

Browning Public Schools  
**Board Agenda Request**  
Meeting to Be Held: 7/29/2025



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<b>Recognition:</b>	<input type="checkbox"/> Students	<input type="checkbox"/> Staff	<input type="checkbox"/> Parents
<b>Information:</b>	<input type="checkbox"/> Building Report	<input type="checkbox"/> Old Business	<input type="checkbox"/> Superintendent's Report
<b>Action:</b>	<input type="checkbox"/> Resignation	<input type="checkbox"/> Hiring	<input type="checkbox"/> Contract Service Agreements
	<input type="checkbox"/> Travel Out-of-State	<input type="checkbox"/> Travel In State	<input checked="" type="checkbox"/> Approvals
	<input type="checkbox"/> Termination	<input type="checkbox"/> Legal Matters	<input type="checkbox"/> Other:
This action request pertains to	<input type="checkbox"/> Elementary (only)	<input checked="" type="checkbox"/> High School/District Wide	

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**Date:** 7/22/2025

**To:** Board of Trustees  
Browning Public Schools

**From:** Rebecca Rappold  
**Title:** Superintendent

**Subject:** Contract Service Agreement: Tele-Mental Health Services 2025-2026

**Description:** Contract Service Agreement to provide Tele-Mental Health services for 2025-2026. Contractor will provide at their own cost: Professional Liability insurance, Tribal Business License, State Business License, Yearly renewal of professional licenses, Subscription to Simple Practice, Online service that provides confidential scheduling, Client portal, Confidential Tele-Mental Health, and Third-party billing. The cost to the district will be \$3,800.00 per month for twelve months, to be renegotiated at the end of the fiscal year. The parties recognize this is a base salary, which covers one week of expenses for 20 clients a week, or five clients a month. The three weeks or additional clients will be billed via a third party; ex. Medicaid or private insurance. Contract to begin on September 1, 2025 – August 31, 2026.

**Financial Impact:** \$45,600.00 (\$3,800 per month for 12 months)

**Funding Source (Budget/grant, etc.):**

**Attachment(s):** Agreement

**Approval:** Superintendent's Office/Finance/Personnel as applicable (Initial) \_\_\_\_\_

**Comments:** \_\_\_\_\_

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**Board Action:** ☐ N/A (Info) ☐ Approved ☐ Denied ☐ Tabled to: \_\_\_\_\_