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AGREEMENT FOR PROVISION OF
 1
                       ADULT MENTAL HEALTH INPATIENT SERVICES
 2
                                         BETWEEN
 3
                                    COUNTY OF ORANGE
 4
                                            AND
 5
                                   «Hospital_Organization1»
 6
                                  «Hospital_Business_Name1»
 7
                                        «UC_NAME»
 8
                                         «UC_DBA»
 9
                          JULY 1, 200911 THROUGH JUNE 30, 2011 13
10
11
        THIS AGREEMENT entered into this 1st day of July 200911, which date is enumerated for
12
     purposes of reference only, is by and between the COUNTY OF ORANGE (COUNTY) and
13
     «Hospital_Organization1» «Hospital_Business_Name1», «Corporation_Status»
14
     (CONTRACTOR). «UC NAME» «UC DBA», «CORP STAT» (CONTRACTOR).
                                                                            This Agreement
15
     shall be administered by the County of Orange Health Care Agency (ADMINISTRATOR).
16
17
18
                                      WITNESSETH:
19
        WHEREAS, COUNTY wishes to contract with CONTRACTOR for the provision of
20
     Adult Mental Health Inpatient Services described herein to the residents of Orange County; and
21
22
        WHEREAS, CONTRACTOR is agreeable to the rendering of such services on the terms and
     conditions hereinafter set forth:
23
        NOW, THEREFORE, IT IS MUTUALLY AGREED AS FOLLOWS:
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3		REFERENCED CONTRACT	PROVISIONS
4	Term: July 1, 200911 thro	ough June 30, 20 11 <u>13</u>	
5	"Period One" mear	as the period from July 1, 20 <mark>09</mark> 11 thro	ough June 30, 20 10 <u>12</u>
6	"Period Two" mea	ns the period from July 1, 20 10 12 thr	ough June 30, 20 <mark>11</mark> 13
7	 Aggregate Maximum Ob	ligation:	
8		aximum Obligation:	\$ -5,139,393 4,273,420
9		laximum Obligation:	<u>-5,139,393</u> 4,273,420
10	TOTAL <u>AGG</u>	<u>REGATE</u> MAXIMUM OBLIGATIO	ON: \$ 10,278,786 <u>8,546,840</u>
11 12	Basis for Reimbursemen	• Fee For Service	
13	Payment Method:	Fee For Service	
14	Notices to COUNTY and		
15			
16	· •	y of Orange Care Agency	
17		ect Development and Management	
18	405 W	est 5th Street, Suite 600	
19	Santa	Ana, CA 92701-4637	
20		ital_Organization2»«LC_NAME»	
21		ital_Business_Name2»	
22		State_Zip»	
23	«LC_I		
24		RESS»	
25	«CITY	_STATE_ZIP»	
26	CONTRACTOR's Insur	ance Coverages:	
27	<u>Coverage</u>	<u>M</u>	<u> Iinimum Limits</u>
28	Commercial General Liabi	lity -with \$1	1,000,000
29 30	-broad form Property dam -contractual liability		ombined Single limit per occurrence 2,000,000 Aaggregate
31	Automobile Liability, inclu		1,000,000 per occurrence
32	for owned, non-owned ar	0	ombined Single limit per occurrence
33	Workers' Compensation		tatutory
34	Employer's Liability Insura		000,000,
35			er occurrence
36	Professional Liability Insu		1,000,000
37		p	er claims made or

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I. 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.

II. COMPLIANCE

- A. COUNTY's Health Care Agency (HCA) 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. CONTRACTOR may adopt HCA's Compliance Program or establish its own. If CONTRACTOR has established its own Compliance Program, CONTRACTOR shall acknowledge existence of HCA's Compliance Program and shall provide certification to ADMINISTRATOR that CONTRACTOR shall operate its own Compliance Program and 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")") relative to this Agreement are made aware of COADMINISTRACTOR's Compliance Program and related policies and procedures.
- 23. CONTRACTOR has the option to adhere to ADMINISTRATOR's Compliance Program or establish its own, provided CONTRACTOR's Compliance Program has been approved by ADMINISTRATOR's Compliance Officer as described in subparagraphs A.4., A.5., A.6., and A.7. below.
- 4. If CONTRACTOR elects to adopt HCA's have its own Compliance Program, ADMINISTRATOR then it shall provide CONTRACTOR with submit a copy of the its Compliance Program and relevant HCA Policies and Procedures relating to the Office of Compliance. CONTRACTOR shall ensure that Covered Individuals relative to this Agreement are made aware of these Policies and Procedures.
- policies B. CODE OF CONDUCT Under the direction of the HCA Office of Compliance, a Code of Conduct for adherence by all HCA employees and contract providers has been developed.
- procedures to ADMINISTRATOR within

 1. Within thirty (30) calendar days of award of this Agreement, CONTRACTOR has the option of submitting to ADMINISTRATOR a signed acknowledgement and agreement that CONTRACTOR shall comply with the "HCA Contractor Code of Conduct" or CONTRACTOR shall submit a copy of its Code of Conduct to ADMINISTRATOR for review and comparison to federal, state and county standards by the HCA Compliance Officer.

1	2. If CONTRACTOR elects to submit a copy of its Code of Conduct,
2	HCA's ADMINISTRATOR's Compliance Officer shall advise CONTRACTOR of any necessary
3	changes to determine if CONTRACTOR's Code of Conduct to meet minimum standards and Compliance
4	Program is accepted. CONTRACTOR shall either take necessary action to meet said standards or shall
5	be asked to acknowledge and agree to the "HCA Contractor Code of Conduct" specified in subparagraph
6	B.3. below ADMINISTRATOR's Compliance Program.
7	6. Upon approval of CONTRACTOR's Compliance Program by
8	ADMINISTRATOR's Compliance Officer, CONTRACTOR shall ensure that its employees,
9	subcontractors, interns, volunteers, and members of Board of Directors or duly authorized agents, if
10	appropriate, ("Covered Individuals") relative to this Agreement are made aware of CONTRACTOR's
11	Compliance Program and related policies and procedures.
12	
13	Conduct or to submit its own Code of Conductits Compliance Program and relevant policies and
14	procedures shall constitute a material breach of this Agreement, and failure. Failure to cure such breach
15	within sixty (60) calendar days of such notice of such breach from ADMINISTRATOR shall constitute
16	grounds for termination of this Agreement as to the non-complying party.
17	B. C. SANCTION SCREENING - CONTRACTOR shall screen all Covered Individuals
18	employed or retained to provide services related to this Agreement to ensure that they are not designated
19	as "Ineligible Persons," as defined hereunder. Screening shall be conducted against the General Services
20	Administration's List of Parties Excluded from Federal Programs and the Health and Human
21	Services/Office of Inspector General List of Excluded Individuals/Entities.
22	Ineligible Person shall be any individual or entity who:
23	a. is currently excluded, suspended, debarred or otherwise ineligible to participate in the
24	federal health care programs; or
25	b. has been convicted of a criminal offense related to the provision of health care items or
26	services and has not been reinstated in the federal health care programs after a period of exclusion,
27	suspension, debarment, or ineligibility.
28	2. CONTRACTOR shall screen prospective Covered Individuals prior to hire or engagement.
29	CONTRACTOR shall not knowingly hire or engage any Ineligible Person to provide services relative to
30	this Agreement.
31	3. CONTRACTOR shall screen all current Covered Individuals annually, unless otherwise
32	authorized in writing by ADMINISTRATOR, semi-annually to ensure that they have not become
33	Ineligible Persons.
34	4. Covered Individuals shall be required to disclose to CONTRACTOR immediately any
35	debarment, exclusion or other event that makes the Covered Individual an Ineligible Person.
36	CONTRACTOR shall notify COUNTY ADMINISTRATOR immediately upon such disclosure.
37	

1	5. In addition to screening organizations and vendor under subcontract, CONTRACTOR shall
2	also request that its subcontractors use their best efforts to verify that they are eligible to participate in all
3	federal and State of California health programs and have not been excluded or debarred from
4	participation in any federal or state health care programs, and to further represent to CONTRACTOR
5	that they do not have any Ineligible Person in their employ or under contract.
6	
7	providing federal and state funded health care services by contract with COUNTY in the event that they
8	are currently sanctioned or excluded by a federal or state law enforcement regulatory or licensing
9	agency. If CONTRACTOR becomes aware that a Covered Individual has become an Ineligible Person,
10	CONTRACTOR shall remove such individual from responsibility for, or involvement with,
11	HCACOUNTY business operations related to this Agreement.
12	6. CONTRACTOR shall notify ADMINISTRATOR immediately if a Covered Individual or
13	entity is currently excluded, suspended or debarred, or is identified as such after being sanction screened.
14	Such individual or entity shall be immediately removed from participating in any activity associated
15	with this AGREEMENT. ADMINISTRATOR will determine if any repayment is necessary from
16	CONTRACTOR for services provided by ineligible person or individual.
17	7. CONTRACTOR shall promptly return any overpayments within in forty-five (45) days after
18	the overpayment is verified by the ADMINISTRATOR.
19	C D. REIMBURSEMENT. COMPLIANCE TRAINING - ADMINISTRATOR shall make
20	General Compliance Training and Provider Compliance Training, where appropriate, available to
21	<u>Covered Individuals.</u>
22	1. CONTRACTOR shall use its best efforts to encourage completion by Covered Individuals;
23	provided, however, that at a minimum CONTRACTOR shall assign at least one (1) designated
24	representative to complete all Compliance Trainings when offered.
25	2. Such training will be made available to Covered Individuals within thirty (30) calendar days
26	of employment or engagement.
27	3. Such training will be made available to each Covered Individual annually.
28	4. Each Covered Individual attending training shall certify, in writing, attendance at
29	compliance training. CONTRACTOR shall retain the certifications. Upon written request by
30	ADMINISTRATOR, CONTRACTOR shall provide copies of the certifications.
31	D. CODE OF CONDUCT - ADMINISTRATOR has developed a Code of Conduct for adherence
32	by ADMINISTRATOR's employees and contract providers.
33	1. ADMINISTRATOR shall ensure that CONTRACTOR is made aware of
34	ADMINISTRATOR's Code of Conduct.
35	2. CONTRACTOR shall ensure that its employees, subcontractors, interns, volunteers, and
36	members of Board of Directors or duly authorized agents, if appropriate, ("Covered Individuals")
37	relative to this Agreement are made aware of ADMINISTRATOR's Code of Conduct.

1	3. CONTRACTOR has the option to adhere to ADMINISTRATOR's Code of Conduct or
2	establish its own provided CONTRACTOR's Code of Conduct has been approved by
3	ADMINISTRATOR's Compliance Officer as described in subparagraphs D.4., D.5., D.6., D.7., and D.8.
4	below.
5	4. If CONTRACTOR elects to have its own Code of Conduct, then it shall submit a copy of its
6	Code of Conduct to ADMINISTRATOR within thirty (30) calendar days of award of this Agreement.
7	5. ADMINISTRATOR's Compliance Officer shall determine if CONTRACTOR's Code of
8	Conduct is accepted. CONTRACTOR shall take necessary action to meet said standards or shall be
9	asked to acknowledge and agree to the ADMINISTRATOR's Code of Conduct.
10	6. Upon approval of CONTRACTOR's Code of Conduct by ADMINISTRATOR,
11	CONTRACTOR shall ensure that its employees, subcontractors, interns, volunteers, and members of
12	Board of Directors or duly authorized agents, if appropriate, ("Covered Individuals") relative to this
13	Agreement are made aware of CONTRACTOR's Code of Conduct.
14	7. If CONTRACTOR elects to adhere to ADMINISTRATOR's Code of Conduct then
15	CONTRACTOR shall submit to ADMINISTRATOR a signed acknowledgement and agreement that
16	CONTRACTOR shall comply with ADMINISTRATOR's Code of Conduct.
17	8. Failure of CONTRACTOR to timely submit the acknowledgement of
18	ADMINISTRATOR's Code of Conduct shall constitute a material breach of this Agreement, and failure
19	to cure such breach within sixty (60) calendar days of such notice from ADMINISTRATOR shall
20	constitute grounds for termination of this Agreement as to the non-complying party.
21	E. MEDICAL BILLING, CODING, AND DOCUMENTATION COMPLIANCE STANDARDS
22	1. CONTRACTOR shall take reasonable precaution to ensure that the coding of health care
23	claims, billings and billing/or invoices for same are prepared and submitted in an accurate and timely
24	manner and are consistent with federal, state and county laws and regulations.
25	2. CONTRACTOR shall not submit any false, fraudulent, inaccurate and/or fictitious claims
26	for payment or reimbursement of any kind.
27	3. CONTRACTOR shall bill only for those eligible services actually rendered which are also
28	fully documented. When such services are coded, CONTRACTOR shall use only correct accurate billing
29	codes that which accurately describes the services provided and must ensure compliance with all billing
30	and documentation requirements.
31	4. CONTRACTOR shall act promptly to investigate and correct any problems or errors in
32	coding of claims and billing, if and when, any such problems or errors are identified.
33	E. COMPLIANCE TRAINING - ADMINISTRATOR shall make General Compliance Training
34	and Provider Compliance Training, where appropriate, available to Covered Individuals.
35	1. CONTRACTOR shall use its best efforts to encourage attendance at Compliance Training
36	by Covered Individuals.
37	2. Such training will be made available to Covered Individuals within thirty (30) calendar days

of employment or engagement.

- 3. Such training will be made available to each Covered Individual annually.
- 4. 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.

III. 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 Code, Division 1, Part 2.6 relating to Confidentiality of Medical Information 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.
- C. HOWEVER, COUNTY UNDERSTANDS AND AGREES IF CONTRACTOR IS A PUBLIC INSTITUTION, IT IS SUBJECT TO THE PROVISIONS OF THE CALIFORNIA PUBLIC RECORDS ACT. IN THE EVENT CONTRACTOR IS A PUBLIC INSTITUTION AND RECEIVES A REQUEST TO PRODUCE THIS AGREEMENT, OR IDENTIFY ANY TERM, CONDITION, OR ASPECT OF THIS AGREEMENT, CONTRACTOR WILL CONTACT COUNTY WITHIN FORTY-EIGHT (48) HOURS TO

ADVISE OF SUCH REQUEST TO RELEASE THIS INFORMATION.

IV. 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. 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

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

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

B. For CONTRACTORS which are nonprofit corporations, any change from a nonprofit

subcontracts not approved in accordance with this paragraph.

derogation of this paragraph shall be void.

paragraph shall be void.

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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

C. For CONTRACTORS which are for-profit organizations, any change in the business structure,

V. EMPLOYEE ELIGIBILITY VERIFICATION

CONTRACTOR warrants that it shall make its best effort to fully comply with all federal and state statutes and regulations regarding the employment of aliens and others and to ensure that employees, 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, 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. §1324 et seq., as they currently exist and as they may be hereafter amended. CONTRACTOR shall retain all such documentation for all covered employees, for the period prescribed by the law.

VI. <u>EXPENDITURE AND REVENUE</u> REPORT

11 of 25

A. No later than sixty (60) calendar days following termination of each <u>period or fiscal year or termination</u> of this Agreement, CONTRACTOR shall submit to ADMINISTRATOR, for informational purposes only, an Expenditure <u>and Revenue Report</u> for the preceding fiscal year, or portion thereof. Such report shall be prepared in accordance with the procedure that is provided by ADMINISTRATOR and generally accepted accounting principles.

B. CONTRACTOR may be required to submit periodic Expenditure Reports throughout the term of the Agreement.

VII. FACILITIES, PAYMENTS AND SERVICES

CONTRACTOR agrees to provide the services, staffing, facilities, any equipment and supplies, and reports 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.

VIII. <u>INDEMNIFICATION AND INSURANCE</u>

- A. CONTRACTOR agrees to indemnify, defend 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, including defense costs, 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. COUNTY agrees to indemnify, defend and hold CONTRACTOR, its officers, employees, agents, directors, members, shareholders and/or affiliates harmless from any claims, demands, including defense costs, 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 COUNTY pursuant to this Agreement. If judgment is entered against COUNTY and CONTRACTOR by a court of competent jurisdiction because of the concurrent active negligence of CONTRACTOR, COUNTY and CONTRACTOR agree that liability will be apportioned as determined by the court. Neither party shall request a jury apportionment.
- C. Each party agrees to provide the indemnifying party with written notification of any claim related to services provided by either party pursuant to this Agreement within thirty (30) calendar days of notice thereof, and in the event the indemnifying party is subsequently named party to the litigation,

each party shall cooperate with the indemnifying party in its defense.

- D. Without limiting CONTRACTOR's indemnification, CONTRACTOR warrants that it is self-insured or shall maintain in force at all times during the term of this Agreement, the policy or policies of insurance covering its operations placed with reputable insurance companies in amounts as specified on Page 3 in the Referenced Contract Provisions of this Agreement. Upon request by ADMINISTRATOR, CONTRACTOR shall provide evidence of such insurance.
- E. COUNTY warrants that it is self-insured or maintains policies of insurance placed with reputable insurance companies licensed to do business in the State of California which insures the perils of bodily injury, medical, professional liability, and property damage. Upon request by CONTRACTOR, COUNTY shall provide evidence of such insurance.

IX. <u>INSPECTIONS AND AUDITS</u>

- 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, 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 paragraph 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.
- 1. These audits, reviews, evaluations, or examinations may include, but are not limited to, the following:
- a. Level and quality of care, including the necessity and appropriateness of the services provided.
 - b. Internal procedures for assuring efficiency, economy, and quality of care.
 - c. Compliance with COUNTY Client Grievances Procedures.
 - d. Financial records when determined necessary to protect public funds.
- 2. COUNTY shall provide CONTRACTOR with at least seventy-two (72) hours notice of such inspections or evaluations. Unannounced inspections, evaluations, or requests for information may be made in those situations where arrangement of an appointment beforehand is not possible or is inappropriate due to the nature of the inspection or evaluation.
- B. CONTRACTOR shall actively participate and cooperate with any person specified in subparagraph A. 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. CONTRACTOR shall not be subject to disallowances as the result of audits of the cost of

services.

D. 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 paragraph 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.
- E. 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.
- F. 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.

X. 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 & 9;
 - 2. State of California Health and Safety Code, Sections 1250 et seq.;
 - 3. State of California Penal Code (PC), Part 4, Title 1, Chapter 2, Article 2.5 relating to Child

2	4. California Code of Regulations (CCR), Title 9, Title 17, and Title 22;
3	5. Code of Federal Regulations (CFR), Title 42 and Title 45;
4	6. United States Code (U.S.C.A.) Title 42;
5	7. Federal Social Security Act, Title XVIII and Title XIX;
6	8. The Americans with Disabilities Act of 1990 (42 U.S.C.A., Chapter 126, 12101, et seq.);
7	9. The Clean Air Act (42 U.S.C.A. Section 114 and Sections 1857, et seq.);
8	10. The Federal Water Pollution Control Act (33 U.S.C.A. 84, Section 308 and
9	Sections 1251 et seq.);
10	11. 9. Federal single Audit Act of 1984 (31 U.S.C.A. 7501.70);
11	1210. Policies and procedures set forth in Mental Health Plan (MHP) Letters;
12	1311. Policies and procedures set forth in Department of Mental Health (DMH) Letters;
13	1412. Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule,), as it may
14	exist now, or be hereafter amended, and if applicable.
15	13. Office of Management and Budget (OMB) Circulars A-87, A-89, A-110, A122, and A-133.
16	C. ENFORCEMENT OF CHILD SUPPORT OBLIGATIONS
17	1. CONTRACTOR agrees to furnish to ADMINISTRATOR within thirty (30) calendar days
18	of the award of this Agreement:
19	a. In the case of an individual contractor, his/her name, date of birth, social security
20	number, and residence address;
21	b. In the case of a contractor doing business in a form other than as an individual, the
22	name, date of birth, social security number, and residence address of each individual who owns an
23	interest of ten percent (10%) or more in the contracting entity;
24	c. A certification that CONTRACTOR has fully complied with all applicable federal and
25	state reporting requirements regarding its employees;
26	d. A certification that CONTRACTOR has fully complied with all lawfully served Wage
27	and Earnings Assignment Orders and Notices of Assignment, and will continue to so comply.
28	2. Failure of CONTRACTOR to timely submit the data and/or certifications required by
29	subparagraphs 1.a., 1.b., 1.c., or 1.d. above, or to comply with all federal and state employee reporting
30	requirements for child support enforcement, or to comply with all lawfully served Wage and Earnings
31	Assignment Orders and Notices of Assignment, shall constitute a material breach of this Agreement; and
32	failure to cure such breach within sixty (60) calendar days of notice from COUNTY shall constitute
33	grounds for termination of this Agreement.
34	3. It is expressly understood that this data will be transmitted to governmental agencies
35	charged with the establishment and enforcement of child support orders, or as permitted by federal and/or state statute.
36 37	XI. LITERATURE
31	AI. <u>LITERATURE</u>

1 | Abuse Reporting;

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- A. Any literature, including educational and promotional materials, distributed by CONTRACTOR for purposes directly related to this Agreement shall indicate that CONTRACTOR's services are supported by federal, state and county funds, as appropriate. For the purposes of this Agreement, distribution of such literature shall include written materials as well as electronic media such as the Internet.
- B. Both parties agree that they will not use the name(s), symbols, trademarks or service marks, presently existing or later established, of the other party nor its employees in any advertisement, press release or publicity with reference to this Agreement without the prior written approval of the other party's authorized official. Requests for approval shall be made to ADMINISTRATOR or to CONTRACTOR's signatory of this Agreement. CONTRACTOR may represent itself as a contracted provider of Adult Mental Health Inpatient Services for the residents of Orange County as provided in subparagraph A above. ADMINISTRATOR may include reference to Adult Mental Health Inpatient Services provided by CONTRACTOR in informational materials relating to the continuum of care provided using federal, state and county funds.

XII. MAXIMUM OBLIGATION

The Aggregate Maximum Obligation of COUNTY for services provided in accordance with all agreements for Adult Mental Health Inpatient Services during Period One and Period Two of this Agreement are as specified on Page 3 in the Referenced Contract Provisions of this Agreement. This specific Agreement with CONTRACTOR is only one of several agreements to which this Aggregate Maximum Obligation applies. It therefore is understood by the parties that reimbursement to CONTRACTOR will be only a fraction of this Aggregate Maximum Obligation. This maximum Aggregate Maximum Obligation shall not apply to payments for specialized services provided for in subparagraph II.D Subparagraph III.E. of Exhibit A to this Agreement.

XIII. NONDISCRIMINATION

A. EMPLOYMENT

1. During the performance of this Agreement, CONTRACTOR shall ensure that applicants are employed, and that employees are treated during not unlawfully discriminate against any employee or applicant for employment, without regard to their because of his/her ethnic group identification, race, religion, ancestry, color, creed, sex, marital status, national origin, age (40 and over), sexual preference orientation, medical condition, or physical or mental disability. Such action CONTRACTOR shall include, but not be limited to warrant that the following: evaluation and treatment of employees and applicants for employment, upgrade 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

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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 preference 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 paragraph 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 preference 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.S.C.A. §2000d); the Age Discrimination Act of 1975 (42 U.S.C.A. §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 subparagraph B., "discrimination" includes, but is not limited to the following based on one or more of the factors identified above:
 - 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.

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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. 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. 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.

XIV. 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 on Page 3 in the Referenced Contract Provisions of this Agreement or as otherwise directed by ADMINISTRATOR;
 - 2. When faxed, transmission confirmed;
 - 3. When sent by electronic mail Email; or
 - 4. When accepted by U.S. Postal Service Express Mail, Federal Express, United Parcel

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Service, or other expedited delivery service.

- B. Termination Notices shall be addressed as specified on Page 3 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.

XV. 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 or served within the previous twelve (12) months; 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—or served within the previous twelve (12) months. 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 subparagraph A.

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above. 1 2 XVI. RECORDS MANAGEMENT AND MAINTENANCE 3 A. CONTRACTOR, its officers, agents, employees and subcontractors shall, throughout the term 4 of this Agreement, prepare, maintain and manage records appropriate to the services provided and in 5 accordance with this Agreement and all applicable requirements, which include, but are not limited to: 6 1. California Code of Regulation Title 22, Chapter 7, Article 6, §75055 Retention of records 7 by outpatient medical facilities. §§70751(c), 71551(c), 73543(a), 74731(a), 75055(a), 75343(a), and 8 77143(a). 9 State of California, Department of Alcohol and Drug Programs Reporting System (ASRS) 10 manual. 11 3. State of California, Department of Alcohol and Drug Programs Fiscal System (DPFS) 12 manual. 13 4. 45 CFR, HIPAA Privacy Rule (Designated Record Set). 14 15 5. Title 45 Code of Federal Regulations (CFR), §164.501; §164.524; §164.526; §164.530(c) 16 and (i). 17 B. CONTRACTOR shall implement and maintain administrative, technical and physical 18 safeguards to ensure the privacy of protected health information (PHI) and prevent the intentional or 19 unintentional use or disclosure of PHI in violation of the Health Insurance Portability and Accountability 20 Act of 1996 (HIPAA), federal and state regulations and/or COUNTY HIPAA Policies and Procedures 21 (P&P) (COUNTY HIPAA P&P 1-2). CONTRACTOR shall mitigate to the extent practicable, the 22 known harmful effect of any use or disclosure of protected health information made in violation of 23 federal or state regulations and/or COUNTY policies. 24 BCONTRACTOR's participant, client, and/or patient records shall be maintained in a 25 secure manner. CONTRACTOR shall maintain participant, client, and/or patient records and must 26 establish and implement written record management procedures. 27 D. CONTRACTOR shall ensure appropriate financial records related to cost reporting, 28 expenditure, revenue, billings, etc., are prepared and maintained accurately and appropriately. 29 EE. CONTRACTOR shall ensure all appropriate state and federal standards of documentation, 30 preparation, and confidentiality of records related to participant, client and/or patient records are met at 31 all times. 32 33 34 DF. CONTRACTOR shall be informed through this Agreement that ensure all HIPAA has 35 broadened the definition of medical records and identified this new record set as a Designated Record 36 Set (DRS).) requirements are met. HIPAA requires that clients, participants and/or patients be 37 20 of 25

1	provided the right to access or receive a copy of their DRS and/or request addendum to their records.
2	Title 45 CFR §164.501, defines DRS as a group of records maintained by or for a covered entity that is:
3	1. The medical records and billing records about individuals maintained by or for a covered
4	health care provider;
5	2. The enrollment, payment, claims adjudication, and case or medical management record
6	systems maintained by or for a health plan; or
7	3. Used, in whole or in part, by or for the covered entity to make decisions about individuals.
8	G. CONTRACTOR may retain participant, client, and/or patient documentation electronically in
9	accordance with the terms of this Agreement and common business practices. If documentation is
10	retained electronically, CONTRACTOR shall, in the event of an audit or site visit:
11	1. Have documents readily available within twenty-four (24) hour notice of a scheduled audit
12	or site visit.
13	2. Provide auditor or other authorized individuals access to documents via a computer
14	<u>terminal.</u>
15	3. Provide auditor or other authorized individuals a hardcopy printout of documents, if
16	<u>requested.</u>
17	<u>H</u> E. CONTRACTOR shall ensure all HIPAA DRS requirements are met. HIPAA requires that
18	clients, participants, patients, etc., be provided the right to access or receive a copy of their DRS and/or
19	request addendum to their records.
20	F. CONTRACTOR shall ensure compliance with requirements pertaining to the privacy and
21	security of personally identifiable information (hereinafter "Personally Identifiable Information (PII"))
22	and/or protected health information (hereinafter "Protected Health Information (PHI2") CONTRACTOR
23	shall, immediately upon discovery of a breach of privacy and/or security of PII and/or PHI by
24	CONTRACTOR, notify ADMINISTRATOR of such breach by telephone and email or facsimile.
25	GI. CONTRACTOR may be required to pay any costs associated with a breach of privacy and/or
26	security of PII and/or PHI, including but not limited to the costs of notification. CONTRACTOR shall
27	pay any and all such costs arising out of a breach of privacy and/or security of PII and/or PHI.
28	H. CONTRACTOR shall retain all financial records for a minimum of five (5) years from the
29	commencement of the contract, unless a longer period is required due to legal proceedings such as
30	litigations and/or settlement of claims.
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35	CONTRACTOR shall retain all participant, client, and/or patient medical records for seven
36	(7) years following discharge of the participant, client and/or patient, with the exception of non-
37	emancipated minors for whom records must be kept for at least one (1) year after such minors have

1	reached the age of eighteen (18) years, or for seven (7) years after the last date of service, whichever is
2	longer.
3	J K. CONTRACTOR shall retain all financial records for a minimum of seven (7) years from the
4	commencement of the contract, unless a longer period is required due to legal proceedings such as
5	litigations and/or settlement of claims.
6	L. CONTRACTOR shall make records pertaining to the costs of services, participant fees, charges,
7	billings, and revenues available at one (1) location within the limits of the County of Orange.
8	KM. If CONTRACTOR is unable to meet the record location criteria above, ADMINISTRATOR
9	may provide written approval to CONTRACTOR to maintain records in a single location, identified by
10	CONTRACTOR.
11	LN.CONTRACTOR may be required to retain all records involving litigation proceedings and
12	settlement of claims for a longer term which will be directed by the ADMINISTRATOR.
13	MO. CONTRACTOR shall notify ADMINISTRATOR of any Public Record Act (PRA) request
14	within twenty-four (24) hours. CONTRACTOR shall provide ADMINISTRATOR all information that
15	is requested by the PRA request.
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17	XVII. <u>REVENUE</u>
18	A. CLIENT FEES - CONTRACTOR shall charge, unless waived by ADMINISTRATOR, a fee to
19	clients to whom services, other than Medi-Cal Services, are provided pursuant to this Agreement, their
20	estates and responsible relatives, according to their ability to pay as determined by the State Department
21	of Mental Health's "Uniform Method of Determining Ability to Pay" (UMDAP) procedure, and in
22	accordance with Title 9 of the California Code of Regulations. Such fee shall not exceed the actual cost
23	of services provided. No client shall be denied services because of an inability to pay.
24	B. THIRD-PARTY REVENUE - CONTRACTOR shall make every reasonable effort to obtain all
25	available third-party reimbursement for which persons served hereunder may be eligible. Charges to
26	insurance carriers shall be on the basis of CONTRACTOR's usual and customary charges.
27	C. PROCEDURES - CONTRACTOR shall maintain internal financial controls which adequately
28	ensure proper billing and collection procedures. CONTRACTOR's procedures shall specifically provide
29	for the identification of delinquent accounts and methods for pursuing such accounts. CONTRACTOR
30	shall provide ADMINISTRATOR, monthly, a written report specifying the current status of fees which
31	are billed, collected, transferred to a collection agency or deemed by CONTRACTOR to be
32	uncollectible.
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34	#
35	XVIII. <u>SEVERABILITY</u>
36	If a court of competent jurisdiction declares any provision of this Agreement or application thereof
37	to any person or circumstances to be invalid or if any provision of this Agreement contravenes any

1	federal, state or county statute, ordinance, or regulation, the remaining provisions of this Agreement or
2	the application thereof shall remain valid, and the remaining provisions of this Agreement shall remain
3	in full force and effect, and to that extent the provisions of this Agreement are severable.
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5	XIX. STATUS OF CONTRACTOR SPECIAL PROVISIONS
6	A. CONTRACTOR shall not use the funds provided by means of this Agreement for the following
7	purposes:
8	1. Making cash payments to intended recipients of services through this Agreement.
9	2. Lobbying any governmental agency or official or making political contributions.
10	CONTRACTOR shall file all certifications and reports in compliance with this requirement pursuant to
11	Title 31, U.S.C.A, Section 1352 (e.g., limitation on use of appropriated funds to influence certain federal
12	contracting and financial transactions).
13	3. Supplanting current funding for existing services.
14	4. Fundraising.
15	5. Purchase of gifts, meals, entertainment, awards, or other personal expenses for
16	CONTRACTOR's staff, volunteers, or members of the Board of Directors.
17	6. Reimbursement of CONTRACTOR's members of the Board of Directors for expenses or
18	<u>services.</u>
19	7. Making personal loans to CONTRACTOR's staff, volunteers, interns, consultants,
20	subcontractors, and members of the Board of Directors or its designee or authorized agent, or making
21	salary advances or giving bonuses to CONTRACTOR's staff.
22	8. Paying an individual salary or compensation for services at a rate in excess of the current
23	Level I of the Executive Salary Schedule as published by the Federal Office of Personnel Management
24	(OPM). The OPM Executive Salary Schedule may be found at www.opm.gov.
25	B. Unless otherwise specified in advance and in writing by ADMINISTRATOR, CONTRACTOR
26	shall not use the funds provided by means of this Agreement for the following purposes:
27	1. Purchasing or improving land, including constructing or permanently improving any
28	<u>building or facility, except for tenant improvements.</u>
29	2. Purchasing major medical equipment.
30	3. Satisfying any expenditure of non-federal funds as a condition for the receipt of federal
31	<u>funds (matching).</u>
32	4. Purchase of gifts, meals, entertainment, awards, or other personal expenses for
33	CONTRACTOR's clients.
34	5. Funding travel or training (excluding mileage or parking).
35	6. Making phone calls outside of the local area unless documented to be directly for the
36	purpose of client care.
37	7. Payment for grant writing, consultants, certified public accounting, or legal services.

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8. 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.

XX. —STATUS OF CONTRACTOR

Each party 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. Each party is entirely responsible for compensating staff and consultants employed by that party. 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 either party's employees, agents, consultants, or subcontractors. Each party 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. Each party, its agents, employees, or subcontractors, shall not be entitled to any rights or privileges of the other party's employees and shall not be considered in any manner to be employees of the other party.

XX. XXI. TERM

A. This specific Agreement with CONTRACTOR is only one of several agreements to which the term of this Master Agreement applies. The term of this Master Agreement shall commence on July 1, 2011 and terminate on June 30, 2013; provided, however, that the specific term for CONTRACTOR shall be as specified on Page 3 of this Agreement, unless otherwise sooner terminated as provided in the Referenced Contract Provisions of this Agreement; and provided, however, CONTRACTOR further that the parties shall continue to be obligated to comply with the requirements and perform such the duties as would normally extend beyond specified in this term, including but Agreement. Such duties include, but are not limited to, obligations with respect to confidentiality, indemnification, audits, reporting, and accounting.

B. Any administrative duty or obligation to be performed pursuant to this Agreement on a weekend or holiday may be performed on the next regular business day.

XXII. XXI. TERMINATION

- A. Either party may terminate this Agreement, without cause, upon [thirty (30)] calendar days written notice given the other party.
- B. Unless otherwise specified in this Agreement, COUNTY may terminate this Agreement upon five (5) calendar days written notice if CONTRACTOR fails to perform any of the terms of this //
- Agreement. At ADMINISTRATOR's sole discretion, CONTRACTOR may be allowed up to thirty (30) calendar days for corrective action.
 - C. COUNTY may terminate this Agreement immediately, upon written notice, on the occurrence

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of any of the following events:

- 1. The loss by CONTRACTOR of legal capacity.
- 2. Cessation of services.
- 3. The delegation or assignment of CONTRACTOR's services, operation or administration to another entity without the prior written consent of COUNTY.
- 4. The neglect by any physician or licensed person employed by CONTRACTOR of any duty required pursuant to this Agreement.
- 5. The loss of accreditation or any license required by the Licenses and Laws paragraph of this Agreement.
- 6. The continued incapacity of any physician or licensed person to perform duties required pursuant to this Agreement.
- 7. Unethical conduct or malpractice by any physician or licensed person providing services pursuant to this Agreement; provided, however, COUNTY may waive this option if CONTRACTOR removes such physician or licensed person from serving persons treated or assisted pursuant to this Agreement.

D. CONTINGENT FUNDING

- 1. Any obligation of COUNTY under this Agreement is contingent upon the following:
- a. The continued availability of federal, state and county funds for reimbursement of COUNTY's expenditures, and
- b. Inclusion of sufficient funding for the services hereunder in the applicable budget $\underline{\underline{s}}$ approved by the Board of Supervisors.
- 2. In the event such funding is subsequently reduced or terminated, COUNTY may terminate or renegotiate this Agreement upon thirty (30) calendar days written notice given CONTRACTOR.—If COUNTY elects to renegotiate this Agreement due to reduced or terminated funding, CONTRACTOR shall not be obligated to accept the renegotiated terms.
- E. In the event this Agreement is terminated prior to the completion of the term as specified on Page 3 in the Referenced Contract Provisions of the this Agreement, ADMINISTRATOR may, at its sole discretion, reduce the Maximum Obligation of this Agreement in an amount consistent with the reduced term of the Agreement.
- F. After F. In the event this Agreement is terminated by either party, after receiving a Notice of Termination CONTRACTOR shall do the following:
- 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,

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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 their 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.
- G. The rights and remedies of COUNTY provided in this Termination paragraph shall not be exclusive, and are in addition to any other rights and remedies provided by law or under this Agreement.

XXIII. 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.

XXIV. 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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«LC_NAME» «LC_DBA»

HCA ASR 11-000379

1	IN WITNESS WHEREOF, the parties have	executed this Agreement, in the County of Orange,
2	State of California.	
3	«HOSPITAL_ORGANIZATION1»	
4	«HOSPITAL_BUSINESS_NAME1»	
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6	«UC_NAME»	
7	«UC_DBA»	
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19	COUNTY OF ORANGE	
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22	BY:	DATED:
23	HEALTH CARE AGENCY	
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26	APPROVED AS TO FORM	
27	OFFICE OF THE COUNTY COUNSEL	
28	ORANGE COUNTY, CALIFORNIA	
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30	DV.	DATED:
31	BY:	DAILD.
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3334		
35		are required: one (1) signature by the Chairman of the Board, the
36		ne Secretary, any Assistant Secretary, the Chief Financial Officer (1) authorized individual only, a copy of the corporate resolution
37		d said authorized individual to act on its behalf by his or her

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«LC_NAME» «LC_DBA»

EXHIBIT A 1 TO AGREEMENT WITH 2 «Hospital_Organization1» 3 «Hospital_Business_Name1» 4 «UC_NAME» 5 «UC_DBA» 6 JULY 1, 200911 THROUGH JUNE 30, 2011 13 7 8 I. DEFINITIONS 9 The parties agree to the following terms and definitions, and to those terms and definitions which 10 for convenience, are set forth elsewhere in this Agreement. 11 A. For payment purposes, "Adult Mental Health Inpatient Services" means all services required by 12 this Agreement except Computerized Tomography Scan Testing Services and Medical Services. 13 B. "Unit of Service" means one (1) calendar day during which CONTRACTOR provides all of the 14 Mental Health Inpatient Services described hereunder, which day shall begin at twelve o'clock midnight. 15 The number of billable Units of Service shall include the day of admission and exclude the day of 16 discharge unless admission and discharge occur on the same day. 17 C. "Psychiatric Inpatient Hospital Services" means services, including ancillary services, provided 18 in an acute care hospital for the care and treatment of an acute episode of mental illness. 19 D. "National Provider Identifier" (NPI) means the standard unique health identifier that was 20 adopted by the Secretary of Health and Human Services under Health Insurance Portability and 21 Accountability Act (HIPAA) of 1996 for health care providers. 22 E. "Notice of Privacy Practices (NPP)" is a document that notifies individuals of uses and 23 disclosures of PHI that may be made by or on behalf of the health plan or health care provided as set 24 forth in the Health Insurance Portability and Accountability Act of 1996 (HIPAA). 25 F. "Protected Health Information (PHI)" is individually identifiable health information usually 26 transmitted by electronic media, maintained in any medium as defined in the regulations, or for an entity 27 28 such as a health plan, transmitted or maintained in any other medium. It is created or received by a covered entity, and relates to the past, present or future physical or mental health or condition of an 29 individual, provision of health care to an individual. 30 G. "Health Care Services" means any preventive, diagnostic, treatment, or support services, 31 including professional services, which may be medically necessary to protect life, prevent significant 32 disability, and/or treat diseases, illnesses, or injuries in order to prevent a serious deterioration of health. 33 H. Serious medical conditions that require urgent health care services are defined as any 34 preventive, diagnostic, treatment, or supportive services, including professional services, which may be 35 medically necessary to protect life, present significant disability, and/or treat diseases, illnesses, or 36

injuries in order to prevent serious deterioration of health.

EXHIBIT A

1	II. <u>PAYMENTS</u>
2	A. Adult Mental Health Inpatient Services - COUNTY shall pay CONTRACTOR, at the following
3	rates; provided, however, the total of all payments to CONTRACTOR and all other contract providers of
4	Adult Mental Health Inpatient Services shall not exceed COUNTY's Aggregate Maximum Obligation
5	for Period One and Period Two as specified in the Referenced Contract Provisions of this Agreement.
6	1. CONTRACTOR shall bill ADMINISTRATOR at the rate of \$«RATE_1» per bed day for
7	the first «BEDS» bed days per period for a total amount of \$«TTL_AMT». Any bed days utilized over
8	and above «BEDS» bed days per period shall be billed at \$«RATE_2» per bed day. If at the end of each
9	period, the total amount billed is less than \$«TTL_AMT», CONTRACTOR shall bill
10	ADMINSTRATOR the difference between the total billings and \$«TTL_AMT».
11	2. Rates are inclusive of all psychiatric inpatient hospital services and shall constitute payment
12	in full for these services.
13	3. For clients who have coverage for physician and psychologist services (e.g., Medicare Part A),
14	reimbursement shall be limited to \$500 per day for Psychiatric Hospital Services only.
15	B. Physician/Psychologist Services - Hospital providers shall bill on behalf of the physician and/or
16	psychologist providing services to COUNTY clients and COUNTY shall include reimbursement for
17	physician and psychologist services in COUNTY's reimbursement to hospital providers. Hospital
18	providers shall be responsible for ensuring that this reimbursement is provided to the physician and/or
19	psychologist.
20	C. COUNTY will pay for ambulance or medical van transportation to and from designated mental
21	health or health facilities for COUNTY clients receiving services in accordance with the COUNTY's
22	Medical Transportation contract.
23	D. CONTRACTOR shall bill ADMINISTRATOR monthly in arrears. CONTRACTOR's billings
24	shall be on a form approved or supplied by ADMINISTRATOR and provide such information as is
25	required by ADMINISTRATOR. Billings are due the tenth (10th) working day of each month, and
26	payments to CONTRACTOR should be released by COUNTY no later than twenty-one (21) calendar
27	days after receipt of the correctly completed billing form.
28	1. Upon receipt of a correctly completed billing form and all required supporting
29	documentation, ADMINISTRATOR shall:
30	a. Approve the claim if medical necessity criteria are present for the requested
31	reimbursement period.
32	<u></u>
33	b. Deny the claim if medical necessity criteria are not present for the requested
34	reimbursement period.
35	2. CONTRACTOR may appeal ADMINISTRATOR's decision by sending a cover letter with
36	an explanation of CONTRACTOR's disagreement to ADMINISTRATOR within ninety (90) calendar
37	days of receiving the claim.

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1	3. ADMINISTRATOR shall submit to CONTRACTOR a written summary of the review and
2	rationale for each decision within sixty (60) calendar days of receiving the letter of appeal. The decision
3	of ADMINISTRATOR shall be final.
4	4. In the event that the appeal is overturned, ADMINISTRATOR shall coordinate with
5	CONTRACTOR regarding the submission of an adjusted invoice.
6	E. CONTRACTOR shall make a good faith effort to bill and collect to the full extent of coverage
7	those claims covered by all known third-party, primary, or other insurance or third party-payors
8	(including client fees) for hospital services provided.
9	F. If CONTRACTOR, during the term of this Agreement, identifies and receives reimbursement
10	from a third party, primary or other insurance claim for services reimbursed through this or any prior
11	Agreement, CONTRACTOR shall, within thirty (30) days of receipt, reimburse the COUNTY and
12	amount equal to the payment for the services paid by COUNTY to CONTRACTOR or the third party,
13	primary or other insurance claim payment, whichever is less.
14	G. If any reimbursement due the COUNTY is not paid by CONTRACTOR in accordance with
15	subparagraph F. above, the ADMINISTRATOR shall reduce CONTRACTOR's payment by an amount
16	not to exceed the amount to be reimbursed.
17	H. Following notification from ADMINISTRATOR that any client served under this contract has
18	become eligible for Medi-Cal, CONTRACTOR agrees to submit retroactive Medi-Cal Treatment
19	Authorization Requests (TARs) to ADMINISTRATOR for review. Further, CONTRACTOR agrees to
20	submit hospital claims to EDS and upon receipt of payment, will refund the COUNTY within sixty (60)
21	days for the total amount previously paid for bed day stay less payment made for professional services
22	during the Medi-cal eligibility period.
23	I. When Health Care Services are provided to any COUNTY client who does not have medical
24	insurance coverage, hospital providers may submit a claim to the COUNTY's Medical Services (MS)
25	program under the following scenarios:
26	1. The Adult Mental Health Inpatient (AMHI) client must be currently eligible for MS and the
27	service may have to be prior-approved by the MS Authorizations Department
28	2. If clinically appropriate, the AMHI client must be transferred to an acute medical bed
29	should the client need treatment related to a medical service that is covered under the scope of the MS
30	program.
31	3. If the AMHI client needs ancillary services related to a medical condition while housed in
32	the psychiatric unit, MS may cover the service.
33	J. OUTPATIENT ELECTRO-CONVULSIVE THERAPY - CONTRACTOR may cause to be
34	provided ECT services on an outpatient basis to COUNTY referred clients. Such requests are expected
35	to be infrequent and shall be reimbursed as follows:
36	1. Hospital Services: \$100 per visit
37	2. Physician Services: \$90 per visit

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- 3. Ancillary Services: As negotiated in writing between CONTRACTOR and COUNTY. 1 Any Other Services: As negotiated in writing between CONTRACTOR and COUNTY. 2 K. ADMINISTRATOR may withhold or delay any payment if CONTRACTOR fails to comply 3 with any provision of this Agreement. 4 L. CONTRACTOR shall not claim reimbursement for services provided beyond the expiration 5 and/or termination of this Agreement, except as may otherwise be provided under this Agreement. 6 7 **CONTRACTOR'S RESPONSIBILITIES** 8 AIII. SERVICES TO BE PROVIDED 9 **DESCRIPTION OF SERVICES** 10 CONTRACTOR shall provide acute psychiatric mental health inpatient services for adults with 11 co-occurring medical problems. Services shall be provided in an acute care hospital for the care and 12 treatment of an acute episode of mental illness. 13 B. FACILITY 14 1. CONTRACTOR shall provide, within a designated licensed locked acute unit, Adult 15 Mental Health Impatient Services Inpatient Services as defined within this Exhibit A to the Agreement. 16 2. CONTRACTOR shall provide services that include space for dining; occupational, group 17 therapy, activities therapy, day, group, and rooms, visitor rooms, and a seclusion room. 18 3. CONTRACTOR may provide acute psychiatric inpatient services at any other location 19 approved, in writing and in advance, by ADMINISTRATOR. 20 B C. ADMISSION CRITERIA AND PROCEDURES 21 1. Persons To Be Served – Services shall be provided to only those persons authorized by the 22 COUNTY's Outpatient Evaluation and Treatment Services Unit (ETS). Unless otherwise approved by 23 ADMINISTRATOR, such persons shall be experiencing acute psychiatric disorders and hospitalized 24 pursuant to W&I Code Sections 5150, 5250, 5300, 5350, 5358, and 6000, as now in existence or as 25 hereafter amended. At its sole discretion, COUNTY shall make referrals based upon the age of the 26 patient, clients aged eighteen (18) through sixty-four (64), the relative geographic proximity of the 27 hospital to the residence of the patient client's family, the availability of beds, and the appropriateness of 28 the treatment milieu. 29 30 // 31 Through COUNTY's ETS, COUNTY shall screen and determine appropriateness of 32 referrals for admission of COUNTY -patient to CONTRACTOR's locked unit. COUNTY shall, 33 at the time of admission, provide initial treatment authorization. CONTRACTOR shall not refuse 34 admissions from COUNTY's ETS. 35 b. COUNTY may conduct periodic treatment reviews at any time during the course of a 36 COUNTY patient client's hospitalization. 37
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- c. If COUNTY does not approve CONTRACTOR's request for extended treatment, CONTRACTOR shall be responsible for effecting the appropriate transfer and/or discharge of the COUNTY patient client. In any case, if CONTRACTOR elects to provide inpatient treatment without the express authorization of COUNTY, CONTRACTOR shall assume responsibility for the cost of such treatment.
- d. CONTRACTOR shall allow COUNTY to take part in Utilization Review and Quality Assurance activities if such attendance will not waive any privilege granted by law.
- e. Primary criteria for continued treatment within the acute inpatient setting shall include, but not be limited to, the medical necessity of hospitalization within a secure acute medical setting as reflected within the medical record. COUNTY's Director of Behavioral Health Services or designee may determine a COUNTY—patient client no longer meets this primary criteria and request that CONTRACTOR discharge the COUNTY patient client to a facility appropriate to for the COUNTY patient client's treatment requirements.
- 2. COUNTY is not financially responsible for the evaluation and treatment of unfunded psychiatric patient clients, unless they are referred by ETS or pre-authorized by ETS for admission.

<u>C</u>D. PSYCHIATRIC AND ANCILLARY SERVICES

- 1. CONTRACTOR shall provide acute hospital inpatient psychiatric and support services, designed to engage seriously mentally ill adults, including appropriate care those who are dually diagnosed, in a partnership to achieve the individual's wellness and treatment, recreational, recovery goals. Services shall be a recovery oriented, non-coercive and occupational focused on assisting clients to become more independent and self-sufficient as evidenced by discharges to lower levels of care. Services including groups, activities therapy, and other adjunctive therapy as specified herein to COUNTY patient client with mental, emotional, or behavioral disorders will be recovery based.
- 2. CONTRACTOR shall provide services in collaboration with COUNTY's Director of Behavioral Health Services or designee.
- 3. CONTRACTOR shall provide psychiatric treatment and support services in accordance with all applicable laws and regulations, including but not limited to:
- a. A psychiatric evaluation, within twenty-four (24) hours of admission, by a licensed psychiatrist which shall include a psychiatric history, diagnosis, and evaluation in accordance with the Diagnostic and Statistical Manual, Volume Four (DSM IV-TR).
- b. Medical history and physical examination of each COUNTY—patient client within twenty-four (24) hours of admission.
- c. Case staffing of each new COUNTY patient client within twenty-four (24) hours of admission.
- d. A log for the case staffing which list the COUNTY patient <u>client's</u> name, diagnosis, and estimated length of stay.

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- e. Individual treatment plan (ITP) for each COUNTY patient client.
- f. Psychiatric, psychological, and social services compatible with the ITP.
- g. Appropriate collateral therapy and interventions for each COUNTY patient client.
- h. Appropriate one-on-one COUNTY patient client -to-staff counseling as appropriate to the diagnosis and ITP.
- i. Documentation of COUNTY patient <u>client's</u> attendance/participation in collateral therapy including schedule of therapies, attendance log, and medical record progress notes.
 - j. Daily rounds and progress notes by psychiatrists on all COUNTY patient clients.
- k. Discharge planning, continuing care planning, and referral services. COUNTY shall provide such assistance, as COUNTY deems necessary, to assist providers' Social Services staff to initiate, develop and finalize discharge planning and necessary follow-up services.
- 1. For COUNTY patient clients who are being referred at discharge to a Skilled Nursing Facility (SNF), CONTRACTOR shall document in the medical record at least four (4) SNF contacts daily, Monday through Friday, until the patient client is either discharged or no longer requires SNF level of care.
- m. For COUNTY patient clients waiting for long term care placement, CONTRACTOR shall document in the medical record contact with the COUNTY's Long-Term Care (LTC) Unit at least once every seven (7) days until the patient client is either discharged or no longer requires long-term care.
- n. CONTRACTOR shall arrange a specific date and time for an aftercare appointment for any patient client referred at discharge to a COUNTY outpatient clinic. CONTRACTOR shall fax to the County outpatient clinic at the time of discharge the Allied Behavioral Care (ABC) Hospital Discharge Referral Form or the hospital's aftercare plan, the initial psychiatric evaluation, history and physical examination report, recent lab studies, medication list, and any medical consults.
- o. COUNTY patient clients shall be discharged with seven (7) days of medications. This includes psychiatric medications and other medications needed to treat concurrent medical conditions.
- p. On-call psychiatric and medical specialist coverage twenty-four (24) hours per day, seven (7) days per week.
- 4. CONTRACTOR shall provide all ancillary services necessary for the evaluation and treatment of psychiatric conditions, including:
- a. Initial laboratory services consistent with CONTRACTOR's usual and customary hospital admitting protocol.
- b. Additional laboratory and diagnostic services when necessary for the initiation and monitoring of psychiatric medication treatments.
 - c. Pharmaceutical services.
 - d. A conflict resolution process may be initiated by either party to this Agreement in the

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event of a disagreement between CONTRACTOR and ADMINISTRATOR regarding the appropriateness of proposed laboratory and/or diagnostic services. ADMINISTRATOR's designated psychiatrist will review said proposed services and render a decision that will be binding on both parties.

- 5. Testimony CONTRACTOR shall provide, or cause to be provided, expert witness testimony by appropriate mental health professionals in all legal proceedings required for the institutionalization, admission, or treatment of COUNTY patient clients. These services shall include, but not be limited to, writs of habeas corpus, Capacity (Reise) hearings, conservatorship, probable cause hearings, Court-ordered evaluation, and appeal and post-certification proceedings.
- a. COUNTY will represent CONTRACTOR, at COUNTY's sole cost and expense, in all legal proceedings required for conservatorship. CONTRACTOR shall cooperate with COUNTY in all such proceedings.
- b. COUNTY will provide hearing officers for probable cause hearings for COUNTY patient clients only.

<u>DE</u>. MEDICAL <u>AND ECT</u> SERVICES

- 1. CONTRACTOR shall provide or cause to be provided all health care services deemed appropriate according to usual and customary hospital practices without regard for payer status. This includes physician or other professional services required by COUNTY patient clients and escort of such COUNTY patient clients to and from medical treatment. A conflict resolution process may be initiated by either party to this Agreement in the event of a disagreement regarding the appropriateness of rendering urgent health care services. ADMINISTRATOR's designated psychiatrist will review proposed medical services and render a decision that will be binding on both parties.
- 2. INPATIENT ELECTRO-CONVULSIVE THERAPY CONTRACTOR may cause to be provided Electro-Convulsive Therapy, herein referred to as "ECT" to COUNTY referred patient clients patient clients with the prior approval of COUNTY. Such approval shall be documented in the COUNTY patclient's medical record. Such requests are expected to be infrequent.
- 3. OUTPATIENT ELECTRO CONVULSIVE THERAPY CONTRACTOR may cause to be provided ECT services on an outpatient basis to COUNTY patient clients. Such requests are expected to be infrequent. patient client
- 4. COMPUTERIZED TOMOGRAPHY SCAN TESTING (CT) CONTRACTOR may, as part of the diagnosis and evaluation of a COUNTY patient client's psychiatric condition, authorize necessary CT_scanning. CONTRACTOR shall receive approval of ADMINISTRATOR before such testing, and document this approval in the patient client's medical record. The parties expect that testing will be infrequent.
- 5. SPECIALIZED SERVICES Upon request by COUNTY, CONTRACTOR shall provide or cause to be provided medical services or diagnostic testing services to persons referred by COUNTY including, but not limited to, persons referred by COUNTY from Metropolitan State Hospital. Reimbursement for such services shall be agreed upon, in writing, by the CONTRACTOR and

7 of 11 EXHIBIT A ADMINISTRATOR prior to provision of services by the hospital.

- E. SUPPORT F. ADDITIONAL SERVICES CONTRACTOR shall provide those services required of general acute care hospitals which shall at a minimum include, but not be limited to, the following:
- 1. Direct Services including a therapeutic milieu, room and dietetic services, nursing services, including drug administration and patient client care; and a patient client activity program including OT/RT services.
- 2. Support Services including housekeeping, laundry, maintenance, medical records, and drug order processing services.
- 3. In-Service Training Provide formalized in-service training to staff that focuses on subjects that increase their expertise in mental health services and ability to manage and serve patient clients.
- 4. Program Description Maintain a COUNTY-approved written description of the inpatient psychiatric program, which-description shall include goals, objectives, philosophy, and activities which reflect the active involvement of nursing personnel in all aspects of the inpatient therapeutic milieu.
- FG. CONTRACTOR shall make its best efforts to provide services pursuant to this Agreement in a manner that is culturally and linguistically appropriate for the population(s) served. CONTRACTOR shall be in compliance with the current Joint Commission requirements related to the provision of Culturally and Linguistically Appropriate Health Care. If CONTRACTOR is not accredited by the Joint Commission, CONTRACTOR shall maintain documentation 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; copies of literature in multiple languages and formats, as appropriate; and descriptions of measures taken to enhance accessibility for, and sensitivity to, persons who are physically challenged.
- CONTRACTOR shall not conduct any proselytizing activities, regardless of funding sources, with respect to any person who has been referred to CONTRACTOR by COUNTY under the terms of this Agreement. Further, CONTRACTOR agrees that the funds provided hereunder shall not be used to promote, directly or indirectly, any religion, religious creed or cult, denomination or sectarian institution, or religious belief.

HI. CLINICAL CARE STANDARDS

- 1. CONTRACTOR shall develop and maintain a plan for Quality Improvement, the overall goal of which is the maintenance of high quality patient client care and effective utilization of services offered. This plan shall include utilization review, peer review, and medication monitoring as mandated by the State Department of Mental Health. CONTRACTOR shall adhere to the standards set forth in Title 9 of the California Code of Regulations.
- 2. CONTRACTOR shall allow ADMINISTRATOR to take part in utilization review activities.

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I.J. STAFFING

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- 1. For the unit in which services are provided pursuant to this Agreement, CONTRACTOR shall provide clinical staffing as required by Title 9, CCR, Section 663 as it exists now or may hereafter be amended or changed.
- 2. CONTRACTOR shall provide administrative and clerical staff to support the above-mentioned staffing and the services provided pursuant to this Agreement.

K. NPI – All HIPAA covered healthcare providers, individuals and organizations must obtain an NPI for use to identify themselves in HIPAA standard transactions. The NPI is assigned to individuals for life.

K.L. NPP — CONTRACTOR shall provide, upon request, the NPP for the County of Orange, as the Mental Health Plan, to any individual who received services under this Agreement.

IV. COUNTY'S RESPONSIBILITIES

A. ADMINISTRATOR shall:

- 1. Assist CONTRACTOR's social services staff to initiate, develop, and finalize discharge planning, necessary follow-up services, and placement as necessary.
- 2. Conduct a financial evaluation of each patient client, including application of Uniform Method for Determining Ability to Pay (UMDAP) to patient clients.
- 3. Provide necessary patient client transportation between the facility and another mental health facility or a health facility in accordance with COUNTY's Medical Transportation Contract.
 - 4. Review the quantity and quality of services provided pursuant to this Agreement.
- 5. Review CONTRACTOR's procedures for Utilization Review, Peer Review, and Medication Monitoring of patient clients who are provided services pursuant to this Agreement.
- B. COUNTY may choose to provide the psychiatric services set forth in Section II, Paragraph.C.3. of this Exhibit A. COUNTY psychiatrists providing such services at CONTRACTOR's facility shall file an application with CONTRACTOR for staff membership, meet the requirements set by CONTRACTOR for its own medical staff, adhere to all necessary rules and regulations of CONTRACTOR, and stipulate in writing, on a case-by-case basis, that the psychiatrist is assuming responsibilities set forth in Section HIII of Exhibit A to this Agreement.

V. ISSUE RESOLUTION

For resolution of issues between CONTRACTOR and COUNTY with respect to the implementation and operation of this Agreement or COUNTY's policies and procedures regarding services described herein, the following sequential steps shall apply:

A. CONTRACTOR shall routinely utilize all informal communication processes and methods with COUNTY program and administrative staff including, but not limited to, telephone contact, electronic mail (e-mail), facsimile machine (FAX), written correspondence and meetings, to resolve any issues or problems regarding the implementation and operation of this Agreement or COUNTY's policies and

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procedures regarding services described herein.

- B. If the parties are unable to resolve the issue, CONTRACTOR shall give written notice to ADMINISTRATOR setting forth in specific terms the existence and nature of any unresolved matter or concern related to the purposes and obligations of this Agreement. ADMINISTRATOR shall have fifteen (15) calendar days following such notice to obtain resolution of any issue(s) identified in this manner, provided, however, by mutual consent this period of time may be extended to thirty (30) calendar days.
- C. If the parties are unable to obtain resolution of the issue, they shall submit a joint written Statement describing the facts of the issue, within thirty (30) calendar days after the written notice described above to COUNTY's Director of Behavioral Health Care for final resolution.
- D. The rights and remedies provided by this paragraph are in addition to those provided by law to either party.

VI. PATIENT'S RIGHTS

- A. CONTRACTOR shall post the current California Department of Mental Health Patients' Rights poster as well as the Orange County HCA Mental Health Plan Complaint and Grievance poster in locations readily available to patient clients and staff and have complaint forms and complaint envelopes readily accessible to patient clients
- B. In addition to those processes provided by COUNTY, CONTRACTOR shall have complaint resolution and grievance processes approved by COUNTY, to which the beneficiary shall have access.
- 1. CONTRACTOR's complaint resolution processes shall emphasize informal, easily understood steps designed to resolve disputes as quickly and simply as possible.
- 2. CONTRACTOR's complaint resolution and grievance processes shall incorporate COUNTY's grievance, patients' rights, and utilization management guidelines and procedures.
- C. Complaint Resolution and Grievance Process COUNTY shall implement complaint and grievance procedures that shall include the following components:

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- 1. Complaint Resolution. This process will specifically address and attempt to resolve client complaints and concerns at CONTRACTOR's facility. Examples of such complaints may include dissatisfaction with services or with the quality of care, or dissatisfaction with the condition of the physical plant.
- 2. Formal Grievance. When the client's complaint is not resolved at CONTRACTOR's facility and the client or client representative requests it, the complaint becomes a formal grievance. The request is made to County Mental Health Inpatient Services and represents the first step in the formal grievance process.

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- 3. *Title IX Rights Advocacy*. This process may be initiated by a client who registers a statutory rights violation or a denial or abuse complaint with the County Patients' Rights Office. The Patients' Rights office shall investigate the complaint, and Title IX grievance procedures shall apply, which involve the County Behavioral Health Services Director and the State Patients' Rights Office.
- D. The parties agree that clients have recourse to initiate a complaint to CONTRACTOR, appeal to the County Patients' Rights Office, file a formal grievance, and file a Title IX complaint. The Patients' Advocate shall advise and assist the client, investigate the cause of the complaint or grievance, and attempt to resolve the matter
- E. No provision of this Agreement shall be construed as to replacing or conflicting with the duties of County Patients' Rights Office pursuant to Welfare and Institutions Code Section 5500.

VI. PAYMENTS

- A. Adult Mental Health Inpatient Services—COUNTY shall pay CONTRACTOR, at the following rates; provided, however, the total of all payments to CONTRACTOR and all other contract providers of Adult Mental Health Inpatient Services shall not exceed COUNTY's Aggregate Maximum Obligation for Period One and Two as specified on Page 3 of this Agreement.
- 1. If CONTRACTOR is Western Medical Center Anaheim, CONTRACTOR will be reimbursed a total amount of \$2,295,850 for each period. If the number of beds utilized by ADMINISTRATOR is more than 3,650 beds for each period, CONTRACTOR shall be reimbursed the amount of \$640 per day for each bed over the 3,650 beds. CONTRACTOR shall bill ADMINISTRATOR, at the rate of \$629 per bed day for the first 3,650 bed days per period. Any bed days utilized over and above 3,650 bed days per period shall be billed at \$640 per bed day. If at the end of each period, the total billing is less than \$2,295,850, CONTRACTOR shall bill ADMINSTRATOR the difference between the total billings and \$2,295,850.
- 2. If CONTRACTOR is College Hospital Costa Mesa, Inc., CONTRACTOR will be reimbursed a total amount of \$459,170 for each period. If the number of beds utilized by ADMINISTRATOR is more than 730 beds for each period, CONTRACTOR shall be reimbursed the amount of \$640 per day for each bed utilized over 730 beds. CONTRACTOR shall bill ADMINISTRATOR, at the rate of \$629 per bed day for the first 730 bed days per period. Any bed days utilized over and above 730 bed days per period shall be billed at \$640 per bed day. If at the end of each period, the total billing is less than \$459,170, CONTRACTOR shall bill AMINISTRATOR the difference between the total billings and \$459,170.
- 3. All other CONTRACTORS providing Mental Health Psychiatric Inpatient Hospital Services under the term of this Agreement will be reimbursed at \$629 per bed day.
- 4. Rates are inclusive of all psychiatric inpatient hospital services and shall constitute payment in full for these services.
 - a. For patients who have coverage for physician and psychologist services (e.g., Medicare

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1	Part A), reimbursement shall be limited to \$500 per day for Psychiatric Hospital Services only.
2	B. Physician/Psychologist Services - Hospital providers shall bill on behalf of the physician and/or
3	psychologist providing services to COUNTY patients and COUNTY shall include reimbursement for
4	physician and psychologist services in COUNTY's reimbursement to hospital providers. Hospital
5	providers shall be responsible for ensuring that this reimbursement is provided to the physician and/or
6	psychologist.
7	C. COUNTY will pay for ambulance or medical van transportation to and from designated mental
8	health or health facilities for COUNTY patients receiving services in accordance with the COUNTY's
9	Medical Transportation contract.
10	— D. CONTRACTOR shall bill ADMINISTRATOR monthly in arrears. CONTRACTOR's billings
11	shall be on a form approved or supplied by ADMINISTRATOR and provide such information as is
12	required by ADMINISTRATOR. Billings are due the tenth (10th) working day of each month, and
13	payments to CONTRACTOR should be released by COUNTY no later than twenty one (21) calendar
14	days after receipt of the correctly completed billing form.
15	1. Upon receipt of a correctly completed billing form and all required supporting
16	documentation, ADMINISTRATOR shall:
17	a. Approve the claim if medical necessity criteria are present for the requested
18	reimbursement period.
19	b. Deny the claim if medical necessity criteria are not present for the requested
20	reimbursement period.
21	2. CONTRACTOR may appeal ADMINISTRATOR's decision by sending a cover letter with
22	an explanation of CONTRACTOR's disagreement to ADMINISTRATOR within ninety (90) calendar
23	days of receiving the claim.
24	3. ADMINISTRATOR shall submit to CONTRACTOR a written summary of the review and
25	rationale for each decision within sixty (60) calendar days of receiving the letter of appeal. The decision
26	of ADMINISTRATOR shall be final.
27	4. In the event that the appeal is overturned, ADMINISTRATOR shall coordinate with
28	CONTRACTOR regarding the submission of an adjusted invoice.
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30	E. CONTRACTOR shall make a good faith effort to bill and collect to the full extent of coverage
31	those claims covered by all known third-party, primary, or other insurance or third party-payors
32	(including client fees) for hospital services provided.
33	F. If CONTRACTOR, during the term of this Agreement, identifies and receives reimbursement
34	from a third party, primary or other insurance claim for services reimbursed through this or any prior
35	Agreement, CONTRACTOR shall, within thirty (30) days of receipt, reimburse the COUNTY an
36	amount equal to the payment for the services paid by COUNTY to CONTRACTOR or the third party,
37	primary or other insurance claim payment, whichever is less.

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1	G. If any reimbursement due the COUNTY is not paid by CONTRACTOR in accordance with
2	subparagraph F. above, the ADMINISTRATOR shall reduce CONTRACTOR's payment by an amount
3	not to exceed the amount to be reimbursed.
4	H. Following notification from ADMINISTRATOR that any client served under this contract has
5	become eligible for Medi-Cal, CONTRACTOR agrees to submit retroactive Medi-Cal Treatment
6	Authorization Requests (TARs) to ADMINISTRATOR for review. Further, CONTRACTOR agrees to
7	submit hospital claims to EDS and upon receipt of payment, will make best efforts to refund the
8	COUNTY within sixty (60) days for the total amount previously paid for bed day stay less payment
9	made for professional services during the Medi cal eligibility period.
10	I. HEALTH CARE SERVICES CONTRACTOR shall provide or cause to be provided any
11	Health Care Services with COUNTY approval, including physician or other professional services,
12	required by COUNTY patients and escort such COUNTY patients to and from medical treatment.
13	"Health Care Services" means any preventive, diagnostic, treatment, or supportive services, including
14	professional services, which may be medically necessary to protect life, prevent significant disability,
15	and/or treat diseases, illnesses, or injuries in order to prevent a serious deterioration of health.
16	1. When health care services are provided to any COUNTY patients who do not have
17	Medi-Cal insurance coverage, CONTRACTOR shall notify COUNTY Mental Health Inpatient Services
18	of the request for medical services and provide supporting documentation substantiating the clinical
19	need for such services. Physician providers shall first bill the cost of such services to COUNTY's
20	Medical Services for Indigents (MSI) program. If a denial of payment is received from MSI, the hospital
21	may bill to COUNTY, on behalf of the physician, for the services rendered. COUNTY shall reimburse
22	physician services at a rate equivalent to Medi-Cal rates for such services.
23	2. When Health Care Services are provided to any COUNTY patient who does not have
24	medical insurance coverage, hospital providers shall bill the cost of such services to COUNTY's
25	Medical Services for Indigents (MSI) program.
26	J. OUTPATIENT ELECTRO CONVULSIVE THERAPY CONTRACTOR may cause to be
27	provided ECT services on an outpatient basis to COUNTY referred patients. Such requests are expected
28	to be infrequent and shall be reimbursed as follows:
29	1. Hospital Services: \$100 per visit
30	2. Physician Services: \$90 per visit
31	3. Ancillary Services: As negotiated in writing between CONTRACTOR and COUNTY.
32	4. Any Other Services: As negotiated in writing between CONTRACTOR and COUNTY.
33	K. ADMINISTRATOR may withhold or delay any payment if CONTRACTOR fails to comply
34	with any provision of this Agreement.
35	L. CONTRACTOR shall not claim reimbursement for services provided beyond the expiration
36	and/or termination of this Agreement, except as may otherwise be provided under this Agreement.
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1	VII. <u>REPORTS</u>
2	ADMINISTRATOR may request reasonable reports of CONTRACTOR in order to determine the
3	quality and nature of services provided hereunder. ADMINISTRATOR will be specific as to the nature
4	of information requested, and allow thirty (30) calendar days for CONTRACTOR to respond.
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