exist Will unemployment cost be incurred.  FINANCIAL II	Phone No: 210-4  Phone No: 210-4  See Amendment - Artice  Imp sum or amount and the start Date: (if different)  Responsible for Performant to adjust compensation tingSubcontract  PYes _No  NFORMATION (Fill outperson)	de-2333 Ide VII Subsection 7.  dime of payments)  derent from effective  derece: Colton Totland  derection for Jail Medical Se	Email: ken@mymedtrust.com  3 (a)  date, i.e. retroactive / prospective date)  County Counsel  cryices	
Phone No. 210_46_2333   Email: ken@mymedimat.com	Contact Person: Ken Palmobo JD  Amount of Contract/Grant Award: Separated Payment Terms: Lump Sum (state in Effective Date: Upon Execution  End Date: Upon Completion (if knot County Department and Employee For Description: 2nd Contract Amendme Staff Requirements: New Exist Will unemployment cost be incurred FINANCIAL II	Phone No: 210-4  See Amendment - Artic  Imp sum or amount and ti  Start Date: (if different)  Responsible for Performant to adjust compensation ting Subcontract  I? Subcontract  PORMATION (Fill outperson)	le VII Subsection 7, ime of payments) erent from effective nce: Colton Totland for Jail Medical Se	3 (a) date, i.e. retroactive / prospective date)  County Counsel ervices	
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End Date: Upon Completion (if known)  County Department and Employee Responsible for Performance: Colton Totland County Counse!  Description: 2nd Contract Amendment to adjust compensation for Jail Medical Services  Staff Requirements:    New    Existing    Subcontract  Will unemployment cost be incurred?    Yes    No  FINANCIAL INFORMATION (Fill out this section only if the County is receiving funds)  FINANCIAL INFORMATION (Fill out this section only if the County is receiving funds)  **CFDA is a five digit number in the following format: xx.xxxx. The first two digits designate the federal agency and the last three the grant description. The following is a partial stiting of the two digit segment of the federal agency and the last three the grant description. The following is a partial stiting of the two digits agency identifier:   10.xxxx USDA   4/xxx USDA   10.xxx USDA   4/xxx USDA   11.xxx Dept. of Counteroe   16.xxx USDA   11.xxx Dept. of Counteroe   16.xxx USDA   11.xxx Dept. of Counteroe   16.xxx USDA   12.xxx USDA   4/xxx VISDA   13.xxx EMA   23.xxx USDA   14.xxx Dept. of Education   15.xxx USDA   16.xxx USDA   4/xxx VISDA   16.xxx USDA   4/xxx VISDA   17.xxx USDA   18.xxx FEMA   23.xxx USDA   18.xxx FEMA   24.xxx Dept. of Education   18.xxx FEMA   24.xxx Dept. of Education   18.xxx FEMA   24.xxx Dept. of Education   19.xxx USDA   19.xxx USDA   19.xxx USDA   10.xxx USDA	End Date: <u>Upon Completion</u> (if kno County Department and Employee Financial Description: <u>2<sup>nd</sup> Contract Amendments</u> Staff Requirements: <u>New Exist</u> Will unemployment cost be incurred	wn) Responsible for Performan nt to adjust compensation ting □Subcontract I? □Yes ☑No NFORMATION (Fill ou	nce: <u>Colton Totland</u> 1 for Jail Medical Se	County Counsel ervices	
Country Department and Employee Responsible for Performance: Colton Totland County Counse!  Description: 2*** Contract Amendment to adjust compensation for Jail Medical Services  Staff Requirements:   New   Existing   Subcontract  Will unemployment cost be incurred?   Yes   No  FINANCIAL INFORMATION (Fill out this section only if the County is receiving funds)  **CFDA is a five digit number in the following format: xx.xxxx. The first two digits designate the federal agency and the last three the grant description. The following is a partial listing of the two digit sets visible of 19.00 (CFDA # Required)    1.0xxx ISDA	County Department and Employee In Description: 2nd Contract Amendments Staff Requirements: New Exist Will unemployment cost be incurred FINANCIAL II	Responsible for Performannt to adjust compensation ting Subcontract I? Yes No	ı for Jail Medical Se	rvices	
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STATE % OTHER %   FEDERAL %   Catalogs of Federal Domestic Asst.	Will unemployment cost be incurred FINANCIAL II	l? □Yes ⊠No NFORMATION (Fill ou	it this section <u>only</u> i	184ha County in recoluting funds)	
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is a partial listing of the two digit agency identifier:   10.xxx USDA   4.xxx HUD   20.xxx USDOT   66.xxx EPA   84.xxx Dept. of Education   13.xxx USDA   14.xxx HUD   39.xxx General Svs. Admin.   83.xxx FEMA   93.xxx USDHIIS     NOTE: If the contract/grant is associated with more than one CDFA number, each segment must have its own summary form.     New			(CFDA # Required)	*(CFDA) Number	
is a partial listing of the two digit agency identifier:   10.xxx USDA	*CFDA is a five digit number in the followin	g format: xx.xxx. The first two	digits designate the fede	ral agency and the last three the grant description. The follow	
Note: If the contract/grant is associated with more than one CDFA number, each segment must have its own summary form.    New	is a partial listing of the two digit agency idea	ntifier:			
New	11.xxx Dept. of Commerce 16.xxx USI	OOJ 39,xxx General Svs. Adn	nin. 83.xxx FEMA 9	93.xxx USDHHS	
Previous Amount: \$ Original Amount: \$ Original Amount: \$ Original Date:  PUBLIC CONTRACTING INFORMATION (Fill out this section only if the County is spending funds)  Method of Selection:  Bid   None   New (complete sections below)   Renewal (no need to complete sections below)   Modification (no need to complete sections below)  Type of Contract:  Goods and Services - If Not Using Bid or Proposal, Mark Exemption:   Under \$10,000   Equipment Maintenance   Office Supplies   Used Vehicles   State Purchasing   Other    Under \$5,000 & Approval from Board for Quotes   State Purchasing   Other    Public Improvement - If Not Using Bid, Mark Exemption:   Under \$5,000   Alternative Contracting Method Approved by Board   Other    Under \$50,000 and \$100,000 for Quotes and Prevailing   Wage Requirements    Personal Services Contract - If Not Using Proposal, Mark Exemption:   Under \$50,000   Under \$50,000   Other    Under \$50,000 & Approval from Board			n one CDFA number, e		
Previous Date:  PUBLIC CONTRACTING INFORMATION (Fill out this section only if the County is spending funds)  Method of Selection:    Bid	∐ New		nt: \$	<del></del>	
Method of Selection:    Bid			•		
Bid	PUBLIC CONTRACT	TING INFORMATION	(Fill out this sectio	n <u>only</u> if the County is spending funds)	
Bid	Method of Selection:		Type of (	Contract:	
Quote Other					
Type of Contract:  Goods and Services - If Not Using Bid or Proposal, Mark Exemption: Under \$10,000			Renev	val (no need to complete sections below)	
Goods and Services - If Not Using Bid or Proposal, Mark Exemption:  Under \$10,000 Under \$50,000 for Quotes Under \$150,000 & Approval from Board for Quotes Used Vehicles Sole Source Contract with Public Agency Other  Public Improvement – If Not Using Bid, Mark Exemption: Under \$5,000 Under \$50,000 for Quotes Between \$50,000 and \$100,000 for Quotes and Prevailing Wage Requirements  Personal Services Contract – If Not Using Proposal, Mark Exemption: Under \$50,000 Under \$50,000 Under \$50,000 Under \$50,000 Under \$50,000 Under \$50,000 & Approval from Board	☐ Proposal		Modification (no need to complete sections below)		
Under \$10,000	Type of Contract:				
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Under \$150,000 & Approval from Board for Quotes  Sole Source Contract with Public Agency  Public Improvement — If Not Using Bid, Mark Exemption: Under \$5,000 Under \$50,000 for Quotes Between \$50,000 and \$100,000 for Quotes and Prevailing Wage Requirements  Personal Services Contract — If Not Using Proposal, Mark Exemption: Under \$50,000 Under \$50,000 Under \$50,000 Under \$50,000				· -	
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☐ Under \$50,000 for Quotes ☐ Between \$50,000 and \$100,000 for Quotes and Prevailing Wage Requirements ☐ Personal Services Contract — If Not Using Proposal, Mark Exemption: ☐ Under \$50,000 ☐ Under \$150,000 & Approval from Board	Public Improvement – If Not Us	ing Bid, Mark Exemption	n:		
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Under \$150,000 & Approval from Board		tor Come I roposal, Man	к длошрион.		
Will project be reported to Bureau of Labor for Prevailing Wages under ORS 279C.800? ☐ Yes ⊠No		om Board			
	Will project he reported to Russau of La	hor for Prevailing Wages or	nder ORS 279C 8007	□Yes ⊠No	
Certificate of insurance required?   Yes   No			1401 0100 217010001		
De te Assurand by DOC	Date Approved by BOC:		arrile with	Reviewed by Counsel:	

#### REVISED AGENDA

COOS COUNTY BOARD OF COMMISSIONERS
Owen Building Large Conference Room, 201 N. Adams, Coquille
or Virtually at <a href="https://meet.goto.com/953580029">https://meet.goto.com/953580029</a>
August 20, 2024

# 1. 8:30 AM- EXECUTIVE SESSION under the authority of ORS 192.660, - in the small conference room. The public is excluded from this portion of the meeting

- A. (2)(d) Labor Negotiations
- B. (2)(e) Real Property Transactions
- C. (2)(h) Consultation with Counsel

## 2. 9:30 AM PUBLIC PORTION OF THE MEETING, BEGINNING WITH THE PLEDGE OF ALLEGIANCE/MOMENT OF SILENCE

### 3. DEPARTMENT HEADS

- A. Request Approval of Amendment #5 to IGA with Oregon Health Authority & Authorize Mike Rowley to DocuSign- Coos Health & Wellness (CHW)
- B. Request Approval of Contract with TriWest Healthcare Alliance & Authorize Mike Rowley to Sign-CHW
- C. Request Approval of Services Agreement with Lines for Life & Authorize Mike Rowley to Sign-CHW
- D. Request Approval to Post & Fill Either QMHP or QMHA Level Position- CHW
- E. Request Approval to Post & Fill Mental Health Specialist II Position- CHW
- F. Request Award of Forest Labor Contract- Forestry
- G. Request Award of Planting Contract- Forestry
- H. Request Award of Pre-Commercial Thinning Contract- Forestry
- I. Request Approval of Forest Operations Foreman Job Description- Forestry
- J. Request Award of Contract for Paving Trailhead Parking at Laverne Park- Parks
- K. Request Award of Contract for Water Treatment Facilities at Laverne/West Laverne Parks & Authorize Craig Storm to Sign- Parks
- L. Request Approval to Purchase Used Portable Stacker Conveyor- Road
- M. Request Approval to Purchase New Roller- Road
- N. Request Approval to Pay Fuel Bill- Sheriff
- O. Request Approval of Order Adopting Vacation of Public Way- Community Development
- P. Request Approval of IGA with OEBB & Authorize Chair to Sign- HR/Counsel
- Q. Request Approval of Donation Agreement with Weyerhaeuser Timber Holdings & Authorize Chair to Sign-Counsel **This agenda item has been cancelled.**
- R. Discussion with Bill Gerski re: Beacon Broadband Project- BOC
- S. Discussion re: County Forest Road Access- BOC

This agenda does not limit the ability of the Commissioners to consider additional subjects. The Board reserves the right to place a time limit on public testimony on any matter. The meeting place is handicapped accessible; if special accommodation is needed, please contact the office at least 24 prior to the meeting.

## 4. CONSENT CALENDAR- administrative matters not up for discussion

## A. Approval of Minutes

Workgroup Minutes- May 28, 2024 Worksession- Insurance- June 18, 2024

#### B. Orders & Resolutions

Order 24-08-038C, In the Matter of Appointing Curt Benward to the Coos County Library Service District Board

Resolution 24-08-133P, In the Matter of Classifying and Placement of Various Employees on the Regular Coos County Payroll Effective Their Hire Date

Resolution 24-08-134P, In the Matter of Filling a Vacant Position and Transfer for Cassidy Carr Effective August 1, 2024

Resolution 24-08-135P, In the Matter of Granting Salary Merit Step Increases for Various Employees Retroactive to July 1, 2024

Resolution 24-08-136P, In the Matter of Granting Salary Merit Step Increases for Various Employees Effective August 1, 2024

Resolution 24-08-137P, In the Matter of Granting Salary Merit Step Increases for Various Employees Effective September 1, 2024

Resolution 24-08-138P, In the Matter of a Salary Adjustment Due to Certification for Sean Sanborn Effective August 1, 2024

## C. Post-Action Notifications Pursuant to County Rule 10.043 (5)

Contract Amendment #1 with Strata Design- Road- Ross Inlet wall failure Contract Amendment #1 with Strata Design- Road- Fairview Sumner landslide Contract Amendment #1 with Strata Design- Road- Olive Barber road failure

#### 5. LATE AGENDA ITEMS

A. Request Approval of Contract Amendment #2 with MedTrust- County Counsel

## 6. COMMISSIONERS REPORTS

## 7. CITIZEN COMMENTS- limited to 3 minutes per person