AGREEMENT FOR PROVISION OF 1 MENTAL HEALTH 2 PEER SUPPORT AND WELLNESS CENTER SERVICES 3 BETWEEN 4 COUNTY OF ORANGE 5 AND 6 COLLEGE COMMUNITY SERVICES 7 JULY 1, 20121 THROUGH JUNE 30, 20142 8 9 THIS AGREEMENT entered into this 1st day of July 2012, which date is enumerated for purposes 10 of reference only, is by and between the COUNTY OF ORANGE (COUNTY) and 11 COLLEGE COMMUNITY SERVICES, a California non-profit mutual benefit corporation 12 (CONTRACTOR). This Agreement shall be administered by the County of Orange Health Care Agency 13 (ADMINISTRATOR). 14 15 WITNESSETH: 16 17 18 WHEREAS, COUNTY wishes to contract with CONTRACTOR for the provision of Peer Support and Wellness Center sServices described herein to the residents of Orange County; and 19 WHEREAS, CONTRACTOR is agreeable to the rendering of such services on the terms and 20 conditions hereinafter set forth: 21 NOW, THEREFORE, IT IS MUTUALLY AGREED AS FOLLOWS: 22 // 23 // 24 25 // 26 // // 27 28 // 29 // 30 // 31 // 32 // // 33 // 34 // 35 // 36 37 || //

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1		REFERENCED CONTRAC	CT PROVISIONS		
2 3	Term: – Jul ^v	y 1, 201 <mark>2</mark> 4 through June 30, 201 <mark>4</mark> 2			
4		Period One means the period from July 1, 2012 through June 30, 2013			
5		the period from July 1, 2013 through Ju			
6					
7	Maximum Obliga	tion: <u>\$1,500,000</u>			
8		Period One Maximum Obligatio			
9		Period Two Maximum Obligatio TOTAL MAXIMUM OBLIGAT			
10	Pagis for Doimhu	rsement: Actual Cost			
11					
12	Payment Method	: Provisional Amount			
13 14	Notices to COUN	TY and CONTRACTOR:			
14 15					
15 16	COUNTY:	County of Orange Health Care Agency			
10 17		Contract Development and Management	nt		
18		405 West 5th Street, Suite 600			
19		Santa Ana, CA 92701-4637			
20	CONTRACTOR:	President			
21		College Community Services			
22		4281 Katella Avenue, Suite 201			
23		Los Alamitos, CA 90720			
24	CONTRACTOR ³	's Insurance Coverages:			
25	Coverage		Minimum Limits		
26					
27	Commercial Gener	ral Liability	\$1,000,000 per occurrence \$2,000,000 aggregate		
28			φ2,000,000 aggregate		
29		ity, including coverage	\$1,000,000 per occurrence		
30 21	I for owned, non-o	wned and hired vehicles			
31 22	Workers' Compens	sation	Statutory		
32 33	Employer's Liabili	ty Insurance	\$1,000,000 per occurrence		
33 34		-			
34 35	Professional Liabil	ity Insurance	\$1,000,000 per claims made or		
36			per occurrence		
37	Sexual Misconduc	t	\$1,000,000 per occurrence		

1	1	I. <u>ACRONYMS</u>				
2	The following standard definitions are for reference purposes only and may or may not apply in their					
3	entirety throughout this Agreement:					
4	A. ADL	Activities of Daily Living				
5	B. AMHS	Adult Mental Health Services				
6	C. AA	Alcoholics Anonymous				
7	D. ARRA	American Recovery and Reinvestment Act				
8	E. ASRS	Alcohol and Drug Programs Reporting System				
9	F. BBS	Board of Behavioral Sciences				
10	G. BHS	Behavioral Health Services				
11	H. CAT	Centralized Assessment Team				
12	I. CCC	California Civil Code				
13	J. CCR	California Code of Regulations				
14	K. CFR	Code of Federal Regulations				
15	L. CHPP	COUNTY HIPAA Policies and Procedures				
16	M. CHS	Correctional Health Services				
17	N. CSW	Clinical Social Worker				
18	O. DCR	Data Collection and Reporting				
19	P. DD	Dual Disorders				
20	Q. DHCS	Department of Health Care Services				
21	R. D/MC	Drug/Medi-Cal				
22	S. DPFS	Drug Program Fiscal Systems				
23	T. DRS	Designated Record Set				
24	U. DSH	Direct Service Hours				
25	V. DSM	Diagnostic and Statistical Manual of Mental Disorders				
26	W. EBP	Evidence-Based Practice				
27	X. EHR	Electronic Health Record				
28	Y. FSP	Full Service Partnership				
29	Z. FTE	Full Time Equivalent				
30	AA. HHS	Health and Human Services				
31	AB. HIPAA	Health Insurance Portability and Accountability Act				
32	AC. HSC	California Health and Safety Code				
33	AD. IMD	Institution for Mental Disease				
34	AE. IRIS	Integrated Records Information System				
35	AF. KET	Key Events Tracking				
36	AG. LPS	Lanterman-Petris Short				
37	AH. LPT	Licensed Psychiatric Technician				

1	AI.	MFT	Marriage and Family Therapist
2	AJ.	MHP	Mental Health Plan
3	AK.	MHRC	Mental Health Rehabilitation Centers
4	AL.	MHS	Mental Health Specialist
5	AM.	MHSA	Mental Health Services Act
6	AN.	MIHS	Medical and Institutional Health Services
7	AO.	MORS	Milestones of Recovery Scale
8	AP.	MTP	Master Treatment Plan
9	AQ.	NA	Narcotics Anonymous
10	AR.	NOA-A	Notice of Action
11	AS.	NP	Nurse Practitioner
12	AT.	NPI	National Provider Identifier
13	AU.	NPP	Notice of Privacy Practices
14	AV.	OCJS	Orange County Jail System
15	AW.	OCPD	Orange County Probation Department
16	AX.	OCR	Office for Civil Rights
17	AY.	OCSD	Orange County Sheriff's Department
18	AZ.	OIG	Office of Inspector General
19	BA.	OMB	Office of Management and Budget
20	BB.	OPM	Federal Office of Personnel Management
21	BV.	P&P	Policies and Procedures
22	BD.	PADSS	Payment Application Data Security Standard
23	BE.	PAF	Partnership Assessment Form
24	BF.	PBM	Pharmaceutical Benefits Management
25	BG.	PC	State of California Penal Code
26	BH.	PCI DSS	Payment Card Industry Data Security Standard
27	BI.	PHI	Protected Health Information
28	BJ.	PII	Personally Identifiable Information
29	BK.	PRA	Public Record Act
30	BL.	PSC	Personal Services Coordinator
31	BM.	QIC	Quality Improvement Committee
32	BN.	RN	Registered Nurse
33	BO.	SSI	Social Security Income
34	BP.	UMDAP	Universal Method of Determining Ability to Pay
35	BQ.	USC	United States Code
36	BR.	WIC	State of California Welfare and Institutions Code
37	BS.	WRAP	Wellness Recovery Action Plan

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BT. XML E

Extensible Markup Language

II. ALTERATION OF TERMS

This Agreement, together with Exhibit A attached hereto and incorporated herein by reference, fully expresses all understanding of COUNTY and CONTRACTOR with respect to the subject matter of this Agreement, and shall constitute the total Agreement between the parties for these purposes. No addition to, or alteration of, the terms of this Agreement, whether written or verbal, shall be valid unless made in writing and formally approved and executed by both parties.

III. ASSIGNMENT OF DEBTS

Unless this Agreement is followed without interruption by another Agreement between the parties hereto for the same services and substantially the same scope, at the termination of this Agreement, CONTRACTOR shall assign to COUNTY any debts owing to CONTRACTOR by or on behalf of persons receiving services pursuant to this Agreement. CONTRACTOR shall immediately notify by mail each of these persons, specifying the date of assignment, the County of Orange as assignee, and the address to which payments are to be sent. Payments received by CONTRACTOR from or on behalf of said persons, shall be immediately given to COUNTY.

IV. COMPLIANCE

A. COMPLIANCE PROGRAM - ADMINISTRATOR has established a Compliance Program for the purpose of ensuring adherence to all rules and regulations related to federal and state health care programs.

1. ADMINISTRATOR shall ensure that CONTRACTOR is made aware of the relevant policies and procedures relating to ADMINISTRATOR's Compliance Program.

2. CONTRACTOR shall ensure that its employees, subcontractors, interns, volunteers, and members of Board of Directors or duly authorized agents, if appropriate, ("Covered Individuals")_

2. Covered Individuals includes all contractors, subcontractors, agents, and other persons who provide health care items or services or who perform billing or coding functions on behalf of HCA. Notwithstanding the above, this term does not include part-time or per diem employees, contractors, subcontractors, agents, and other persons who are not reasonably expected to work more than one hundred sixty (160) hours per year; except that any such individuals shall become Covered Individuals at the point when they work more than one hundred sixty (160) hours during the calendar year. CONTRACTOR shall ensure that all Covered Individuals relative to this Agreement are made aware of ADMINISTRATOR's Compliance Program and related policies and procedures.

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3. CONTRACTOR has the option to adhere to ADMINISTRATOR's Compliance Program or establish its own, provided CONTRACTOR's Compliance Program has been approved verified to include all required elements by ADMINISTRATOR's Compliance Officer as described in <u>sSubparagraphs A.4., A.5., A.6., and A.7. below.</u>

4. If CONTRACTOR elects to have its own Compliance Program then it shall submit a copy of its Compliance Program and relevant policies and procedures to ADMINISTRATOR within thirty (30) calendar days of award of this Agreement.

5. ADMINISTRATOR's Compliance Officer shall determine if CONTRACTOR's Compliance Program is accepted contains all required elements. CONTRACTOR shall take necessary action to meet said standards or shall be asked to acknowledge and agree to the ADMINISTRATOR's Compliance Program if the ADMINISTRATOR's Compliance Program does not contain all required elements.

6. Upon approval of CONTRACTOR's Compliance Program by written confirmation from ADMINISTRATOR's Compliance Officer that the CONTRACTOR's Compliance Program contains all required elements, CONTRACTOR shall ensure that its employees, subcontractors, interns, volunteers, and members of Board of Directors or duly authorized agents, if appropriate, ("all Covered Individuals"), relative to this Agreement are made aware of CONTRACTOR's Compliance Program and related policies and procedures.

7. Failure of CONTRACTOR to submit its Compliance Program and relevant policies and procedures shall constitute a material breach of this Agreement. Failure to cure such breach within sixty (60) calendar days of such notice from ADMINISTRATOR shall constitute grounds for termination of this Agreement as to the non-complying party.

B. SANCTION SCREENING - CONTRACTOR shall screen all Covered Individuals employed or retained to provide services related to this Agreement to ensure that they are not designated as "Ineligible Persons," as defined hereunder. Screening shall be conducted against the General Services Administration's List of Parties Excluded from Federal Programs and the Health and Human Services/Office of Inspector GeneralOIG List of Excluded Individuals/Entities, and Medi-CAL Suspended and Ineligible List.

1. Ineligible Person shall be any individual or entity who:

a. is currently excluded, suspended, debarred or otherwise ineligible to participate in the federal health care programs; or

b. has been convicted of a criminal offense related to the provision of health care items or services and has not been reinstated in the federal health care programs after a period of exclusion, suspension, debarment, or ineligibility.

CONTRACTOR shall screen prospective Covered Individuals prior to hire or engagement.
 CONTRACTOR shall not hire or engage any Ineligible Person to provide services relative to this
 Agreement.

3. CONTRACTOR shall screen all current Covered Individuals and subcontractors semi-annually (January and July) to ensure that they have not become Ineligible Persons. CONTRACTOR shall also request that its subcontractors use their best efforts to verify that they are eligible to participate in all federal and State of California health programs and have not been excluded or debarred from participation in any federal or state health care programs, and to further represent to CONTRACTOR that they do not have any Ineligible Person in their employ or under contract.

4. Covered Individuals shall be required to disclose to CONTRACTOR immediately any debarment, exclusion or other event that makes the Covered Individual an Ineligible Person. CONTRACTOR shall notify ADMINISTRATOR immediately upon such disclosure.

5. CONTRACTOR acknowledges that Ineligible Persons are precluded from providing federal and state funded health care services by contract with COUNTY in the event that they are currently sanctioned or excluded by a federal or state law enforcement regulatory or licensing agency. If CONTRACTOR becomes aware that a Covered Individual has become an Ineligible Person, CONTRACTOR shall remove such individual from responsibility for, or involvement with, COUNTY business operations related to this Agreement.

6. CONTRACTOR shall notify ADMINISTRATOR immediately if a Covered Individual or entity is currently excluded, suspended or debarred, or is identified as such after being sanction screened. Such individual or entity shall be immediately removed from participating in any activity associated with this <u>AGREEMENT.Agreement</u>. ADMINISTRATOR will determine <u>if anyappropriate</u> repayment <u>is necessary from or sanction</u> CONTRACTOR for services provided by ineligible person or individual.

7. CONTRACTOR shall promptly return any overpayments within in forty-five (45) days after the overpayment is verified by the ADMINISTRATOR.

C. COMPLIANCE TRAINING – ADMINISTRATOR shall make General Compliance Training and Provider Compliance Training, where appropriate, available to Covered Individuals.

<u>1</u> <u>1</u>. CONTRACTOR shall use its best efforts to encourage completion by Covered Individuals; provided, however, that at a minimum CONTRACTOR shall assign at least one (1) designated representative to complete all Compliance Trainings when offered.

<u>2</u>. Such training will be made available to Covered Individuals within thirty (30) calendar days of employment or engagement.

. Such training will be made available to each Covered Individual annually.

<u>34</u>. Each Covered Individual attending training shall certify, in writing, attendance at compliance training. CONTRACTOR shall retain the certifications. Upon written request by ADMINISTRATOR, CONTRACTOR shall provide copies of the certifications.

D. CODE OF CONDUCT – ADMINISTRATOR has developed a Code of Conduct for adherence by ADMINISTRATOR's employees and contract providers.

6 1. ADMINISTRATOR shall ensure that CONTRACTOR is made aware of 7 ADMINISTRATOR's Code of Conduct. 2. CONTRACTOR shall ensure that its employees, subcontractors, interns, volunteers, and members of Board of Directors or duly authorized agents, if appropriate, ("Covered Individuals")all Covered Individuals, relative to this Agreement are made aware of ADMINISTRATOR's Code of Conduct.

3. CONTRACTOR has the option to adhere to ADMINISTRATOR's Code of Conduct or establish its own provided CONTRACTOR's Code of Conduct has been approved by ADMINISTRATOR's Compliance Officer as described in subparagraphs D.4., D.5., D.6., D.7., and D.8. below.

4. If CONTRACTOR elects to have its own Code of Conduct, then it shall submit a copy of its Code of Conduct to ADMINISTRATOR within thirty (30) calendar days of award of this Agreement.

5. ADMINISTRATOR'S Compliance Officer shall determine if CONTRACTOR'S Code of Conduct is accepted. CONTRACTOR shall take necessary action to meet said standards or shall be asked to acknowledge and agree to the ADMINISTRATOR'S Code of Conduct.

6. Upon approval of CONTRACTOR's Code of Conduct by —ADMINISTRATOR, CONTRACTOR shall ensure that its employees, subcontractors, interns, volunteers, and members of Board of Directors or duly authorized agents, if appropriate, ("all_Covered Individuals") relative to this Agreement are made aware of CONTRACTOR's Code of Conduct.

7. If CONTRACTOR elects to adhere to ADMINISTRATOR's Code of Conduct then CONTRACTOR shall submit to ADMINISTRATOR a signed acknowledgement and agreement that CONTRACTOR shall comply with ADMINISTRATOR's Code of Conduct.

8. Failure of CONTRACTOR to timely submit the acknowledgement of ADMINISTRATOR's Code of Conduct shall constitute a material breach of this Agreement, and failure to cure such breach within sixty (60) calendar days of such notice from ADMINISTRATOR shall constitute grounds for termination of this Agreement as to the non-complying party.

DE. MEDICAL BILLING, CODING, AND DOCUMENTATION COMPLIANCE STANDARDS

1. CONTRACTOR shall take reasonable precaution to ensure that the coding of health care claims, billings and/or invoices for same are prepared and submitted in an accurate and timely manner and are consistent with federal, state and county laws and regulations. _This includes compliance with federal and state health care program regulations and procedures or instructions otherwise communicated by regulatory agencies including the Centers for Medicare and Medicaid Services or their agents.

2. CONTRACTOR shall not submit any false, fraudulent, inaccurate and/or fictitious claims for payment or reimbursement of any kind.

3. CONTRACTOR shall bill only for those eligible services actually rendered which are also fully documented. When such services are coded, CONTRACTOR shall use accurate billing codes which accurately describes the services provided and must ensure compliance with all billing and documentation requirements.

10 of 30 29 X:\asr\behavioral health\asr-12-000146-well-peer support-ccs 12-14-eg.docx HCA ASR 12-000146 4. CONTRACTOR shall act promptly to investigate and correct any problems or errors in coding of claims and billing, if and when, any such problems or errors are identified.

V. CONFIDENTIALITY

A. CONTRACTOR shall maintain the confidentiality of all records, including billings and any audio and/or video recordings, in accordance with all applicable federal, state and county codes and regulations, as they now exist or may hereafter be amended or changed.

1. CONTRACTOR acknowledges and agrees that all persons served pursuant to this Agreement are clients of the Orange County Mental Health services system, and therefore it may be necessary for authorized staff of ADMINISTRATOR to audit client files, or to exchange information regarding specific clients with COUNTY or other providers of related services contracting with COUNTY.

2. CONTRACTOR acknowledges and agrees that it shall be responsible for obtaining written consents for the release of information from all persons served by CONTRACTOR pursuant to this Agreement. Such consents shall be obtained by CONTRACTOR in accordance with California Civil CodeCCC, Division 1, Part 2.6 relating to confidentiality of medical information.

3. In the event of a collaborative service agreement between Mental Health services providers, CONTRACTOR acknowledges and agrees that it is responsible for obtaining releases of information, from the collaborative agency, for clients receiving services through the collaborative agreement.

B. Prior to providing any services pursuant to this Agreement, all CONTRACTOR members of the Board of Directors or its designee or authorized agent, employees, consultants, subcontractors, volunteers and interns shall agree, in writing, with CONTRACTOR to maintain the confidentiality of any and all information and records which may be obtained in the course of providing such services. The agreement shall specify that it is effective irrespective of all subsequent resignations or terminations of CONTRACTOR members of the Board of Directors or its designee or authorized agent, employees, consultants, subcontractors, volunteers and interns.

VI. COST REPORT

A. CONTRACTOR shall submit a Cost Report to COUNTY no later than sixty (60) calendar days following termination of this Agreement. CONTRACTOR shall prepare the Cost Report in accordance with all applicable federal, state and county requirements and generally accepted accounting principles and the Special Provisions Paragraph of this Agreement. CONTRACTOR shall allocate direct and indirect costs to and between programs, cost centers, services, and funding sources in accordance with such requirements and consistent with prudent business practice, which costs and allocations shall be supported by source documentation maintained by CONTRACTOR, and available at any time to ADMINISTRATOR upon reasonable notice. In the event CONTRACTOR has multiple Agreements for mental health services that are administered by HCA, consolidation of the individual Cost Reports into a

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single consolidated Cost Report may be required, as stipulated by ADMINISTRATOR. CONTRACTOR shall submit a consolidated Cost Report to COUNTY no later than five (5) business days following approval by ADMINSTRATOR of all individual Cost Reports to be incorporated into a consolidated Cost Report.

1. If CONTRACTOR fails to submit an accurate and complete <u>individual and/or consolidated</u> Cost Report within the time period specified above, ADMINISTRATOR shall have sole discretion to impose one or both of the following:

a. CONTRACTOR may be assessed a late penalty of <u>one five</u> hundred dollars (\$1500) for each business day after the above specified due date that the accurate and complete <u>individual and/or</u> <u>consolidated</u> Cost Report is not submitted. Imposition of the late penalty shall be at the sole discretion of the ADMINISTRATOR. The late penalty shall be assessed separately on each outstanding Cost Report due COUNTY by CONTRACTOR.

b. ADMINISTRATOR may withhold or delay any or all payments due CONTRACTOR pursuant to any or all agreements between COUNTY and CONTRACTOR until such time that the <u>individual and/or consolidated</u> Cost Report is delivered to ADMINISTRATOR.

2. CONTRACTOR may request, in advance and in writing, an extension of the due date of the <u>individual and/or consolidated</u> Cost Report setting forth good cause for justification of the request. Approval of such requests shall be at the sole discretion of ADMINISTRATOR and shall not be unreasonably denied.

3. In the event that CONTRACTOR does not submit an accurate and complete <u>individual</u> <u>and/or consolidated</u> Cost Report within one hundred and eighty (180) calendar days following the termination of this Agreement, and CONTRACTOR has not entered into a subsequent or new agreement for any other services with COUNTY, then all amounts paid to CONTRACTOR by COUNTY during the term of the Agreement shall be immediately reimbursed to COUNTY.

B. The <u>individual and/or consolidated</u> Cost Report shall be the final financial and statistical report submitted by CONTRACTOR to COUNTY, and shall serve as the basis for final settlement to CONTRACTOR. CONTRACTOR shall document that costs are reasonable and allowable and directly or indirectly related to the services to be provided hereunder. The <u>The individual and consolidated</u> Cost Report shall be the final financial record for subsequent audits, if any.

C. Final settlement shall be based upon the actual and reimbursable costs for services hereunder, 30 less applicable revenues and late penalty, not to exceed COUNTY's Maximum Obligation as set forth in 31 the Referenced Contract Provisions of this Agreement. CONTRACTOR shall not claim expenditures to 32 COUNTY which are not reimbursable pursuant to applicable federal, state and county laws, regulations 33 34 and requirements. Any payment made by COUNTY to CONTRACTOR, which is subsequently determined to have been for an unreimbursable expenditure or service, shall be repaid by 35 CONTRACTOR to COUNTY in cash, or other authorized form of payment, within thirty (30) calendar 36 days of submission of the individual Cost Report or COUNTY may elect to reduce any amount owed 37

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|| CONTRACTOR by an amount not to exceed the reimbursement due COUNTY.

D. Unless approved by ADMINISTRATOR, costs that exceed the State Maximum Allowance per

Medi Cal Unit of Services, as determined by the State Department of Mental Health, shall be

unreimbursable to CONTRACTOR.

<u>D. If the individual</u>—E—In the event CONTRACTOR is authorized to retain unanticipated revenues as described in the Budget paragraph of Exhibit A to this Agreement, CONTRACTOR shall specify, in the Cost Report, the services rendered with such revenues.

F. If the Cost Report indicates the actual and reimbursable costs of services provided pursuant to this Agreement, less applicable revenues and late penalty, are lower than the aggregate of interim monthly payments to CONTRACTOR, CONTRACTOR shall remit the difference to COUNTY. Such reimbursement shall be made, in cash, or other authorized form of payment, with the submission of the individual or consolidated Cost Report. If such reimbursement is not made by CONTRACTOR within thirty (30) calendar days after submission of the Cost Report, COUNTY may, in addition to any other remedies, reduce any amount owed CONTRACTOR by an amount not to exceed the reimbursement due COUNTY.

<u>GE</u>. If the <u>individual</u> Cost Report indicates the actual and reimbursable costs of services provided pursuant to this Agreement, less applicable revenues and late penalty, are higher than the aggregate of interim monthly payments to CONTRACTOR, COUNTY shall pay CONTRACTOR the difference, provided such payment does not exceed the Maximum Obligation of COUNTY.

<u>F. All</u><u>H.</u><u>The</u> Cost Report<u>s</u> shall contain the following attestation, which may be typed directly on or attached to the Cost Report:

"I HEREBY CERTIFY that I have executed the accompanying Cost Report and supporting documentation prepared by ______ for the cost report period beginning ______ and ending ______ and that, to the best of my knowledge and belief, costs reimbursed through this Agreement are reasonable and allowable and directly or indirectly related to the services provided and that this Cost Report is a true, correct, and complete statement from the books and records of (provider name) in accordance with applicable instructions, except as noted. I also hereby certify that I have the authority to execute the accompanying Cost Report.

Signed	
Name	
Title	
Date	

VII. DELEGATION AND ASSIGNMENT, AND SUBCONTRACTS

A. CONTRACTOR may not delegate the obligations hereunder, either in whole or in part, without prior written consent of COUNTY; provided, however, obligations undertaken by CONTRACTOR pursuant to this Agreement may be carried out by means of subcontracts, provided such subcontracts are approved in advance, in writing by ADMINISTRATOR, meet the requirements of this Agreement as they relate to the service or activity under subcontract, and include any provisions that ADMINISTRATOR may require. <u>ADMINISTRATOR may revoke the approval of a subcontract upon five (5) calendar days written notice to CONTRACTOR if subcontract fails to meet the requirements of this Agreement.</u> No subcontract shall terminate or alter the responsibilities of CONTRACTOR to COUNTY pursuant to this Agreement. CONTRACTOR may not assign the rights hereunder, either in whole or in part, without the prior written consent of COUNTY. ADMINISTRATOR may disallow, from payments otherwise due CONTRACTOR, amounts claimed for subcontracts not approved in accordance with this paragraph.

<u>B. CONTRACTOR may not assign the rights hereunder, either in whole or in part, without the</u> <u>prior written consent of COUNTY.</u> <u>B.</u>—For CONTRACTORS which are nonprofit corporations, any change from a nonprofit corporation to any other corporate structure of CONTRACTOR, including a change in more than fifty percent (50%) of the composition of the Board of Directors within a two (2) month period of time, shall be deemed an assignment for purposes of this paragraph. Any attempted assignment or delegation in derogation of this paragraph shall be void.

<u>C. CONTRACTOR may not assign the rights hereunder, either in whole or in part, without the</u> <u>prior written consent of COUNTY.</u> <u>C.</u> For CONTRACTORS which are for-profit organizations, any change in the business structure, including but not limited to, the sale or transfer of more than ten percent (10%) of the assets or stocks of CONTRACTOR, change to another corporate structure, including a change to a sole proprietorship, or a change in fifty percent (50%) or more of CONTRACTOR's directors at one time shall be deemed an assignment pursuant to this paragraph. Any attempted assignment or delegation in derogation of this paragraph shall be void.

VIII. EMPLOYEE ELIGIBILITY VERIFICATION

CONTRACTOR warrants that it shall fully comply with all federal and state statutes and regulations regarding the employment of aliens and others and to ensure that employees, subcontractors and consultants performing work under this Agreement meet the citizenship or alien status requirement set forth in federal statutes and regulations. CONTRACTOR shall obtain, from all employees, subcontractors and consultants performing work hereunder, all verification and other documentation of employment eligibility status required by federal or state statutes and regulations including, but not limited to, the Immigration Reform and Control Act of 1986, 8 U.S.C. USC §1324 et seq., as they

7 || currently exist and as they may be hereafter amended. CONTRACTOR shall retain all such

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IX. EQUIPMENT

A. Unless otherwise specified in writing by ADMINISTRATOR, Equipment is defined as moveableall property of a relatively permanentRelatively Permanent nature with significant value-, purchased in whole or in part by Administrator to assist in performing the services described in this Agreement. "Relatively Permanent" is defined as having a useful life of one year or longer. Equipment which costs \$5,000 or over, including sales taxes, freight charges-, sales taxes, and other taxes, and installation costs are considered Fixeddefined as Capital Assets. Equipment which costs less thancosts between \$600 and \$5,000, including sales taxes, freight charges, sales taxes and other taxes, and installation costs are considered Minor Equipment or defined as Controlled Assets. Equipment. Controlled Equipment includes, but is not limited to audio/visual equipment, computer equipment, and lab equipment. The cost of Equipment purchased, in whole or in part, with funds paid pursuant to this Agreement shall be depreciated according to generally accepted accounting principles.

B. CONTRACTOR shall obtain ADMINISTRATOR's prior written approval to purchase any Equipment with funds paid pursuant to this Agreement. Upon delivery of Equipment, CONTRACTOR shall forward to ADMINISTRATOR, copies of the purchase order, receipt, and other supporting documentation, which includes delivery date, unit price, tax, shipping and serial numbers. CONTRACTOR shall request an applicable asset tag for said Equipment and shall include each purchased asset in an Equipment inventory.

C. Upon ADMINISTRATOR's prior written approval, CONTRACTOR may expense to COUNTY the cost of specified items of the approved Equipment purchased by CONTRACTOR. To "expense," in relation to Equipment, means to charge the full proportionate cost of Equipment in the fiscal year in which it is purchased. Title of expensed Equipment shall be vested with COUNTY and the Equipment shall be deemed to be "Loaned Equipment" while in the possession of CONTRACTOR.

D. CONTRACTOR shall maintain an inventory of all Equipment purchased in whole or in part with funds paid through this Agreement, including date of purchase, purchase price, serial number, model and type of Equipment. Such inventory shall be available for review by ADMINISTRATOR, and shall include the original purchase date and price, useful life, and balance of depreciated Equipment cost, if any.

E. CONTRACTOR shall cooperate with ADMINISTRATOR in conducting periodic physical inventories of Loaned all Equipment. Equipment shall be tagged with a COUNTY issued tag. Upon demand by ADMINISTRATOR, CONTRACTOR shall return any or all Loaned Equipment to COUNTY.

F. CONTRACTOR must report any loss or theft of Loaned Equipment in accordance with the

procedure approved by ADMINISTRATOR and the Notices paragraph of this Agreement. In addition, CONTRACTOR must complete and submit to ADMINISTRATOR a notification form when items of Loaned-Equipment are moved from one location to another or returned to COUNTY as surplus.

G. Unless this Agreement is followed without interruption by another agreement between the parties for substantially the same type and scope of services, at the termination of this Agreement for any cause, CONTRACTOR shall return to COUNTY all Loaned Equipment purchased with funds paid through this Agreement.

H. CONTRACTOR shall maintain and administer a sound business program for ensuring the proper use, maintenance, repair, protection, insurance, and preservation of COUNTY Loaned Equipment.

X. FACILITIES, PAYMENTS AND SERVICES . FACILITIES, PAYMENTS AND SERVICES

CONTRACTOR agrees to provide the services, staffing, facilities, and supplies in accordance with Exhibit A to this Agreement. COUNTY shall compensate, and authorize, when applicable, said services. CONTRACTOR shall operate continuously throughout the term of this Agreement with at least the minimum number and type of staff which meet applicable federal and state requirements, and which are necessary for the provision of the services hereunder.

XI. INDEMNIFICATION AND INSURANCE

A. CONTRACTOR agrees to indemnify, defend with counsel approved in writing by COUNTY, and hold COUNTY, its elected and appointed officials, officers, employees, agents and those special districts and agencies for which COUNTY's Board of Supervisors acts as the governing Board ("(COUNTY INDEMNITEES")) harmless from any claims, demands or liability of any kind or nature, including but not limited to personal injury or property damage, arising from or related to the services, products or other performance provided by CONTRACTOR pursuant to this Agreement. If judgment is entered against CONTRACTOR and COUNTY by a court of competent jurisdiction because of the concurrent active negligence of COUNTY or COUNTY INDEMNITEES, CONTRACTOR and COUNTY agree that liability will be apportioned as determined by the court. Neither party shall request a jury apportionment.

B. Without limiting CONTRACTOR's indemnification, it is agreed that CONTRACTOR shall maintain in force at all times during the term of this Agreement a policy, or policies, of insurance covering its operations as specified in the Referenced Contract Provisions of this Agreement.

C. All insurance policies except Workers' Compensation and Employer's Liability, and Professional Liability shall contain the following clauses:

1. "The County of Orange is included as an additional insured with respect to the operations of

|| the named insured performed under contract with the County of Orange."

2. "It is agreed that any insurance maintained by the County of Orange shall apply in excess of, and not contribute with, insurance provided by this policy."

3. "This insurance shall not be canceled, limited or non-renewed until after thirty (30) calendar days written notice has been given to Orange County HCA/Contract Development and Management, 405 West 5th Street, Suite 600, Santa Ana, CA 92701-4637."

D. Certificates of insurance and endorsements evidencing the above coverages and clauses shall be mailed to COUNTY as referenced in the Referenced Contract Provisions of this Agreement.

E. All insurance policies required by this contract shall waive all rights of subrogation against the County of Orange and members of the Board of Supervisors, its elected and appointed officials, officers, agents and employees when acting within the scope of their appointment or employment.

F. Unless waived by ADMINISTRATOR, the policy or policies of insurance must be issued by an insurer licensed to do business in the state of California (California Admitted Carrier).

XII. INSPECTIONS AND AUDITS

A. ADMINISTRATOR, any authorized representative of COUNTY, any authorized representative of the State of California, the Secretary of the United States Department of Health and Human Services, the Comptroller General of the United States, or any other of their authorized representatives, shall have access to any books, documents, and records, including but not limited to, <u>financial statements, general</u> <u>ledgers, relevant accounting systems</u>, medical and client records, of CONTRACTOR that are directly pertinent to this Agreement, for the purpose of responding to a beneficiary complaint or conducting an audit, review, evaluation, or examination, or making transcripts during the periods of retention set forth in the Records Management and Maintenance <u>pP</u>aragraph of this Agreement. Such persons may at all reasonable times inspect or otherwise evaluate the services provided pursuant to this Agreement, and the premises in which they are provided.

B. CONTRACTOR shall actively participate and cooperate with any person specified in <u>sSubparagraph A</u>. above in any evaluation or monitoring of the services provided pursuant to this Agreement, and shall provide the above–mentioned persons adequate office space to conduct such evaluation or monitoring.

C. AUDIT RESPONSE

1. Following an audit report, in the event of non-compliance with applicable laws and regulations governing funds provided through this Agreement, COUNTY may terminate this Agreement as provided for in the Termination pParagraph or direct CONTRACTOR to immediately implement appropriate corrective action. A plan of corrective action shall be submitted to ADMINISTRATOR in writing within thirty (30) calendar days after receiving notice from ADMINISTRATOR.

2. If the audit reveals that money is payable from one party to the other, that is, reimbursement

by CONTRACTOR to COUNTY, or payment of sums due from COUNTY to CONTRACTOR, said funds shall be due and payable from one party to the other within sixty (60) calendar days of receipt of the audit results. If reimbursement is due from CONTRACTOR to COUNTY, and such reimbursement is not received within said sixty (60) calendar days, COUNTY may, in addition to any other remedies provided by law, reduce any amount owed CONTRACTOR by an amount not to exceed the reimbursement due COUNTY.

D. CONTRACTOR shall employ a licensed certified public accountant, who will prepare and file with ADMINISTRATOR, an annual, independent, organization-wide audit of related expenditures during the term of this Agreement.

E. CONTRACTOR shall forward to ADMINISTRATOR a copy of any audit report within fourteen (14) calendar days of receipt. Such audit shall include, but not be limited to, management, financial, programmatic or any other type of audit of CONTRACTOR's operations, whether or not the cost of such operation or audit is reimbursed in whole or in part through this Agreement.

XIII. LICENSES AND LAWS

A. CONTRACTOR, its officers, agents, employees, and subcontractors shall, throughout the term of this Agreement, maintain all necessary licenses, permits, approvals, certificates, waivers and exemptions necessary for the provision of the services hereunder and required by the laws and regulations of the United States, State of California, COUNTY, and any other applicable governmental agencies. CONTRACTOR shall notify ADMINISTRATOR immediately and in writing of its inability to obtain or maintain, irrespective of the pendency of an appeal, permits, licenses, approvals, certificates, waivers and exemptions. Said inability shall be cause for termination of this Agreement.

B. The parties shall comply with all laws, rules or regulations applicable to the services provided hereunder, as any may now exist or be hereafter amended or changed, except those provisions or application of those provisions waived by the Secretary of the Department of Health and Human Services. These laws, regulations, and requirements shall include, but not be limited to:

1. State of California Welfare and Institutions Code (WIC), Divisions 5, 6 & and 9;

2. State of California Health and Safety Code, Sections HSC, §§1250 et seq.;.

3. State of California Penal Code (PC), Part 4, Title 1, Chapter 2, Article 2.5 relating to Child Abuse Reporting;

- 4. California Code of Regulations (CCR), Title 9, Title 17, and Title $22_{\frac{1}{2}}$
- 5. Code of Federal Regulations (CFR), Title 42 and Title 45;
- 6. United States Code (U.S.C.A.)<u>USC</u> Title 42;<u>.</u>
- 7. Federal Social Security Act, Title XVIII and Title XIX;

8. The<u>42 USC, Chapter 126, 12101, et seq., the</u> Americans with Disabilities Act of 1990-(42) U.S.C.A., Chapter 126, 12101, et seq.);<u>.</u>

9. The Clean Air Act (42 U.S.C.A. Section USC, §114 and Section §§1857, et seq.);., the

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1	Clean Air Act.
2	10. The <u>33 USC 84, §308 and §§1251 et seq., the</u> Federal Water Pollution Control Act-(33)
3	U.S.C.A. 84, Section 308 and Sections 1251 et seq.);
4	11. <u>31 USC 7501.70,</u> Federal single Audit Act of 1984-(31 U.S.C.A. 7501.70);.
5	12. Policies and procedures set forth in Mental Health Plan (MHP) Letters;
6	13. Policies and procedures set forth in Department of Mental Health (DMH)DHCS Letters;
7	14. Health Insurance Portability and Accountability Act (14HIPAA), privacy rule,
8	as it may exist now, or be hereafter amended, and if applicable.
9	15. Office of Management and Budget (OMB) Circulars A-87, A-89, A-110, A122, and A-133.
10	C. ENFORCEMENT OF CHILD SUPPORT OBLIGATIONS
11	1. CONTRACTOR agrees to furnish to ADMINISTRATOR within thirty (30) calendar days
12	of the award of this Agreement:
13	a. In the case of an individual contractor, his/her name, date of birth, social security
14	number, and residence address;
15	b. In the case of a contractor doing business in a form other than as an individual, the
16	name, date of birth, social security number, and residence address of each individual who owns an
17	interest of ten percent (10%) or more in the contracting entity;
18	c. A certification that CONTRACTOR has fully complied with all applicable federal and
19	state reporting requirements regarding its employees;
20	d. A certification that CONTRACTOR has fully complied with all lawfully served Wage
21	and Earnings Assignment Orders and Notices of Assignment, and will continue to so comply.
22	2. Failure of CONTRACTOR to timely submit the data and/or certifications required by
23	subparagraphs 1.a., 1.b., 1.c., or 1.d. above, or to comply with all federal and state employee reporting
24	requirements for child support enforcement, or to comply with all lawfully served Wage and Earnings
25	Assignment Orders and Notices of Assignment, shall constitute a material breach of this Agreement; and
26	failure to cure such breach within sixty (60) calendar days of notice from COUNTY shall constitute
27	grounds for termination of this Agreement.
28	3. It is expressly understood that this data will be transmitted to governmental agencies
29	charged with the establishment and enforcement of child support orders, or as permitted by federal
30	and/or state statute.
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32	XIV. LITERATURE AND ADVERTISEMENTS
33	A. Any written information or literature, including educational or promotional materials,
34	distributed by CONTRACTOR to any person or organization for purposes directly or indirectly related
35	to this Agreement must be approved in advance and in writing by ADMINISTRATOR before
36	distribution. For the purposes of this Agreement, distribution of written materials shall include, but not
37	be limited to, pamphlets, brochures, flyers, newspaper or magazine ads, and electronic media such as the

Internet. Such information shall not imply endorsement by COUNTY, unless ADMINISTRATOR consents thereto in writing.

B. Any advertisement through radio, television broadcast, or the Internet, for educational or promotional purposes, made by CONTRACTOR for purposes directly or indirectly related to this Agreement must be approved in advance and in writing by ADMINISTRATOR.

XV. MAXIMUM OBLIGATION

The <u>Total</u> Maximum Obligations of COUNTY for services provided in accordance with this Agreement is and the separate Maximum Obligations for Period One and Period Two are as specified in the Referenced Contract Provisions of this Agreement.

XVI. NONDISCRIMINATION

A. EMPLOYMENT

1. During the performance of this Agreement, CONTRACTOR shall not unlawfully discriminate against any employee or applicant for employment because of his/her ethnic group identification, race, religion, ancestry, color, creed, sex, marital status, national origin, age (40 and over), sexual orientation, medical condition, or physical or mental disability. CONTRACTOR shall warrant that the evaluation and treatment of employees and applicants for employment are free from discrimination in the areas of employment, promotion, demotion or transfer; recruitment or recruitment advertising; layoff or termination; rate of pay or other forms of compensation; and selection for training, including apprenticeship. There shall be posted in conspicuous places, available to employees and applicants for employment, notices from ADMINISTRATOR and/or the United States Equal Employment Opportunity Commission setting forth the provisions of the Equal Opportunity clause.

2. All solicitations or advertisements for employees placed by or on behalf of CONTRACTOR shall state that all qualified applicants will receive consideration for employment without regard to ethnic group identification, race, religion, ancestry, color, creed, sex, marital status, national origin, age (40 and over), sexual orientation, medical condition, or physical or mental disability. Such requirement shall be deemed fulfilled by use of the phrase "an equal opportunity employer."

3. Each labor union or representative of workers with which CONTRACTOR has a collective bargaining agreement or other contract or understanding must post a notice advising the labor union or workers' representative of the commitments under this Nondiscrimination \underline{PP} aragraph and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

B. SERVICES, BENEFITS, AND FACILITIES – CONTRACTOR shall not discriminate in the provision of services, the allocation of benefits, or in the accommodation in facilities on the basis of ethnic group identification, race, religion, ancestry, color, creed, sex, marital status, national origin, age (40 and over), sexual orientation, medical condition, or physical or mental disability in accordance with Title IX of the Education Amendments of 1972; Title VI of the Civil Rights Act of 1964

(42 <u>U.S.C.A.USC</u> §2000d); the Age Discrimination Act of 1975 (42 <u>U.S.C.A.USC</u> §6101); and Title 9, Division 4, Chapter 6, Article 1 (§10800, et seq.) of the California Code of Regulations, and all other pertinent rules and regulations promulgated pursuant thereto, and as otherwise provided by state law and regulations, as all may now exist or be hereafter amended or changed.

1. For the purpose of this <u>sSubparagraph B., "dD</u>iscrimination" includes, but is not limited to the following based on one or more of the factors identified above:

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a. Denying a client or potential client any service, benefit, or accommodation.

b. Providing any service or benefit to a client which is different or is provided in a different manner or at a different time from that provided to other clients.

c. Restricting a client in any way in the enjoyment of any advantage or privilege enjoyed by others receiving any service or benefit.

d. Treating a client differently from others in satisfying any admission requirement or condition, or eligibility requirement or condition, which individuals must meet in order to be provided any service or benefit.

e. Assignment of times or places for the provision of services.

2. Complaint Process - CONTRACTOR shall establish procedures for advising all clients through a written statement that CONTRACTOR's clients may file all complaints alleging discrimination in the delivery of services with CONTRACTOR, ADMINISTRATOR, or the COUNTY's Patient's Rights Office. CONTRACTOR's statement shall advise clients of the following:

a. Whenever possible, problems shall be resolved informally and at the point of service. CONTRACTOR shall establish an internal informal problem resolution process for clients not able to resolve such problems at the point of service. Clients may initiate a grievance or complaint directly with CONTRACTOR either orally or in writing.

1) COUNTY shall establish a formal resolution and grievance process in the event informal processes do not yield a resolution.

2) Throughout the problem resolution and grievance process, client rights shall be maintained, including access to the Patients' Rights Office at any point in the process. Clients shall be informed of their right to access the Patients' Rights Office at any time.

b. In those cases where the client's complaint is filed initially with the Patients' Rights Office, the Patients' Rights Office may proceed to investigate the client's complaint.

c. Within the time limits procedurally imposed, the complainant shall be notified in writing as to the findings regarding the alleged complaint and, if not satisfied with the decision, may file an appeal with the Patients' Rights Office.

C. PERSONS WITH DISABILITIES - CONTRACTOR agrees to comply with the provisions of Section §504 of the Rehabilitation Act of 1973 (29 U.S.C.A.USC 794 et seq., as implemented in 45 CFR 84.1 et seq.), and the Americans with Disabilities Act of 1990 (42 U.S.C.A.USC 12101, et seq.), pertaining to the prohibition of discrimination against qualified persons with disabilities in all programs

|| or activities, as they exist now or may be hereafter amended together with succeeding legislation.

D. RETALIATION — Neither CONTRACTOR, nor its employees or agents shall intimidate, coerce or take adverse action against any person for the purpose of interfering with rights secured by federal or state laws, or because such person has filed a complaint, certified, assisted or otherwise participated in an investigation, proceeding, hearing or any other activity undertaken to enforce rights secured by federal or state law.

E. In the event of non-compliance with this paragraph or as otherwise provided by federal and state law, this Agreement may be canceled, terminated or suspended in whole or in part and CONTRACTOR may be declared ineligible for further contracts involving federal, state or county funds.

XVII. NOTICES

A. Unless otherwise specified, all notices, claims, correspondence, reports and/or statements authorized or required by this Agreement shall be effective:

1. When written and deposited in the United States mail, first class postage prepaid and addressed as specified in the Referenced Contract Provisions of this Agreement or as otherwise directed by ADMINISTRATOR;

2. When faxed, transmission confirmed;

3. When sent by Email; or

4. When accepted by U.S. Postal Service Express Mail, Federal Express, United Parcel Service, or other expedited delivery service.

B. Termination Notices shall be addressed as specified in the Referenced Contract Provisions of this Agreement or as otherwise directed by ADMINISTRATOR and shall be effective when faxed, transmission confirmed, or when accepted by U.S. Postal Service Express Mail, Federal Express, United Parcel Service, or other expedited delivery service.

C. CONTRACTOR shall notify ADMINISTRATOR, in writing, within twenty-four (24) hours of becoming aware of any occurrence of a serious nature, which may expose COUNTY to liability. Such occurrences shall include, but not be limited to, accidents, injuries, or acts of negligence, or loss or damage to any COUNTY property in possession of CONTRACTOR.

D. For purposes of this Agreement, any notice to be provided by COUNTY may be given by ADMINISTRATOR.

E. In the event of a death, notification shall be made in accordance with the Notification of Death paragraph of this Agreement.

XVIII. NOTIFICATION OF DEATH NOTIFICATION OF DEATH

A. NON-TERMINAL ILLNESS DEATH

1. CONTRACTOR shall notify ADMINISTRATOR by telephone immediately upon becoming aware of the death due to non-terminal illness of any person served hereunder; provided,

however, weekends and holidays shall not be included for purposes of computing the time within which to give telephone notice and, notwithstanding the time limit herein specified, notice need only be given during normal business hours.

2. In addition, CONTRACTOR shall, within sixteen (16) hours after such death, hand deliver or fax, a written Notification of Non-Terminal Illness Death to ADMINISTRATOR.

3. The telephone report and written Notification of Non-Terminal Illness Death shall contain the name of the deceased, the date and time of death, the nature and circumstances of the death, and the name(s) of CONTRACTOR's officers or employees with knowledge of the incident.

B. TERMINAL ILLNESS DEATH

1. CONTRACTOR shall notify ADMINISTRATOR by written report faxed, hand delivered, or postmarked within forty-eight (48) hours of becoming aware of the death due to terminal illness of any person served hereunder. The Notification of Terminal Illness Death shall contain the name of the deceased, the date and time of death, the nature and circumstances of the death, and the name(s) of CONTRACTOR's officers or employees with knowledge of the incident.

2. If there are any questions regarding the cause of death of any person served hereunder who was diagnosed with a terminal illness, or if there are any unusual circumstances related to the death, CONTRACTOR shall immediately notify ADMINISTRATOR in accordance with <u>sS</u>ubparagraph A. above.

XIX. <u>NOOTIFICATION OF PUBLIC EVENTS AND <u>MMEETINGS</u></u>

A. CONTRACTOR shall notify ADMINISTRATOR of any public event or meeting funded in whole or part by the COUNTY, except for those events or meetings that are intended solely to serve clients or occur in the normal course of business.

B. CONTRACTOR shall notify ADMINISTRATOR at least thirty (30) business days in advance of any applicable public event or meeting. The notification must include the date, time, duration, location and purpose of public event or meeting. Any promotional materials or event related flyers must be approved by ADMINISTRATOR prior to distribution.

XX. RECORDS MANAGEMENT AND MAINTENANCE

A. CONTRACTOR, its officers, agents, employees and subcontractors shall, throughout the term of this Agreement, prepare, maintain and manage records appropriate to the services provided and in accordance with this Agreement and all applicable requirements, which include, but are not limited to:

1. California Code of Regulation Title 22, §§70751(c), 71551(c), 73543(a), 74731(a), 75055(a), 75343(a), and 77143(a).

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 2. State of California, Department of Alcohol and Drug Programs Reporting System (ASRS) manual.

3. State of California, Department of Alcohol and Drug Programs Fiscal System (DPFS) 1 manual. 2 4. State of California, Health and Safety Code §123145. 3 <u>5.</u> Title 45 Code of Federal Regulations (CFR), §164.501; §164.524; §164.526; §164.530(c) 4 and (j). 5 B. CONTRACTOR shall implement and maintain administrative, technical and physical 6 safeguards to ensure the privacy of protected health information (PHI) and prevent the intentional or 7 unintentional use or disclosure of PHI in violation of the Health Insurance Portability and Accountability 8 Act of 1996 (HIPAA), federal and state regulations and/or COUNTY HIPAA Policies and Procedures 9 (P&P) (COUNTY HIPAA P&P 1-2). CHPP. CONTRACTOR shall mitigate to the extent practicable, 10 the known harmful effect of any use or disclosure of protected health information PHI made in violation 11 of federal or state regulations and/or COUNTY policies. 12 C. CONTRACTOR's participant, client, and/or patient records shall be maintained in a secure 13 manner. CONTRACTOR shall maintain participant, client, and/or patient records and must establish 14 and implement written record management procedures. 15 D. CONTRACTOR shall ensure appropriate financial records related to cost reporting, 16 expenditure, revenue, billings, etc., are prepared and maintained accurately and appropriately. 17 E. CONTRACTOR shall ensure all appropriate state and federal standards of documentation, 18 preparation, and confidentiality of records related to participant, client and/or patient records are met at 19 all times. 20 F. CONTRACTOR shall ensure all HIPAA Designated Record Set (DRS) requirements are met. 21 HIPAA requires that clients, participants and/or patients be provided the right to access or receive a copy 22 of their DRS and/or request addendum to their records. Title 45 CFR §164.501, defines DRS as a group 23 of records maintained by or for a covered entity that is: 24 1. The medical records and billing records about individuals maintained by or for a covered 25 health care provider; 26 2. The enrollment, payment, claims adjudication, and case or medical management record 27 systems maintained by or for a health plan; or 28 3. Used, in whole or in part, by or for the covered entity to make decisions about individuals. 29 G. CONTRACTOR may retain participant, client, and/or patient documentation electronically in 30 accordance with the terms of this Agreement and common business practices. If documentation is 31 retained electronically, CONTRACTOR shall, in the event of an audit or site visit: 32 33 1. Have documents readily available within twenty-four (24 forty-eight (48) hour notice of a 34 scheduled audit or site visit. 35 2. Provide auditor or other authorized individuals access to documents via a computer 36 || terminal. 37

3. Provide auditor or other authorized individuals a hardcopy printout of documents, if requested.

H. CONTRACTOR shall ensure compliance with requirements pertaining to the privacy and security of Personally Identifiable Information (PII) and/or Protected Health Information (PHI)... CONTRACTOR shall, immediately upon discovery of a breach of privacy and/or security of PII and/or PHI by CONTRACTOR, notify ADMINISTRATOR of such breach by telephone and email or facsimile.

I. CONTRACTOR may be required to pay any costs associated with a breach of privacy and/or security of PII and/or PHI, including but not limited to the costs of notification. CONTRACTOR shall pay any and all such costs arising out of a breach of privacy and/or security of PII and/or PHI.

J. CONTRACTOR shall retain all participant, client, and/or patient medical records for seven (7) years following discharge of the participant, client and/or patient, with the exception of non-emancipated minors for whom records must be kept for at least one (1) year after such minors have reached the age of eighteen (18) years, or for seven (7) years after the last date of service, whichever is longer.

K. CONTRACTOR shall retain all financial records for a minimum of seven (7) years from the commencement of the contract, unless a longer period is required due to legal proceedings such as litigations and/or settlement of claims.

L. CONTRACTOR shall make records pertaining to the costs of services, participant fees, charges, billings, and revenues available at one (1) location within the limits of the County of Orange.

M. If CONTRACTOR is unable to meet the record location criteria above, ADMINISTRATOR may provide written approval to CONTRACTOR to maintain records in a single location, identified by CONTRACTOR.

N. CONTRACTOR may be required to retain all records involving litigation proceedings and settlement of claims for a longer term which will be directed by the ADMINISTRATOR.

O. CONTRACTOR shall notify ADMINISTRATOR of any Public Record Act (PRA) request requests related to, or arising out of this Agreement within twenty four (24forty-eight (48) hours. CONTRACTOR shall provide ADMINISTRATOR all information that is requested by the PRA request.

XXI, <u>revenue<mark>severability</mark></u>

A. CLIENT FEES – CONTRACTOR shall charge, unless waived by ADMINISTRATOR, a fee to clients to whom services, other than Medi-Cal Services, are provided pursuant to this Agreement, their estates and responsible relatives, according to their ability to pay as determined by the State Department of Mental Health's UMDAP procedure or by other payment procedure as approved in advance, and in writing by ADMINISTRATOR; and in accordance with Title 9 of the California Code of Regulations. Such fee shall not exceed the actual cost of services provided. No client shall be denied services because of an inability to pay.
 B. THIRD-PARTY REVENUE – CONTRACTOR shall make every reasonable effort to obtain all

available third-party reimbursement for which persons served hereunder may be eligible. Charges to
 insurance carriers shall be on the basis of CONTRACTOR's usual and customary charges.
 C. PROCEDURES – CONTRACTOR shall maintain internal financial controls which adequately

ensure proper billing and collection procedures. CONTRACTOR's procedures shall specifically provide for the identification of delinquent accounts and methods for pursuing such accounts. CONTRACTOR shall provide ADMINISTRATOR, monthly, a written report specifying the current status of fees which are billed, collected, transferred to a collection agency or deemed by CONTRACTOR to be uncollectible.

XXII<u>. SEVERABILITY</u>

If a court of competent jurisdiction declares any provision of this Agreement or application thereof to any person or circumstances to be invalid or if any provision of this Agreement contravenes any federal, state or county statute, ordinance, or regulation, the remaining provisions of this Agreement or the application thereof shall remain valid, and the remaining provisions of this Agreement shall remain in full force and effect, and to that extent the provisions of this Agreement are severable.

XXIII. SPECIAL PROVISIONS

A. CONTRACTOR shall not use the funds provided by means of this Agreement for the following purposes:

1. Making cash payments to intended recipients of services through this Agreement.

2. Lobbying any governmental agency or official or making political contributions. CONTRACTOR shall file all certifications and reports in compliance with this requirement pursuant to Title 31, U.S.C.A, Section USC, §1352 (e.g., limitation on use of appropriated funds to influence certain federal contracting and financial transactions).

- 3. Supplanting current funding for existing services.
- 4. Fundraising.

5. Purchase of gifts, meals, entertainment, awards, or other personal expenses for CONTRACTOR's staff, volunteers, or members of the Board of Directors.

6. Reimbursement of CONTRACTOR's members of the Board of Directors for expenses or services.

7. Making personal loans to CONTRACTOR's staff, volunteers, interns, consultants, subcontractors, and members of the Board of Directors or its designee or authorized agent, or making salary advances or giving bonuses to CONTRACTOR's staff.

8. Paying an individual salary or compensation for services at a rate in excess of the current Level I of the Executive Salary Schedule as published by the Federal Office of Personnel Management (OPM).
 (OPM).
 9. Severance pay for separating employees.

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10. Paying rent and/or lease costs for a facility prior to the facility meeting all required building codes and obtaining all necessary building permits for any associated construction.

B. Unless otherwise specified in advance and in writing by ADMINISTRATOR, CONTRACTOR shall not use the funds provided by means of this Agreement for the following purposes:

1. Purchasing or improving land, including constructing or permanently improving any building or facility, except for tenant improvements.

2. Providing inpatient hospital services or purchasing major medical equipment.

3. Satisfying any expenditure of non-federal funds as a condition for the receipt of federal funds (matching).

4. Funding travel or training (excluding mileage or parking).

5. Making phone calls outside of the local area unless documented to be directly for the purpose of client care.

6. Payment for grant writing, consultants, certified public accounting, or legal services.

7. Purchase of artwork or other items that are for decorative purposes and do not directly contribute to the quality of services to be provided pursuant to this Agreement.

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XXIV. STATUS OF CONTRACTOR

CONTRACTOR is, and shall at all times be deemed to be, an independent contractor and shall be wholly responsible for the manner in which it performs the services required of it by the terms of this Agreement. CONTRACTOR is entirely responsible for compensating staff, subcontractors, and consultants employed by CONTRACTOR. This Agreement shall not be construed as creating the relationship of employer and employee, or principal and agent, between COUNTY and CONTRACTOR or any of CONTRACTOR's employees, agents, consultants, or subcontractors. CONTRACTOR assumes exclusively the responsibility for the acts of its employees, agents, consultants, or subcontractors as they relate to the services to be provided during the course and scope of their employment. CONTRACTOR, its agents, employees, consultants, or subcontractors, shall not be entitled to any rights or privileges of COUNTY employees and shall not be considered in any manner to be COUNTY employees.

XXV. TERM

The term of this Agreement shall commence and terminate as specified in the Referenced Contract Provisions of this Agreement, unless otherwise sooner terminated as provided in this Agreement; provided, however, CONTRACTOR shall be obligated to perform such duties as would normally extend beyond this term, including but not limited to, obligations with respect to confidentiality, indemnification, audits, reporting and accounting.

XXVI. TERMINATION

A. Either party may terminate this Agreement, without cause, upon thirty (30) calendar days 1 written notice given the other party. 2 B. Unless otherwise specified in this Agreement, COUNTY may terminate this Agreement upon 3 five (5) calendar days written notice if CONTRACTOR fails to perform any of the terms of this 4 Agreement. At ADMINISTRATOR's sole discretion, CONTRACTOR may be allowed up to thirty (30) 5 calendar days for corrective action. 6 C. COUNTY may terminate this Agreement immediately, upon written notice, on the occurrence 7 of any of the following events: 8 1. The loss by CONTRACTOR of legal capacity. 9 2. Cessation of services. 10 3. The delegation or assignment of CONTRACTOR's services, operation or administration to 11 another entity without the prior written consent of COUNTY. 12 4. The neglect by any physician or licensed person employed by CONTRACTOR of any duty 13 required pursuant to this Agreement. 14 5. The loss of accreditation or any license required by the Licenses and Laws $\frac{P}{P}$ aragraph of 15 this Agreement. 16 6. The continued incapacity of any physician or licensed person to perform duties required 17 18 pursuant to this Agreement. 7. Unethical conduct or malpractice by any physician or licensed person providing services 19 pursuant to this Agreement; provided, however, COUNTY may waive this option if CONTRACTOR 20 removes such physician or licensed person from serving persons treated or assisted pursuant to this 21 22 Agreement. D. CONTINGENT FUNDING 23 1. Any obligation of COUNTY under this Agreement is contingent upon the following: 24 a. The continued availability of federal, state and county funds for reimbursement of 25 COUNTY's expenditures, and 26 b. Inclusion of sufficient funding for the services hereunder in the applicable budget 27 approved by the Board of Supervisors. 28 2. In the event such funding is subsequently reduced or terminated, COUNTY may suspend, 29 terminate or renegotiate this Agreement upon thirty (30) calendar days written notice given 30 CONTRACTOR. 31 E. In the event this Agreement is suspended or terminated prior to the completion of the term as 32 specified in the Referenced Contract Provisions of this Agreement, ADMINISTRATOR may, at its sole 33 discretion, reduce the Maximum Obligation of this Agreement in an amount consistent with the reduced 34 term of the Agreement. 35 F. In the event this Agreement is terminated by either party, after receiving a Notice of 36 Termination CONTRACTOR shall do the following: 37

1. Comply with termination instructions provided by ADMINISTRATOR in a manner which is consistent with recognized standards of quality care and prudent business practice.

2. Obtain immediate clarification from ADMINISTRATOR of any unsettled issues of contract performance during the remaining contract term.

3. If clients are to be transferred to another facility for services, furnish ADMINISTRATOR, upon request, all client information and records deemed necessary by ADMINISTRATOR to effect an orderly transfer.

4. Assist ADMINISTRATOR in effecting the transfer of clients in a manner consistent with client's best interests.

5. If records are to be transferred to COUNTY, pack and label such records in accordance with directions provided by ADMINISTRATOR.

6. Return to COUNTY, in the manner indicated by ADMINISTRATOR, any equipment and supplies purchased with funds provided by COUNTY.

7. To the extent services are terminated, cancel outstanding commitments covering the procurement of materials, supplies, equipment, and miscellaneous items, as well as outstanding commitments which relate to personal services. With respect to these canceled commitments, CONTRACTOR shall submit a written plan for settlement of all outstanding liabilities and all claims arising out of such cancellation of commitment which shall be subject to written approval of ADMINISTRATOR.

G. The rights and remedies of COUNTY provided in this Termination \underline{PP} aragraph shall not be exclusive, and are in addition to any other rights and remedies provided by law or under this Agreement.

XXVII. THIRD PARTY BENEFICIARY

Neither party hereto intends that this Agreement shall create rights hereunder in third parties including, but not limited to, any subcontractors or any clients provided services hereunder.

XXVIII. WAIVER OF DEFAULT OR BREACH

Waiver by COUNTY of any default by CONTRACTOR shall not be considered a waiver of any subsequent default. Waiver by COUNTY of any breach by CONTRACTOR of any provision of this Agreement shall not be considered a waiver of any subsequent breach. Waiver by COUNTY of any default or any breach by CONTRACTOR shall not be considered a modification of the terms of this Agreement.

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COLLECE COMMUNITY GEDVICES	
COLLEGE COMMUNITY SERVICES	
DV.	
BY:	DATED:
ПТLE:	
COUNTY OF ORANGE	
BY:	DATED:
HEALTH CARE AGENCY	
CHAIR OF THE BOARD OF SUPERVISO	RS
SIGNED AND CERTIFIED THAT A COPY OF THIS DOCUMENT HAS BEEN DELIVERI	
FO THE CHAIR OF THE BOARD PER G.C. SI	
ATTEST:	
	DATED:
DARLENE J. BLOOM	
Clerk of the Board of Supervisors	
Orange County, California	
APPROVED AS TO FORM	
OFFICE OF THE COUNTY COUNSEL	
ORANGE COUNTY, CALIFORNIA	
BY:	DATED:
DEPUTY	

1	EXHIBIT A
2	TO AGREEMENT WITH
3	COLLEGE COMMUNITY SERVICES
4	JULY 1, 201 <mark>2</mark> 1 THROUGH JUNE 30, 201 <u>4</u> 2
5	
6	I. <u>DEFINITIONS</u>
7	—— The following standard definitions are for reference purposes only and may or may not apply in
8	their entirety throughout the Agreement. The parties agree to the following terms and definitions, and to
9	those terms and definitions which, for convenience, are set forth elsewhere in theis Agreement.
10	A. <u>Active and Ongoing Case Load</u> means documentation, by CONTRACTOR, of completion of
11	the entry and evaluation documents into the COUNTY's Integrated Records Information System
12	(IRIS)IRIS, and documentation that the clients are receiving services at a level and frequency and
13	duration that is consistent with each client's level of impairment and treatment goals and consistent with
14	individualized, solution-focused, evidenced-based practices.
15	B. ADL means diet, personal hygiene, clothing care, grooming, money and household
16	management, personal safety, symptom monitoring, etc.
17	<u>C.</u> <u>Admission</u> means documentation, by CONTRACTOR, of completion of the entry and
18	evaluation documents into the COUNTY's IRIS.
19	<u>CD</u> . <u>Advisory Board</u> means a client-driven board which shall direct the activities, provide
20	recommendations for ongoing program development, and create the <u>Wellness</u> Center's rules of conduct.
21	<u>DE</u> . Benefits Specialist means a specialized position that would primarily be responsible for
22	coordinating client applications and appeals for State and Federal benefits.
23	EF . <u>Best Practices</u> means a term that is often used inter-changeably with "evidence-based practice"
24	and is best defined as an "umbrella" term for three levels of practice, measured in relation to
25	recovery-consistent mental health practices where the recovery process is supported with scientific
26	intervention that best meets the needs of the consumer at this time.
27	1. Evidence-Based Practices (EBP) means the interventions utilized for which there is
28	consistent scientific evidence showing they improved client outcomes and meets the following criteria:
29	it has been replicated in more than one geographic or practice setting with consistent results; it is
30	recognized in scientific journals by one or more published articles; it has been documented and put into
31	manual forms; it produces specific outcomes when adhering to the Fidelity of the model.
32	2. <u>Promising Practices</u> means that experts believe the practices is likely to be raised to the next
33	level when scientific studies can be conducted and is supported by some body of evidence, (evaluation
34	studies or expert consensus in reviewing outcome data); it has been endorsed by recognized bodies of
35	advocacy organizations and finally, produces specific outcomes.
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3. <u>Emerging Practices</u> means that the practice(s) seems like a logical approach to addressing a specific behavior which is becoming distinct, recognizable among consumers and clinicians in practice, or innovators in academia or policy makers; and at least one recognized expert, group of researchers or other credible individuals have endorsed the practice as worthy of attention based on outcomes; and finally, it produces specific outcomes.

F. <u>CAMINAR</u>G. Data Collection System means software designed for collection, tracking and reporting outcomes datea for clients enrolled in the Full Service Partnerships FSP Programs.

1. <u>3 M's</u> means the Quarterly Assessment Form that is completed for each client every three months in the CAMINAR approved data collection system.

2. <u>CAMINAR Data Analyst/Outcomes Specialist</u> means a specialized position with the responsibility of ensuring the reliability of data entered into the CAMINAR system. This individual will be able to analyze the data for the purpose of reporting and measuring outcomes and improvements within the program.

2. Data Mining and Analysis Specialist means a person who is responsible for ensuring the program maintains a focus on outcomes, by reviewing outcomes, and analyzing data as well as working on strategies for gathering new data from the consumers' perspective which will improve understanding of clients' needs and desires towards furthering their recovery. This individual will provide feedback to the program and work collaboratively with the employment specialist, education specialist, benefits specialist, and other staff in the program in strategizing improved outcomes in these areas. This position will be responsible for attending all data and outcome related meetings and ensuring that program is being proactive in all data collection requirements and changes at the local and state level.

3. <u>Data Certification</u> means the process of reviewing State and <u>CountyCOUNTY</u> mandated outcome data for accuracy and signing the Certification of Accuracy of Data form indicating that the data is accurate.

4. <u>Key Events Tracking (KET)</u> means the tracking of a client's movement or changes in the CAMINAR approved data collection system. A KET must be completed and entered accurately each time the Agency CONTRACTOR is reporting a change from previous client status in certain categories. These categories include: residential status, employment status, education and benefits establishment.

5. <u>Partnership Assessment Form (PAF)</u> means the baseline assessment for each client that must be completed and entered into <u>CAMINAR</u><u>data collection</u> system within thirty (30) days of the Partnership date.

<u>G</u> H. Care Coordinator is a MHS, CSW or MFT that provides mental health, crisis intervention and case management services to those clients who seek services in the COUNTY operated outpatient programs.

<u>I. Case Management Linkage Brokerage</u> means a process of identification, assessment of need,
 planning, coordination and linking, monitoring and continuous evaluation of clients and of available
 resources and advocacy through a process of casework activities in order to achieve the best possible

resolution to individual needs in the most effective way possible. This includes supportive assistance to the client in the assessment, determination of need and securing of adequate and appropriate living arrangements.

H_J. CAT means a team of clinicians who provide mobile response, including mental health evaluations/assessment, for those experiencing a mental health crisis, on a twenty-four hours per day, seven days per week basis. Their primary goal is to provide diversion away from hospitalization as well as providing referrals and follow-up to assist linkage to mental health services.

<u>K</u>. <u>Certified Reviewer</u> means an individual that obtains certification by completing all requirements set forth in the Quality Improvement and Program Compliance Reviewer Training Verification Sheet Modified for Contract Monitor / Contract Quality Assurance Staff.

<u>IL</u>. <u>Client or Consumer</u> means an individual, referred by COUNTY or enrolled in <u>a</u> CONTRACTOR's program for services under th<u>ise</u> Agreement, who experiences chronic mental illness. <u>JM</u>. <u>Clinical Director</u> means an individual who meets the minimum requirements set forth in Title 9, <u>California Code of Regulations</u> <u>CCR</u>, and has at least two (2) years of full-time professional experience working in a mental health setting.

K. <u>Clinical Social WorkerN. CSW</u> means an individual who meets the minimum professional and licensure requirements set forth in Title 9, <u>California Code of Regulations</u><u>CCR</u>, Section 625, and has two (2) years of post-master's clinical experience in a mental health setting.

<u>O. Diagnosis means the definition of the nature of the client's disorder.</u> <u>L Diagnosis</u> means the definition of the nature of the client's disorder. When formulating the diagnosis of client, CONTRACTOR shall use the diagnostic codes and axes as specified in the most current edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM) published by the American Psychiatric Association. DSM diagnoses shallwill be recorded on all IRIS documents, as appropriate.

M. <u>Direct Service Hours (P. DSH)</u> means a measure in minutes that a clinician spends providing client services. DSH credit is obtained for providing mental health, case management, medication support and a crisis intervention service to any client open in the IRIS which includes both billable and non-billable services.

NQ. Engagement means the process by which a trusting relationship between worker and client(s) is established with the goal to link the individual(s)-to the appropriate services. Engagement of client(s) is the objective of a successful outreach.

O. <u>A Full Service Partnership</u> R. Face-to-Face means an encounter between client and provider where they are both physically present.

S. FSP

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<u>1. A FSP</u> means a type of program described by the State in the requirements for the
 COUNTY plan for use of MHSA funds and which includes clients being a full partner in the
 development and implementation of their treatment plan. A FSP is an evidence-based and strength based model, with the focus on the individual rather than the disease. Multi-disciplinary teams will be

3 of 21 19

established including the client, psychiatrist, and Personal Services Coordinator (PSC).PSC. Whenever 1 possible, these multidisciplinary teams will include a mental health nurse, marriage and family therapist, 2 clinical social worker, peer specialist, and family members. The ideal client to staff ratio will be in the 3 range of fifteen to twenty (15 - 20) to one (1), ensuring relationship building and intense service 4 delivery. 5

5	ach very.		
6	<u> </u>	Services will include, but not be limited to, the following:	F
7	_	a. Crisis management;	
8	_	b. Housing Services;	
9	_	c. Twenty-four (24)-hours per day, seven (7) days per week intensive case management;	
10		d. Community-based Wraparound Recovery Services;	
11	_	e. Vocational and Educational services;	
12	_	f. Job Coaching/Developing;	
13		g. Consumer employment;	
14	_	h. Money management/Representative Payee support;	
15	_	i. Flexible Fund account for immediate needs;	
16		j. Transportation;	
17	_	k. Illness education and self-management;	
18		1. Medication Support;	
19		m. Dual Diagnosis Services;	
20		n. Linkage to financial benefits/entitlements;	
21		o. Family and Peer Support; and	
22		p. Supportive socialization and meaningful community roles.	
23	2.	Client services are focused on recovery and harm reduction to encourage the highest level	

2. Client services are focused on recovery and harm reduction to encourage the highest level of client empowerment and independence achievable. PSC's will meet with the consumer in their current community setting and will develop a supportive relationship with the individual served. Substance abuse treatment will be integrated into services and provided by the client's team to individuals with a co-occurring disorder.

3. The Full Service PartnershipFSP shall offer "whatever it takes" to engage seriously mentally ill adults, including those who are dually diagnosed, in a partnership to achieve the individual's wellness and recovery goals. Services shall be non-coercive and focused on engaging people in the field. The goal of Full Service Partnership FSP Programs is to assist the consumer's progress through pre-determined quality of life outcome domains (housing, decreased jail, decreased hospitalization, increased education involvement, increased employment opportunities and retention, linkage to medical providers, etc.) and become more independent and self-sufficient as consumers move through the continuum of recovery and evidence by progressing to lower level of care or out of the "intensive case management need" category.

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-FSP Program Director means an individual who has complete responsibility for the day to day 1 function of a Full Service Partnership T. The Program Director is the highest level of decision 2 making at a local, program level. 3 $-\Theta$. Housing Specialist means a specialized position dedicated to developing the full array of 4 housing options for Full Service Partnershipstheir program and monitoring their suitability for the 5 population served in accordance with the minimal housing standards policy set by the County of 6 OrangeCOUNTY for FSP housing their program. This individual is also responsible for assisting 7 members consumers with applications to low income housing, housing subsidies, senior housing, etc. 8 <u>**RU</u></u>.Individual Services and Support Funds (- Flexible Funds) means funds intended for use to</u>** 9 provide clients and/or their families with immediate assistance, as deemed necessary, for the treatment 10 of their mental illness and their overall quality of life. Flexible Funds are generally categorized as 11 housing, client transportation, food, clothing, medical and miscellaneous expenditures that are 12 individualized and appropriate to support client's mental health treatment activities. 13 <u>SV. Intake</u> means the initial meeting between a client and CONTRACTOR's staff and includes an 14 evaluation to determine if the client meets program criteria and is willing to seek services. 15 W. Intern means an individual enrolled in an accredited graduate program accumulating clinically 16 supervised work experience hours as part of field work, internship, or practicum requirements. 17 Acceptable graduate programs include all programs that assist the student in meeting the educational 18 requirements in becoming a MFT, a LCSW, or a licensed Clinical Psychologist. 19 X. <u>T.</u><u>Integrated Records and Information System (IRIS)</u> means a collection of applications and 20 databases that serve the needs of programs within the County of Orange Health Care AgencyCOUNTY 21 and includes functionality such as registration and scheduling, laboratory information system, billing and 22 reporting capabilities, compliance with regulatory requirements, electronic medical records and other 23 relevant applications. 24 Job Coach/Developer means a specialized position dedicated to <u>cultivating and nurturing</u> 25 ΨY. employment opportunities for the full service partnership membersclients and matching the job to the 26 member's client's strengths, desire abilities, desires, and goals. This position will also support the 27 memberintegrate knowledge about career development and job preparation to ensure successful job 28 retention and satisfaction of both employer and employee. 29 V. Marriage and Family Therapist Z. MFT means an individual who meets the minimum 30 professional and licensure requirements set forth in Title 9, California Code of RegulationsCCR, Section 31 625. 32 WAA. Medical Necessity means the requirements as defined in the Orange County Mental Health 33 Plan (COUNTY MHP) Medical Necessity for Medi-Cal reimbursed Specialty Mental Health Services 34 that includes Diagnosis, Impairment Criteria and Intervention Related Criteria. 35 36

X<u>AB</u>, Mental <u>Health Rehabilitation Specialist</u> means an individual who has a Bachelor's Degree and four years of experience in a mental health setting as a specialist in the fields of physical restoration, social adjustment and/or vocational adjustment.

<u>**¥**AC</u>, <u>Mental Health Services</u> means interventions designed to provide the maximum reduction of mental disability and restoration or maintenance of functioning consistent with the requirements for learning, development and enhanced self-sufficiency. Services shall include:

1. <u>Assessment</u> means a service activity, which may include a clinical analysis of the history and current status of a beneficiary's mental, emotional, or behavioral disorder, relevant cultural issues and history, diagnosis and the use of testing procedures.

2. <u>Collateral</u> means a significant support person in a beneficiary's life and is used to define services provided to them with the intent of improving or maintaining the mental health status of the client. The beneficiary may or may not be present for this service activity.

3. <u>Co-Occurring</u> see <u>Dual Disorders (DD)</u> Integrated Treatment Model.

4. <u>Crisis Intervention</u> means a service, lasting less than twenty-four (24) hours, to or on behalf of a client for a condition which requires more timely response than a regularly scheduled visit. Service activities may include, but are not limited to, assessment, collateral and therapy.

5. <u>Dual Disorders (DD)</u> DD Integrated Treatment Model means that the program uses a stage-wise treatment model that is non-confrontational, follows behavioral principles, considers interactions between mental illness and substance abuse and has gradual expectations of abstinence. Mental illness and substance abuse research has strongly indicated that to recover fully, a consumer with co-occurring disorder needs treatment for both problems as focusing on one does not ensure the other will go away. Dual diagnosis services integrate assistance for each condition, helping people recover from both in one setting at the same time.

6. <u>Medication Support Services</u> means those services provided by a licensed physician, registered nurse, or other qualified medical staff, which includes prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals and which are necessary to alleviate the symptoms of mental illness. These services also include evaluation and documentation of the clinical justification and effectiveness for use of the medication, dosage, side effects, compliance and response to medication, as well as obtaining informed consent, providing medication education and plan development related to the delivery of the service and/or assessment of the beneficiary.

7. <u>Rehabilitation Service</u> means an activity which includes assistance in improving, maintaining, or restoring a client's or group of clients' functional skills, daily living skills, social and leisure skill, grooming and personal hygiene skills, meal preparation skills, support resources and/or medication education.

35 <u>8. Targeted Case Management means services that assist a beneficiary to access needed</u>
 36 medical, educational, social, prevocational, vocational, rehabilitative, or other community services. The
 37 service activities may include, but are not limited to, communication, coordination and referral;

monitoring service delivery to ensure beneficiary access to service and the service delivery system;
 monitoring of the beneficiary's progress; and plan development.

9. <u>Therapy</u> means a service activity which is a therapeutic intervention that focuses primarily on symptom reduction as a means to improve functional impairments. Therapy may be delivered to an individual or group of beneficiaries which may include family therapy in which the beneficiary is present.

Z. <u>Mental Health Services Act (AD. MHSA)</u> means the law that provides funding for expanded community mental health services. It is also known as "Proposition 63."

AAAE. Mental Health Worker means an individual who has obtained a Bachelor's degree in a mental health field or has a high school diploma and two (2) years of experience delivering services in a

11 mental health field.

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AB. National Provider Identifier (AF. MORS is a recovery scale that COUNTY will be using for the Adult mental health programs. The scale will provide the means of assigning consumers to their appropriate level of care and replace the diagnostic and acuity of illness-based tools being used today. MORS is ideally suited to serve as a recovery-based tool for identifying the level of service needed by participating members. The scale will be used to create a map of the system by determining which milestone(s) or level of recovery (based on the MORS) are the target groups for different programs across the continuum of programs and services offered by COUNTY.

AG. <u>NPI</u> means the standard unique health identifier that was adopted by the Secretary of Health and Human Services<u>HHS</u> under <u>Health Insurance Portability and Accountability Act (HIPAA) of 1996</u> for health care providers. All HIPAA covered healthcare providers, individuals and organizations must obtain an NPI for use to identify themselves in HIPAA standard transactions. <u>The NPI is assigned for</u> life.

AC. Notice of Action (AH. NOA-A) means a Medi-Cal requirement that informs the beneficiary that he/she is not entitled to any specialty mental health service. The County of Orange COUNTY has expanded the requirement for an NOA-A to all individuals requesting an assessment for services and found not to meet the medical necessity criteria for specialty mental health services.

<u>AI. NPP</u><u>AD.</u><u>Notice of Privacy Practices (NPP)</u> means a document that notifies individuals of uses and disclosures of PHI that may be made by or on behalf of the health plan or health care provider as set forth in the Health Insurance Portability and Accountability Act of 1996 (HIPAA).<u>HIPAA.</u>

AEAJ. Outreach means the outreach to potential clients to link them to appropriate mental health services and may include activities that involve educating the community about the services offered and requirements for participation in the programs. Such activities should result in the CONTRACTOR developing their own client referral sources for the programs they offer.

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Attachment B. Redline Version to Attachment A

AFK. Peer Recovery Specialist/Counselor means an individual who has been through the same or similar recovery process as those he/she is now assisting to attain their recovery goals while getting paid for this function_by the FSP.program. A peer recovery specialist practice is informed by his/her own experience.

<u>AL. PSC</u> <u>AG.</u> <u>Personal Services Coordinator (PSC)</u> means an individual who will be part of a multi-disciplinary team that will provide community based mental health services to adults that are struggling with persistent and severe mental illness as well as homelessness. <u>rehabilitation and recovery principles</u>. The PSC is responsible for clinical care and case management of assigned client and families in a community, home, or program setting. This includes assisting clients with mental health, housing, vocational and educational needs. The position is also responsible for administrative and clinical documentation as well as participating in trainings and team meetings. The PSC willshall be active in supporting and implementing a FSP'sthe program's philosophy and its individualized, strength-based, culturally/linguistically competent and client-centered approach.

<u>AH</u><u>AM</u>. Pharmacy Benefits Manager means the PBM Company that manages the medication benefits that are given to clients that qualify for medication benefits.

<u>AN</u>. <u>Pre-Licensed Psychologist</u> means an individual who has obtained a Ph.D. or Psy.D. in Clinical Psychology and is registered with the Board of Psychology as a registered Psychology Intern or Psychological Assistant, acquiring hours for licensing and waivered in accordance with <u>W&ICWIC</u> section 575.2. The waiver may not exceed five (5) years.

AIAO. <u>Pre-Licensed Therapist</u> means an individual who has obtained a Master's Degree in Social Work or Marriage and Family Therapy and is registered with the <u>Board of Behavioral Sciences</u> (BBS)BBS as an Associate Clinical Social Worker or MFT Intern acquiring hours for licensing. An individual's registration is subject to regulations adopted by the BBS.

<u>AP.</u> Program Director means an individual who has complete responsibility for the day to day function of the program. The Program Director is the highest level of decision making at a local, program level.

AJAQ. Promotora de Salaud Model means a model where trained individuals, Promotores, work towards improving the health of their communities by linking their neighbors to health care and social services, educating their peers about mental illness, disease and injury prevention.

AKAR. Promotores means individuals who are members of the community who function as natural helpers to address some of their communities' unmet mental health, health and human service needs. They are individuals who represent the ethnic, socio-economic and educational traits of the population he/she serves. Promotores are respected and recognized by their peers and have the pulse of the community's needs.

AL. <u>Protected Health Information (PHI)AS. PHI</u> means individually identifiable health
 information usually transmitted by electronic media, maintained in any medium as defined in the
 regulations, or for an entity such as a health plan, transmitted or maintained in any other medium. It is

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Attachment B. Redline Version to Attachment A

created or received by a covered entity and relates to the past, present, or future physical or mental health 1 or condition of an individual, provision of health care to an individual, or the past, present, or future 2 payment for health care provided to an individual. 3 AMAT. Psychiatrist means an individual who meets the minimum professional and licensure 4 requirements set forth in Title 9, California Code of RegulationsCCR, Section 623. 5 ANAU. Psychologist means an individual who meets the minimum professional and licensure 6 requirements set forth in Title 9, California Code of RegulationsCCR, Section 624. 7 AV. QIC-AO. Quality Improvement Committee (QIC) means a committee that meets 8 quarterly to review one percent (1%) of all "high-risk" Medi-Cal clients to monitor and evaluate the 9 quality and appropriateness of services provided. At a minimum, the committee is comprised of one (1) 10 CONTRACTOR administrator, one (1) Clinician and one (1) Physician who are not involved in the 11 clinical care of the cases. 12 AW. Recovery is "a process of change through which individuals improve their health and wellness, 13 live a self-directed life, and strive to reach their full potential," and identifies four major dimensions to 14 support recovery in live: 15 "1. Health: Overcoming or managing one's disease(s) as well as living in a physically and 16 emotionally healthy way; 17 2. Home: A stable and safe place to live; 18 3. Purpose: Meaningful daily activities, such as a job, school, volunteerism, family 19 caretaking, or creative endeavors, and the independence, income, and resources to participate in society; 20 and 21 4. Community: Relationships and social networks that provide support, friendship, love, and 22 hope." 23 AX - AP-Recovery is "a deeply personal, unique process of changing one's attitudes, values, feelings, 24 goals, skills and/or roles. It is a way of living a satisfying, hopeful and contributing life even with 25 limitations caused by the illness. Recovery involves the development of new meaning and purpose in 26 one's life as one grows beyond the catastrophic effects of mental illness. Ultimately, because recovery is 27 a personal and unique process, everyone with a psychiatric illness develops his or her own definition of 28 recovery. However, certain concepts or factors are common to recovery." (William Anthony, 1993). 29 AQ. <u>Referral</u> means providing the effective linkage of a client to another service, when indicated; 30 with follow-up to be provided within five (5) working days to assure that the client has made contact 31 with the referred service. 32 AY. Supportive Housing PSC means a person who provides services in a supportive housing 33 structure. This person will coordinate activities which will include, but not be limited to: independent 34 living skills, social activities, supporting communal living, assisting residents with conflict resolution, 35 advocacy, and linking clients with the assigned PSC for clinical issues. Supportive Housing PSC will 36 37 consult with the multidisciplinary team of clients assigned by the program. The PSC's will be active in

1	supporting and implementing a full service partnership philosophy and its individualized, strengths-
2	based, culturally appropriate, and client-centered approach.
2	AZ. Supervisory Review means ongoing clinical case reviews in accordance with procedures
4	developed by COUNTY, to determine the appropriateness of diagnosis and treatment and to monitor
5	compliance to the minimum ADMINISTRATOR and Medi-Cal charting standards. Supervisory review
6	is conducted by the program/clinic director or designee.
7	BA AR: RX America means the Pharmaceutical Benefits Management (PBM) company that
8	manages the medication benefits that are given to Behavioral Health Services (BHS) & Medical &
9	Institutional Health Services (MIHS) clients that qualify for medication benefits.
10	-AS. <u>Token</u> means the security device which allows an individual user to access the Health Care
11	Agency (HCA) ADMINISTRATOR computer based Integrated Records Information System (IRIS).
12	ATBB. UMDAP means Universal Method of Determining Ability to Pay (is the method used for
13	determining the annual client liability for mental health services received from COUNTY mental health
14	system and is set by the State of California.
15	BC. Vocational/Educational Specialist means a person who provides services that range from pre-
16	vocational groups, trainings and supports to obtain employment out in the community based on the
17	consumers' level of need and desired support. The Vocational/Educational Specialist will provide "one
18	on one" vocational counseling and support to consumers to ensure that their needs and goals are being
19	met. The overall focus of Vocational/Educational Specialist is to empower consumers and provide them
20	with the knowledge and resources to achieve the highest level of vocational functioning possible.
21	BD. WRAP is a consumer self-help technique for monitoring and responding to symptoms to
22	achieve the highest possible levels of wellness, stability, and quality of life.
23	-AU <u>Vocational Specialist</u> means a specialized position dedicated to nurturing the client's interest
24	and setting goals for involvement in education and vocational opportunities. This is accomplished by
25	assisting the member to explore their strengths, past experiences of positive activities, hopes and dreams
26	for the future.
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II. <u>BUDGET</u>

A. COUNTY shall pay CONTRACTOR in accordance with the Payments \underline{PP} aragraph in this Exhibit A to the Agreement and the following budgets, which are set forth for informational purposes only and may be adjusted by mutual agreement, in writing, of ADMINISTRATOR and CONTRACTOR.

	PERIOD ONE	<u>PERIOD TWO</u>	<u>TOTAL</u>
ADMINISTRATIVE COST <u>S</u>			
	<u>\$195,652</u>		
Indirect Costs	<u>193,335</u>	<u>\$ 193,335</u>	<u>\$ 386,670</u>
SUBTOTAL	\$ 195,652		
ADMINISTRATIVE COST	<u>193,335</u>	<u>\$ 193,335</u>	<u>\$ 386,670</u>
PROGRAM COST <u>S</u>			
	\$ 745,268		
Salaries	<u>787,354</u>	<u>\$ 798,332</u>	<u>\$1,585,686</u>
	188,474		
Benefits	200,708	<u>203,494</u>	<u>404,202</u>
	<u>352,841</u>		
Services and Supplies	<u>300,838</u>	287,074	<u> </u>
	\$1, 286,583		
SUBTOTAL PROGRAM COST	<u>288,900</u>	<u>\$1,288,900</u>	<u>\$2,577,800</u>
	\$ 17,765		
START-UP TOTAL GROSS COST	1,482,235	<u>\$1,482,235</u>	<u>\$2,964,470</u>
	¢1.500.000		
TOTAL COST <u>REVENUES</u>	\$1,500,000		
MHSA	<u>\$1,482,235</u>	<u>\$1,482,235</u>	<u>\$2,964,470</u>
TOTAL REVENUE	<u>\$1,482,235</u>	<u>\$1,482,235</u>	<u>\$2,964,470</u>
<u>— Mental Health Services Act</u>	<u>\$1,500,000</u>		
TOTAL REVENUE			\$1,500,000
	\$1,500,235		
TOTAL MAXIMUM OBLIGATION	\$1,482,235	\$1,482,235	<u>\$2,964,470</u>

11 of 21 19 X:\ASR\Behavioral Health\ASR-12-000146-Well-Peer Support-CCS 12-14-EG.docx B. BUDGET/STAFFING MODIFICATIONS – CONTRACTOR may request to shift funds between programs, or between budgeted line items within a program, for the purpose of meeting specific program needs or for providing continuity of care to its members, by utilizing a Budget/Staffing Modification Request form provided by ADMINISTRATOR. CONTRACTOR shall submit a properly completed Budget/Staffing Modification Request to ADMINISTRATOR for consideration, in advance, which shall include a justification narrative specifying the purpose of the request, the amount of said funds to be shifted, and the sustaining annual impact of the shift as may be applicable to the current contract period and/or future contract periods. CONTRACTOR shall obtain written approval of any Budget/Staffing Modification Request(s) from ADMINISTRATOR prior to implementation by CONTRACTOR. Failure of CONTRACTOR to obtain written approval from ADMINISTRATOR for any proposed Budget/Staffing Modification Request(s) may result in disallowance of those costs.

III. PAYMENTS

A. COUNTY shall pay CONTRACTOR monthly, in arrears, at the provisional amount of \$125,000123,520 per month-for Period One and Period Two. All payments are interim payments only, and subject to Final Settlement in accordance with the Cost Report pParagraph of the Agreement for which CONTRACTOR shall be reimbursed for the actual cost of providing the services hereunder; provided, however, the total of such payments does not exceed COUNTY'S Totalthe Maximum Obligation for each Period as stated in the Referenced Contract Provisions of the Agreement and, provided further, CONTRACTOR's costs are reimbursable pursuant to CountyCOUNTY, State, and Federal regulations. ADMINISTRATOR may, at its discretion, pay supplemental billings for any month for which the provisional amount specified above has not been fully paid.

1. In support of the monthly <u>billinginvoice</u>, CONTRACTOR shall submit an Expenditure and Revenue Report as specified in the Reports <u>pP</u>aragraph of this Exhibit A to the Agreement. ADMINISTRATOR shall use the Expenditure and Revenue Report to determine payment to CONTRACTOR as specified in <u>sS</u>ubparagraphs A.2. and A.3., below.

2. If, at any time, CONTRACTOR's Expenditure and Revenue Reports indicate that the provisional amount payments exceed the actual cost of providing services, ADMINISTRATOR may reduce COUNTY payments to CONTRACTOR by an amount not to exceed the difference between the year-to-date provisional amount payments to CONTRACTOR's and the year-to-date actual cost incurred by CONTRACTOR.

3. If, at any time, CONTRACTOR's Expenditure and Revenue Reports indicate that the provisional amount payments are less than the actual cost of providing services, ADMINISTRATOR may authorize an increase in the provisional amount payment to CONTRACTOR by an amount not to exceed the difference between the year-to-date provisional amount payments to CONTRACTOR and the year-to-date actual cost incurred by CONTRACTOR.

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1	B. CONTRACTOR's billingCONTRACTOR's invoice shall be on a form approved or supplied by
2	COUNTY and provide such information as is required by ADMINISTRATOR. BillingsInvoices are due
3	the tenth (10th) business day of eachthe month, and payments. Invoices received after the due date may
4	not be paid within the same month. Payments to CONTRACTOR should be released by COUNTY no
5	later than twenty-one (21) calendar days after receipt of the correctly completed billing forminvoice.
6	C. All billingsinvoices to COUNTY shall be supported, at CONTRACTOR's facility, by source
7	documentation including, but not limited to, ledgers, journals, time sheets, invoices, bank statements,
8	canceled checks, receipts, receiving records, and records of services provided.
9	D. ADMINISTRATOR may withhold or delay any payment if CONTRACTOR fails to comply
10	with any provision of the Agreement.
11	E. COUNTY shall not reimburse CONTRACTOR for services provided beyond the expiration
12	and/or termination of theis Agreement, except as may otherwise be provided under theis Agreement, or
13	specifically agreed upon in a subsequent Agreement.
14	F. CONTRACTOR and ADMINISTRATOR may mutually agree, in writing, to modify the
15	Payments Paragraph of this Exhibit A to the Agreement.
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17	IV. <u>SERVICES</u>
18	A. FACILITY - CONTRACTOR shall maintain one (1) facility for the provision of services
19	described herein at the following location, or any other location approved, in advance, in writing, by
20	ADMINISTRATOR:
21	<u>—1910 N. Bush</u>
22	401 South Tustin Street
23	Santa AnaOrange, California <u>9270692866-2503</u>
24	1. The facility shall include space to support the services identified within the Agreement.
25	2. The facility shall be open until at least 5:00 p.m.; provided, however, CONTRACTOR shall
26	modify these hours of operation to include regularly scheduled evening and weekend hours in order to
27	meet member needs.
28	B. PERSONS TO BE SERVED – The target groups for the Peer Support and Wellness Center
29	(Wellness Center) consist of those adults residing in Orange County, over COUNTY, eighteen (18) years
30	of age <u>or older</u> , who have been diagnosed with a serious mental illness and who may have a co-occurring
31	disorder, and who are. To benefit from services, members should be relatively stable and who are,
32	working on their recovery, but <u>and may</u> require a support system to assist them in maintaining their
33	stability while continuing to progress in their personal growth and development. It is anticipated that the
34	Wellness Center could host up to one hundred (100) members each day of operation.
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C. SERVICES TO BE PROVIDED

1. CONTRACTOR shall provide a Wellness Center program that is culturally and linguistically appropriate while focusing on personalized socialization, relationship building, assistance maintaining benefits, setting employment goals, and providing educational opportunities. The Wellness Center shall be grounded in a recovery model that will enable services to be provided to a diverse member base.

2. Wellness Center services shall be <u>member directed person-driven</u> and embedded within the<u>an</u> array of services to include: individualized wellness recovery action plans, peer supports, social outings, and recreational activities. Services should be provided by members. The Wellness Center shall be based upon a non-reliance on professionals and peer-to-peer support in a non-judgmental environment. A wide variety of weekend, evening, and holiday social activities shall be provided for members to increase socialization and encourage integration into the community. The ultimate goal is to reduce reliance on the mental health system and to increase self-reliance by building a healthy network of support, which may involve the members family, friends, and significant others.

3. Wellness Center members shall be offered a broader range of personalized social development services that are culturally relevant and tie into the recovery model.

4. The philosophy of the Wellness Center shall draw upon cultural strengths and utilize service delivery and assistance in a manner that is trusted by, and familiar to, many of Orange County'sCOUNTY's ethnically and culturally diverse populations. Cultural and linguistic appropriateness shall be a continuous focus in the development of the programming, recruitment, and hiring of staff that speak the same language and have the same cultural background of the members that are to be served. This inclusion of Orange County'sCOUNTY's multiple cultures will assist in maximizing access to services offered at the Wellness Center. The Orange County Health Care AgencyADMINISTRATOR will provide education and training for all to staff on addressing cultural and linguistic issues needs.

5. The Wellness Center shall have a member-driven Advisory Board which shall direct the activities, provide recommendations for ongoing program development and adherence to the <u>Wellness</u> Center's rules of conduct. CONTRACTOR shall:

a. Continue to solicit membership to the Advisory Board whenever a vacancy is created through attrition of term limits or other vacancies;

b. Provide support and direction to the Advisory Board, maintaining structure, roles, responsibilities and rules of order;

c. Collect membership survey data in order to access achievement of performance outcomes and utilize the data to further develop Wellness Center service delivery;

d. Develop and publish a weekly/monthly schedule of activities;

e. Maintain Wellness Center standards and guidelines for members including, but not
limited to:

1) Membership criteria; 1 2) Rules of Conduct; and 2 3) Equipment/resource utilization polices. 3 6. CONTRACTOR shall review and monitor procedures for and train all staff in member 4 crisis intervention, as required. 5 7. CONTRACTOR shall review and monitor plans for ongoing peer support of staff members. 6 8. CONTRACTOR shall, at a minimum, provide the following six (6) service components in 7 the Wellness Center program, as identified below: 8 a. Wellness/Advocacy/Recovery: The Wellness Center shall be primarily focused on 9 member wellness and advocacy. This may include classes on life skills, money management, member 10 empowerment and Wellness Recovery Action Planning (WRAP), WRAP. WRAP is a structured system 11 to help members monitor uncomfortable and distressing symptoms and to reduce those symptoms by 12 using planned responses. All WRAP groups shall be facilitated by peer members. 13 b. Indoor Recreation/Community Involvement: In addition to any outside recreation 14 activities planned, the Wellness Center shall also utilize an indoor recreation area. This multifaceted 15 space will serve various purposes as a classroom, arts center, a social room, and a performing arts stage. 16 A range of social, recreational, athletic and spiritual activities will be offered on and off site to increase 17 opportunities for community integration. CONTRACTOR shall schedule a minimum of two groups or 18 activities each month; however, the frequency of such activities shall be driven by members and the 19 Advisory Board. 20 c. Garden: The Wellness Center shall create and maintain an outdoor garden. The garden 21 22 shall be used to provide benefits for members on multiple levels. A garden will offer an area for recreational therapy, learning job skills, team building exercises, and practicing responsibility. 23 d. Health & Wellness (Meditation/Relaxation): Member activities shall be developed that 24 support health and well-being. Exercise and nutrition classes, as well as spiritual resources shall be 25 offered, and a room shall be identified for meditation, relaxation, and quiet introspection. 26 e. <u>Resource Center</u>: The Wellness Center shall include a Resource Center that will offer 27 literature, computer access, videos, tapes and other educational materials to members. Members may 28 choose to check out specific material or use them in the Resource Center. 29 f. Vocational/Job Training: Offer training for employment readiness (resume writing. 30 interviewing, basic job skills), assistance in finding jobs for members with the intent of developing self-31 esteem and independence around findingsecuring and maintaining a job. Wellness Center staff shall 32 assist in finding volunteer and paid positions for members, and support members who are working to 33 34 facilitate success. 79. CONTRACTOR shall collaborate with community support groups to include hosting 35 groups of interest to members such as Alcoholics Anonymous (AA) and Narcotics Anonymous (NA). 36 These self-help groups will meet in order to provide members with an avenue for full recovery. The 37

EXHIBIT A

1	Wellness Center may offer ongoing 12-step groups geared towards members maintaining their sobriety
2	and living a healthy life.
3	8 <u>10</u> . CONTRACTOR shall possess the ability to provide or arrange for transportation of
4	members to planned community activities or events, and maintain the ability to provide or arrange
5	transportation for members for emergency services. Members shall be encouraged to utilize public
6	transportation or their own means of transportation whenever possible.
7	9. CONTRACTOR shall attend:
8	a.—Meetings requested by County staff to address any aspect of Wellness Center services.
9	——— b. Monthly COUNTY staff meetings with AMHS Program staff and Contract
10	Administrator to discuss contractual and other issues related to, but not limited to compliance with
11	policies and procedures, statistics and program services.
12	c. Staff training for individuals by COUNTY representatives. Such training shall be
13	conducted by CONTRACTOR and/or COUNTY administrative staff.
14	10. CONTRACTOR shall not engage in, or permit any of its employees or subcontractors, to
15	conduct research activity on COUNTY members without obtaining prior written authorization from
16	ADMINISTRATOR.
17	D. PERFORMANCE OUTCOMES - CONTRACTOR shall during the term of the stream
18	be required to establish and achieve Performance Outcome Objectives, and track and report Performance
19	Outcome Objective statistics in monthly programmatic reports, as outlined below.
20	-1E. CONTRACTOR shall track and monitor the number of members enrolled for participation
21	at the wellness center.
22	2. CONTRACTOR shall track the number of groups provided per week and how many
23	members attend each group. These numbers shall be reported monthly.
24	<u>3. CONTRACTOR shall track the total number of activities provided on and off site for the</u>
25	month as well as number of members who attended. These numbers shall be reported monthly.
26	4. CONTRACTOR shall track-member's satisfaction and /or desire for improvement in living
27	arrangements, education, and employment/work experience by using a quality of life scale in these areas
28	at enrollment and every three months thereafter.
29	5. CONTRACTOR in partnership with ADMINISTRATOR will develop ongoing
30	measures/outcomes of programs target goals as program moves beyond its implementation phase.
31	E. CONTRACTOR shall not conduct any proselytizing activities, regardless of funding sources,
32	with respect to any person who has been referred to CONTRACTOR by COUNTY under the terms of
33	this Agreement. Further, CONTRACTOR agrees that the funds provided hereunder shall not be used to
34	promote, directly or indirectly, any religion, religious creed or cult, denomination or sectarian institution,
35	or religious belief.
36	F. CONTRACTOR and ADMINISTRATOR may mutually agree, in writing, to modify
37	subparagraph IV. above the Services Paragraph of this Exhibit A to the Agreement.

V. STAFFING

A. CONTRACTOR shall, at a minimum, provide the following staffing pattern expressed in Full-Time Equivalents (FTEs) continuously throughout the term of thise Agreement. One (1) FTE shall be equal to an average of forty (40) hours work per week.

	<u>FTEs</u>		
Regional Director	0.50		
Program Director	1.00		
Operations Manager	1.00		
Team Lead-Peer Mentor Lead	1.00	4.00	
Peer Lead	<u>3.00</u>		
Peer Specialist	<u>6.50</u>	6.00	
Peer Specialist - Bilingual	4.00		
Health Educator - LVN	0.50		
Office Manager	1.00		
Office Assistant	2.00		
TOTAL FTES	20.50	20.00	

B. Wellness Center Program Staff shall be persons with a history of being members of mental health services. Moreover, additional staff may consist of individuals who are professionals that may not have a history of being a member of services.

C. Program Director/Operations Manager roles and responsibilities shall include, but not be limited to:

1. Development of group topics and planned activities in conjunction with Member Advisory Board and Center member input;

2. Maintain ongoing communication with members on needs and desired activities in order to support and promote their continued recovery and assimilation into the larger mainstream community;

3. Research, evaluate, and implement the most current best practices as they relate to this level of recovery and independence. Programs, including continued progress towards achieving positive outcomes is the responsibility of the Program Director and Manager;

4. Focus on outcomes and developing systems to measure recovery as a process (short term goals) and as an outcome (long term goal);

5. Submittal of quarterly data to ADMINISTRATOR with verification that outcome data is correct:

6 Development of all **policies procedures**<u>P&Ps</u> regarding the program;

7. Fiscal and programmatic management of the Wellness Center's operating budget;

8. Development and coordinate Incoordination of in-service training of staff, both initially and 36 ongoing, on topics related to recovery-based services; and 37

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9. Maintain ongoing communication with <u>County administrators</u><u>ADMINISTRATOR</u> in regards to program.

D. CONTRACTOR shall establish a written Code of Conduct for employees, volunteers, interns and members of the Board of Directors which shall include, but not be limited to, standards related to the use of drugs and/or alcohol; staff-member relationships; prohibition of sexual contact with members; and conflict of interest. Prior to providing any services pursuant to this Agreement, all members of the Board of Directors, employees, volunteers, and interns shall agree in writing to maintain the standards set forth in the Code of Conduct. A copy of the Code of Conduct shall be provided to each member upon admission and shall be posted in writing in a prominent place.

E_D. CONTRACTOR shall include bilingual/bicultural services to meet the needs of threshold languages as determined by COUNTY. Whenever possible, bilingual/bicultural staff should be retained. Any staff vacancies occurring at a time when bilingual and bicultural composition of the program staffing does not meet the above requirement must be filled with bilingual and bicultural staff unless ADMINISTRATOR consents, in advance and in writing, to the filling of those positions with non-bilingual and bicultural staff. Salary savings resulting from such vacant positions may not be used to cover costs other than salaries and employees benefits unless otherwise authorized in advance and in writing, by ADMINISTRATOR.

F<u>E</u>. CONTRACTOR shall make its best effort to provide services pursuant to the Agreement in a manner that is culturally and linguistically appropriate for the population(s) served. CONTRACTOR shall maintain documents of such efforts which may include; but not be limited to: records of participation in COUNTY-sponsored or other applicable training; recruitment and hiring policies and procedures <u>P&Ps</u>; copies of literature in multiple languages and formats, as appropriate; and descriptions of measures taken to enhance accessibility for, and sensitivity to, individuals who are physically challenged.

G \underline{F} . CONTRACTOR shall recruit, hire, train and maintain staff who are individuals in recovery. These individuals shall not be currently receiving services directly from CONTRACTOR. Documentation may include, but not be limited to, the following: records attesting to efforts made in recruitment and hiring practices and identification of measures taken to enhance accessibility for potential staff in these categories.

H<u>G</u>. CONTRACTOR may augment the above paid staff with volunteers or interns upon written approval of ADMINISTRATOR. CONTRACTOR shall provide supervision to volunteers as specified in the respective job descriptions or work contracts.

IH. CONTRACTOR shall maintain personnel files for each staff member, including the Program Directormanagement and other administrative positions, which shall include, but not be limited to, an application for employment, qualifications for the position, documentation of bicultural/bilingual capabilities (if applicable), pay rate and evaluations justifying pay increases.

<u>JI</u>. CONTRACTOR shall notify ADMINISTRATOR, in writing, within seventy-two (72) hours, of any staffing vacancies that occur during the term of theis Agreement.

<u>KJ</u>. ADMINISTRATOR and CONTRACTOR may mutually agree, in advance and in writing, to adjustmodify the staffing requirements described in Staffing Paragraph of this paragraph Exhibit A to the Agreement.

VI. <u>REPORTS</u>

A. CONTRACTOR shall maintain records and make statistical reports as required by ADMINISTRATOR and the California State Department of Mental HealthDHCS on forms provided by either agency.

B. FISCAL

1. CONTRACTOR shall submit monthly Expenditure and Revenue Reports to ADMINISTRATOR. These reports shall be on a form acceptable to, or provided by, ADMINISTRATOR and shall report actual costs and revenues for CONTRACTOR's program described in the Services <u>pParagraph</u> of <u>this</u> Exhibit A to theis Agreement. Any changes, modifications, or deviations to any approved budget line item must be approved in advance and in writing by ADMINISTRATOR and annotated on the monthly Expenditure and Revenue Report, or said cost deviations may be subject to disallowance. Such reports shall be received by ADMINISTRATOR no later than twenty (20) calendar days following the end of the month being reported.

2. CONTRACTOR shall submit Year-End Projection Reports to ADMINISTRATOR. These reports shall be on a form acceptable to, or provided by, ADMINISTRATOR and shall report anticipated year-end actual costs and revenues for CONTRACTOR's program described in the Services **P***P*aragraph of this Exhibit A to thise Agreement. Such reports shall include actual monthly costs and revenue to date and anticipated monthly costs and revenue to the end of the fiscal year, and shall include a projection narrative justifying the year-end projections. Year-End Projection Reports shall be submitted in conjunction with the Monthly Expenditure and Revenue Reports.

C. STAFFING – CONTRACTOR shall submit monthly Staffing Reports to ADMINISTRATOR. These reports shall be on a form acceptable to, or provided by, ADMINISTRATOR and shall, at a minimum, report both the budgeted and actual salaries and FTEs of the positions stipulated in the Staffing subpParagraph of this Exhibit A to the Agreement, and shall include the employees' names, licensure status, and hire and/or termination date, and any other pertinent information as may be required by ADMINISTRATOR. Any changes, modifications, or deviations to any approved salary budgets/FTEs or actual salaries/FTEs exceeding approved amounts must be approved in advance and in writing by ADMINISTRATOR and annotated on the monthly Staffing Report, or said cost deviations may be subject to disallowance. The reports shall be received by ADMINISTRATOR no later than twenty (20) calendar days following the end of the month being reported.

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D. PROGRAMMATIC – Throughout the term of theis Agreement, CONTRACTOR shall submit monthly programmatic reports to ADMINISTRATOR, which shall be received by ADMINISTRATOR no later than twenty (20) calendar days following the end of the month being reported. Programmatic reports shall be in a format(s) approved by ADMINISTRATOR and shall include a description of CONTRACTOR's progress in implementing the provisions of theis Agreement, and any pertinent facts or interim findings, staff changes, status of licenses and/or certifications, changes in population served and reasons for any such changes. CONTRACTOR shall be prepared to present and discuss their programmatic reports at their monthly scheduled meetings with ADMINISTRATOR and shall state whether or not it is progressing satisfactorily in achieving all the terms of theis Agreement, and if not, shall specify what steps are being taken to achieve satisfactory progress.

E. ADDITIONAL REPORTS – Upon ADMINISTRATOR's request, CONTRACTOR shall make such additional reports as required by ADMINISTRATOR concerning CONTRACTOR's activities as they affect the services hereunder. ADMINISTRATOR will be specific as to the nature of information requested and allow thirty (30) calendar days for CONTRACTOR to respond.

F. CONTRACTOR shall advise and ADMINISTRATOR of any special incidents, conditions or issues that adversely affect may mutually agree, in writing, to modify the quality or accessibility of member-related services provided by, or under contract with, Reports Paragraph of this Exhibit A to the COUNTY Agreement.

VII. <u>RESPONSIBILITES</u>

A. CONTRACTOR and ADMINISTRATOR RESPONSIBILITIES;

1. CONTRACTOR shall ensure that all staff are trained and have a clear understanding of all **Policies and Procedures (P&P)**<u>s</u>.-_ CONTRACTOR shall provide signature confirmation of the P&P training for each staff member and **placed**<u>place it</u> in their personnel files.

 $-2\underline{B}$. CONTRACTOR shall establish a written smoking policy, which shall be reviewed and approved by ADMINISTRATOR that specifies designated areas as the only areas where smoking is permitted.

 $-3\underline{C}$. CONTRACTOR shall establish a Good Neighbor Policy, which shall be reviewed and approved by ADMINISTRATOR.-_ The policy shall include, but not be limited to, staff training to deal with neighbor complaints and staff contact information available to neighboring residents.

-4<u>D</u>. CONTRACTOR shall ensure that all staff complete the County's <u>COUNTY's</u> Annual Compliance Training.

 $--\frac{5E}{E}$. COUNTY shall provide, or cause to be provided, training and ongoing consultation to CONTRACTOR's staff to assist CONTRACTOR in ensuring compliance with Health Care Agency (HCA)<u>ADMINISTRATOR</u> Standards of Care practices, policies and procedures<u>P&Ps</u>, documentation standards and any state regulatory requirements.

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1	F. CONTRACTOR shall document all adverse incidents affecting the physical and/or emotional
2	welfare of clients, including but not limited to serious physical harm to self or others, serious destruction
3	of property, developments, etc., and which may raise liability issues with COUNTY. CONTRACTOR
4	shall notify COUNTY within twenty-four (24) hours of any such serious adverse incident.
5	CONTRACTOR shall advise ADMINISTRATOR of any special incidents, conditions, or issues that
6	adversely affect the quality or accessibility of client-related services provided by, or under contract with,
7	COUNTY as identified in the ADMINISTRATOR P&Ps.
8	G. CONTRACTOR shall attend:
9	 Meetings requested by County staff to address any aspect of Wellness Center services.
10	2. Monthly ADMINISTRATOR meetings to discuss contractual and other issues related to,
11	but not limited to compliance with policies and procedures, statistics and program services.
12	3. Staff training for individuals by COUNTY representatives. Such training shall be
13	conducted by CONTRACTOR and/or COUNTY staff.
14	H. CONTRACTOR shall not engage in, or permit any of its employees or subcontractors, to
15	conduct research activity on COUNTY members without obtaining prior written authorization from
16	ADMINISTRATOR.
17	I. PERFORMANCE OUTCOMES:
18	1. CONTRACTOR shall track and monitor the number of members enrolled for participation
19	at the Wellness Center.
20	2. CONTRACTOR shall track the number of groups provided per week and how many
21	members attend each group. These numbers shall be reported monthly.
22	3. CONTRACTOR shall track the total number of activities provided on and off site for the
23	month as well as number of members who attended. These numbers shall be reported monthly.
24	4. CONTRACTOR shall track members' satisfaction and /or desire for improvement in living
25	arrangements, education, and employment/work experience by using a quality of life scale in these areas
26	at enrollment and every three months thereafter.
27	5. CONTRACTOR, in partnership with ADMINISTRATOR, will develop ongoing
28	measures/outcomes of program's target goals.
29	J. CONTRACTOR shall not conduct any proselytizing activities, regardless of funding sources,
30	with respect to any person who has been referred to CONTRACTOR by COUNTY under the terms of
31	this Agreement. Further, CONTRACTOR agrees that the funds provided hereunder shall not be used to
32	promote, directly or indirectly, any religion, religious creed or cult, denomination or sectarian institution,
33	or religious belief.
34	K. CONTRACTOR and ADMINISTRATOR may mutually agree, in writing, to modify the
35	Responsibilities Paragraph of this Exhibit A to the Agreement.
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 $\begin{array}{c} 21 \text{ of } 21 \text{ 49} \\ \text{X:} \text{ASR} \text{Behavioral Health} \text{ASR-12-000146-Well-Peer Support-CCS 12-14-EG.docx} \end{array}$