() Discussion only (X) Action

FROM (DEPT/ DIVISION): Douglas R. Olsen County Counsel

SUBJECT: DD Payable

Background: A payable is before the Board for approval due to the amount. The payable is for the annual renewal of software maintenance for the DD billing system to the State. The cost is budgeted and paid from DD funding.	Requested Action: Approve payable to Therap Services LLC in the amount of \$19,903.28
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ATTACHMENTS: Payable

*************For Internal Use Only**********

Checkoffs:

() Dept. Head (copy)) Budget (copy)	To be notified of Meeting:
((X () Fiscal) Legal (copy)) (Other - List:)	Needed at Meeting:

Scheduled for meeting on: July 16, 2025

Action taken:

		UMALILLA COUNTY PATMENT REQUEN	T FATMENT RE	QUESI		
PEID-AC	12034-01	Call Finance for PEID #		AUTHORIZATION-APPROVAL	N-APPROVAL	
NAME	THERAP SERVICES LLC	C	DEPARTMENT	A Dect	URE	DATE PAID
ADDRESS	333 KENNEDY DRIVE, SUITE - R101	SUITE - R101	CFO	SIGNATURE IF CV/ER 33,000	OVER \$3,000	
ADDRESS			BOARD	DATE -ATTACH APPROVAL	HAPROVAL	CHECK NUMBER
CITY, STATE, ZIP	TORRINGTON, CT 06790-3060	90-3060		6/19/2025	2025	RETURN - HOLD
AMOUNT	ACCOUNT #	DESCRIPTION	INVOICE NUMBER	INVOICE TOTAL	INVOICE DATE	FINANCE CODES
\$19,903.28	2185-50-54900-530030	2185-50-54900-530030 MAINT. CONTRACT-COMPUTER	GOVUMATILLA-0000 7811-353	\$19,903.28	06-17-25	
		4				
\$19,903.28	\$19,903.28 PAGE TOTAL		Office Use: Pretravel Auth rec:		Contract Reviewed:	Routine:
\$19,903.28	\$19,903.28 GRAND TOTAL		Office Use: Tax ID Reviewed:		Quotes: Bids:	

UMATILLA COUNTY PAYMENT REQUEST

Therap[®]/Person-Centered. Data-Driven.

Invoice

То	Kim Beck, Program Manager	Invoice #: GOVUMATILLA-00007811-353
	CDDP of Umatilla County: Oversight Provider	Invoice Date: 6/17/2025
	817 SE 13th	
	Pendleton, OR 97801	
	Email: kim.beck@umatillacounty.gov	Invoice due date to get discount: 8/18/2025

Provider Code	Total No. of Active Individuals	Billing Year	Start Date	End Date		
UMA-OR (Oversight Account)						
HPI-OR	++0.	15th	September 1, 2025	August 31, 2026		
PCL-OR	**)					
RISE-OR						
TREND-OR						
UMA2-OR	419					

Product Code	Product Description	No. of Active Individuals	Base Rate/ Individual	Base Total Before CPI adjustment	CPI Increase to Apply*	Total After CPI Adjustment	Discount	Total After CPI Adjustment (After Discount)
IS-131	Individual Support Full Time	419	\$39.96	\$16,743.24	1.398512	\$23,415.62	15%	\$19,903.28
							Subtotal	\$19,903.28
						Non	Taxable Services	
							Invoice Total	\$19,903.28

Customer is responsible for any applicable Sales or Use Taxes for this Invoice. If the Customer is exempt from applicable State or Local Sales and/or Use taxes, please submit evidence to the accounting office to receive a revised invoice.

If you have any questions or if this invoice should have been directed to another party, please feel free to contact us at 203.596.7553 or via email at Finance@TherapServices.net.

We are aware of a new scam where users are told that we have changed our bank or made an error in the account number. Please see the details on our website and contact us if you have any questions.

* Consumer Price Index (CPI) Increase Calculation

Base Month/Year for CPI Adjustment	Base Dec. CPI Index	Effective Month/Year for CPI Adjustment	Effective Dec. CPI Index	CPI Increase to Apply	Average CPI Increase in the Period
Dec. 2011	225.672	Dec. 2024	315.605	1.398512	2.61%

For more information on CPI, visit: http://www.bls.gov/cpi/ Ver 05/25