AGREEMENT FOR PROVISION OF 1 OUTPATIENT SERVICES FOR CHILDREN AND TRANSITIONAL AGE YOUTH 2 WITH CO-OCCURRING MENTAL HEALTH AND SUBSTANCE ABUSE DISORDERS 3 **BETWEEN** 4 COUNTY OF ORANGE 5 AND 6 SOCIAL MODEL RECOVERY SYSTEMS, INC. 7 JULY 1, 20162018 THROUGH JUNE 30, 20182019 8 9 THIS AGREEMENT entered into this 1st day of July, 2016 which 2018 (effective date is 10 enumerated for purposes of reference only,), is by and between the COUNTY OF ORANGE, a political 11 subdivision of State of California (COUNTY) and SOCIAL MODEL RECOVERY SYSTEMS, INC., a 12 California nonprofit corporation (CONTRACTOR). COUNTY and CONTRACTOR may sometimes be 13 referred to herein individually as "Party" or collectively as "Parties." This Agreement shall be 14 15 administered by the County of Orange Health Care Agency (ADMINISTRATOR). 16 WITNESSETH: 17 18 19 WHEREAS, COUNTY wishes to contract with CONTRACTOR for the provision of Outpatient Services for Children and Transitional Age Youth with Co-Occurring Mental Health and Substance 20 Abuse Disorders described herein to the residents of Orange County; and 21 WHEREAS, CONTRACTOR is agreeable to the rendering of such services on the terms and 22 conditions hereinafter set forth: 23 NOW, THEREFORE, IT IS MUTUALLY AGREED AS FOLLOWS: 24 NOW, THEREFORE, in consideration of the mutual covenants, benefits, and promises contained 25 herein, COUNTY and CONTRACTOR do hereby agree as follows: 26 27 28 29 30 31 32 33 34 35 36 37

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Attachment B

1	XXXII. <u>XX</u>	XXI. Signature Page	40
2		TABLE OF CONTENTS	
3			5 .4 G 5
4	_	EXHIBIT A	PAGE
5		Common Terms and Definitions	
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9	11	Services	
10	VI.	Staffing	18 25
11			
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1	REFERENCED CONTRACT PROVISIONS
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3	Term: July 1, 2016 through June 30, 2018 2019
4	Period One means the period from July 1, 2016 through June 30, 2017
5	Period Two means the period from July 1, 2017 through June 30, 2018
6	
7	Aggregate
8	Maximum Obligation: \$503,370
9	Period One Maximum Obligation: \$ 457,194
10	Period Two Maximum Obligation: 457,194
11	TOTAL MAXIMUM OBLIGATION \$ 914,388
12	
13	
14	Basis for Reimbursement: Actual Cost
15	
16	Payment Method: Monthly in Arrears
17	CONTRACTOR DUNS Number: 62-578-7742
18	CONTRACTOR DUNS Number: 02-378-7742
19 20	CONTRACTOR TAX ID Number: 95-4079133
20 21	CONTRACTOR TAX ID Number: 35-4077133
22	Notices to COUNTY and CONTRACTOR:
23	Thouses to ederly I that editification
24	COUNTY: County of Orange
25	Health Care Agency
26	Contract Services
27	405 West 5th Street, Suite 600
28	Santa Ana, CA 92701-4637
29	
30	CONTRACTOR: Social Model Recovery Systems, Inc.
31	223 E. Rowland Street
32	——————————————————————————————————————
33	Jim O'Connell, CEO
34	- Bruce Boardman, Chief Executive Officer
35	<u>bruceb</u> @socialmodel.com
36	
37	

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1	I. <u>ACRONYMS</u>		
2	The following standard definitions are for reference purposes only and may or may not apply in		
3	their entirety throughout this Agreement:		
4	A. Alcoholics Anonymous		
5	B. ADAS Alcohol and Drug Abuse Services		
6	C. B. AES Advanced Encryption Standards Standard		
7	D. AFLP Adolescent Family Life Program		
8	E. ASAM PPC C. ARRA American Society of Addiction Medicine Patient		
9	Placement Criteria		
10	F. Recovery ASRS Alcohol and Reinvestment Act Drug Programs Reporting System		
11	G. D. BHS Behavioral Health Services		
12	H. CalOMS California Outcomes Measurement System		
13	I. CAP Corrective Action Plan		
14	J. E. CCC California Civil Code		
15	K. CCLD (California) Community Care Licensing Division		
16	L. F. CCR California Code of Regulations		
17	M. CDCR California Department of Corrections and Rehabilitation		
18	N. CDSS California Department of Social Services		
19	O. CESI Client Evaluation of Self at Intake		
20	P. CEST Client Evaluation of Self and Treatment		
21	Q. G. CEO County Executive Office U. CED. County Executive Office		
22	H. CFR Code of Federal Regulations R. CHHS California Health and Human Services Agency		
23	R. CHHS California Health and Human Services Agency S. L. CHPP COUNTY HIPAA Policies and Procedures		
24 25	T. CHS Correctional Health Services		
26	U. CIPA California Information Practices Act		
27	V. J. — CMPPA — Computer Matching and Privacy Protection Act		
28	K. W. COI Certificate of Insurance		
29	X. CSI Client and Services Information		
30	Y. CSW Clinical Social Worker		
31	Z. CYBHS Children and Youth Behavioral Health Services		
32	AA. DCR Data Collection and Reporting		
33	AB. DD Dually Diagnosed		
34	AC. L. DHCS California Department of Health Care Services		
35	AD. D/MC Drug/Medi-Cal		
36	AE. DRC Probation's Day Reporting Center		
37	AF. M. DoD US Department of Defense		

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1	—N.—DRS	Designated Record Set
2	AG. O. DSH	Direct Service Hour
3	AH. DSM-V	Diagnostic and Statistical Manual of Mental Disorders. 5th Edition
4	AI. EBP	Evidence-Based Practice
5	AJ. EHR	Electronic Health Records
6	AK. ePHI	Electronic Protected Health Information
7	AL. EPSDT	Early and Periodic Screening, Diagnosis, and Treatment
8	AM. FTE	Full Time Equivalent
9	AN. P. GAAP	Generally Accepted Accounting Principles
10	— <u>Q.</u> <u>AO.</u> HCA	County of Orange Health Care Agency
11	R. HHS He	alth and Human Services
12 13	— <mark>SAP</mark> . HIPAA	Health Insurance Portability and Accountability Act of 1996, Public -Law 104-191
14	AQ. THITECH Act	Health Information Technology for Economic and Clinical Health
15		Act, Public Law 111-005
16	AR. HRSA	Federal Health Resources and Services Administration
17	AS. HSC	California Health and Safety Code
18	AT. IBNR	Incurred But Not Reported
19	AU. ID	Identification
20	AV. IMD	Institute for Mental Disease
21	AW. IOM	Institute of Medicine
22	AX U. IEA	Information Exchange Agreement
23	── <mark>V</mark> . IRIS	Integrated Records and Information System
24	W. ISO	Insurance AY. ITC Indigent Trauma Care
25	AZ. LCSW	Licensed Clinical Social Worker
26	BA. LGBTQI	Lesbian, Gay, Bisexual, Transgender, Questioning, and Intersex
27	BB. LPS	Lanterman/Petris/Short (Act)
28	BC. LPT	Licensed Psychiatric Technician
29	BD. MAT	Medication Assisted Treatment
30	BE. MEDS	Medi-Cal Eligibility Determination System
31	BF. MFT	Marriage and Family Therapist
32	BG. MH	Mental Health
33	BH. MHIS	Mental Health Inpatient Services Office
34	X. BI. MIHS	Medical and Institutional Health Services
35	BJ. MHP	Mental Health Plan
36	BK. MHRC	Mental Health Rehabilitation Centers
37	BL. MHS	Mental Health Specialist

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1	BM. MHSA	Mental Health Services Act
2	BN. MORS	Milestones of Recovery Scale
3	BO. MS	Mandatory Supervision
4	BP. MSN	Medical Safety Net
5	BQ. MTP	Master Treatment Plan
6	BR. NA	Narcotics Anonymous
7	BS. NIATx	Network Improvement of Addiction Treatment
8	BT. NIH	National Institutes of Health
9	BU. NIST	National Institute of Standards and Technology
10	BV. NOA	Notice of Action
11	BW. Y. NI	PI National Provider Identifier
12	<u>BX.</u> — Z. — NI	PP Notice of Privacy Practices
13	AA. OIG	BY. OCJS Orange County Jail System
14	BZ. OCPD	Orange County Probation Department
15	CA. OCR	Federal Office of Inspector General for Civil Rights
16	AB. CB. OC	CSD Orange County Sheriff's Department
17	CC. OMB	Federal Office of Management and Budget
18	CD. P&P	Policy and Procedure
19	CE. PAR	Prior Authorization Request
20	CF. PBM	Pharmaceutical Benefits AC. OPM Federal Office of
21	Personnel Management	
22	CG. AD. PC	
23	CH. PCP	Primary Care Provider
24	CI. PCS	Post-Release Community Supervision
25	CJ. AE.PEI	Prevention and Early Intervention
26	— AF. PHI	Protected Health Information
27	CK. AG. PI	
28	CL. AH. PI	-
29	CM. QI	Quality Improvement
30	CN. RN	Registered Nurse
31	CO. SAPTBG	Substance Abuse Prevention and Treatment Block Grant
32	CP. SD/MC	Short-Doyle Medi-Cal
33	CQ. SIR	Self-Insured Retention
34	CR. SMA	Statewide Maximum Allowable (rate)
35	CS. SSA	County of Orange Social Services Agency
36	CT. SUD	Substance Use Disorder Trackment Authorization Request
37	CU. TAR	Treatment Authorization Request

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1	CV. TAY	Transitional Age Youth
2	CW. TUPP	Tobacco Use Prevention Program
3	CX. UMDAP	Uniform Method of Determining Ability to Pay
4	CY. UOS	Units of Service
5	CZ. AI.	P&P Policy and Procedure
6	AJ. PRA	Public Record Act
7	AK. SFTS	Safe from the Start
8	AL. TOT	Train the Trainer
9	-AM. HITECH Act	Health Information Technology for Economic and Clinical Health Act, Public
10		Law 111 005
11	—AN. USC	United States Code
12	AO VPE	Violence Prevention Education
13	AP. WIC	State of DA. W&IC California Welfare and Institutions
14	Code	
15		

II. <u>ALTERATION OF TERMS</u>

- A. This Agreement, together with Exhibits A, B, and C attached hereto and incorporated herein, fully expresses the complete understanding of COUNTY and CONTRACTOR with respect to the subject matter of this Agreement.
- B. Unless otherwise expressly stated in this Agreement, no addition to, or alteration of the terms of this Agreement or any Exhibits, whether written or verbal, made by the parties, their officers, employees or agents shall be valid unless made in the form of a written amendment to this Agreement, which has been formally approved and executed by both parties.

III. ASSIGNMENT OF DEBTS

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

IV. COMPLIANCE

A. <u>COMPLIANCE PROGRAM</u> - 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.

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SOCIAL MODEL RECOVERY SYSTEMS, INC.

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- 1. ADMINISTRATOR shall provide CONTRACTOR with a copy of the relevant HCA policies and procedures relating to HCA's ADMINISTRATOR's Compliance Program, HCA's Code of Conduct and <u>access to General Compliance and Annual Provider Trainings</u>.
- 2. CONTRACTOR has the option to adhere to HCA's Compliance Program and Code of Conduct or establish provide ADMINISTRATOR with proof of its own, provided Compliance Program, Code of Conduct and any Compliance related policies and procedures. CONTRACTOR's Compliance Program and Code of Conduct have been verified to and any related policies and procedures shall be verified by ADMINISTRATOR's Compliance Department to ensure they include all required elements by ADMINISTRATOR's Compliance Officer as described in subparagraphs below. this Paragraph IV (COMPLIANCE). These elements include:
 - a. Designation of a Compliance Officer and/or compliance staff.
 - Written standards, policies and/or procedures.
 - c. Compliance related training and/or education program and proof of completion.
 - d. Communication methods for reporting concerns to the Compliance Officer.
 - e. Methodology for conducting internal monitoring and auditing.
 - Methodology for detecting and correcting offenses.
 - g. Methodology/Procedure for enforcing disciplinary standards.
- 3. If CONTRACTOR elects to adheredoes not provide proof of its own Compliance program to HCA's ADMINISTRATOR, CONTRACTOR shall acknowledge to comply with ADMINISTRATOR's Compliance Program and Code of Conduct; the CONTRACTOR shall submit to the ADMINISTRATOR within thirty (30) calendar days of award execution of this Agreement a signed acknowledgement that CONTRACTOR shall comply with HCA's ADMINISTRATOR's Compliance Program and Code of Conduct.
- 4. If CONTRACTOR elects to have its own Compliance Program-and, Code of Conduct then it shall and any Compliance related policies and procedures review by ADMINISTRATOR, then CONTRACTOR shall submit a copy of its Compliance Compliance Program, Codecode of Conduct and all relevant policies and procedures to ADMINISTRATOR within thirty (30) calendar days of awardexecution of this Agreement. ADMINISTRATOR's Compliance Officer, or designee, shall review said documents within a reasonable time, which shall not exceed forty five (45) calendar days, and determine if CONTRACTOR's Compliance Program and Code of Conduct contains all required elements. CONTRACTOR shall take necessary action to meet said standards or shall be asked to acknowledge and agree to HCA's Compliance Program and Code of Conduct if the CONTRACTOR's Compliance Program and Code of Conduct does not proposed compliance program and code of conduct contain all required elements, to the ADMINISTRATOR's satisfaction as consistent with the HCA's Compliance Program and Code of Conduct. ADMINISTRATOR shall inform CONTRACTOR of any missing required elements and CONTRACTOR shall revise its compliance program and code of conduct to meet ADMINISTRATOR's required elements within thirty (30) calendar days after

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ADMINISTRATOR's Compliance Officer's determination and resubmit the same for review by the ADMINISTRATOR.

- 5. Upon written confirmation from ADMINISTRATOR's Compliance Officer that the CONTRACTOR's Compliance Program and Code of Conduct contains compliance program, code of conduct and any Compliance related policies and procedures contain all required elements, CONTRACTOR shall ensure that all Covered Individuals relative to this Agreement are made aware of CONTRACTOR's Compliance Program, Code of Conduct and related policies and procedures.
- 6. Failure of CONTRACTOR to submit its Compliance Program, Code of Conduct and relevant policies and procedures shall constitute a material breach of this Agreement. Failure to cure such breach within sixty (60) calendar days of such notice from ADMINISTRATOR shall constitute grounds for termination of this Agreement as to the non-complying partycompliance program, code of conduct, related policies and procedures and contact information for the ADMINISTRATOR's Compliance Program.
- B. SANCTION SCREENING CONTRACTOR shall adhere to all screening policies and procedures and screen all Covered Individuals employed or retained to provide services related to this Agreement semi-annually to ensure that they are not designated as Ineligible Persons, as pursuant to this Agreement. Screening shall be conducted against the General Services Administration's Excluded Parties List System or System for Award Management, the Health and Human Services/Office of Inspector General List of Excluded Individuals/Entities, and the California Medi-Cal Suspended and Ineligible Provider List, and the Social Security Administration Death Master File and/or any other list or system as identified by the ADMINISTRATOR.
- For purposes of this Paragraph IV (COMPLIANCE), Covered Individuals includes all employees, interns, volunteers, contractors, subcontractors, agents, and other persons who provide health care items or services or who perform billing or coding functions on behalf of ADMINISTRATOR. Notwithstanding the above, this term does not include part-time or per-diem employees, contractors, subcontractors, agents, and other persons who are not reasonably expected to work more than one hundred sixty (160) hours per year; except that any such individuals shall become Covered Individuals at the point when they work more than one hundred sixty (160) hours during the calendar year. CONTRACTOR shall ensure that all Covered Individuals relative to this Agreement are made aware of ADMINISTRATOR's Compliance Program, Code of Conduct and related policies and procedures. (or CONTRACTOR's own compliance program, code of conduct and related policies and procedures if CONTRACTOR has elected to use its own).
 - 2. An Ineligible Person shall be any individual or entity who:
- a. is currently excluded, suspended, debarred or otherwise ineligible to participate in federal and state health care programs; or

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- b. has been convicted of a criminal offense related to the provision of health care items or services and has not been reinstated in the federal and state health care programs after a period of exclusion, suspension, debarment, or ineligibility.
- 3. CONTRACTOR shall screen prospective Covered Individuals prior to hire or engagement. CONTRACTOR shall not hire or engage any Ineligible Person to provide services relative to this Agreement.
- 4. CONTRACTOR shall screen all current Covered Individuals and subcontractors semi-annually to ensure that they have not become Ineligible Persons. CONTRACTOR shall also request that its subcontractors use their best efforts to verify that they are eligible to participate in all federal and State of California health programs and have not been excluded or debarred from participation in any federal or state health care programs, and to further represent to CONTRACTOR that they do not have any Ineligible Person in their employ or under contract.
- 5. Covered Individuals shall be required to disclose to CONTRACTOR immediately any debarment, exclusion or other event that makes the Covered Individual an Ineligible Person. CONTRACTOR shall notify ADMINISTRATOR immediately if a Covered Individual providing services directly relative to this Agreement becomes debarred, excluded or otherwise becomes an Ineligible Person.
- 6. CONTRACTOR acknowledges that Ineligible Persons are precluded from providing federal and state funded health care services by contract with COUNTY in the event that they are currently sanctioned or excluded by a federal or state law enforcement regulatory or licensing agency. If CONTRACTOR becomes aware that a Covered Individual has become an Ineligible Person, CONTRACTOR shall remove such individual from responsibility for, or involvement with, COUNTY business operations related to this Agreement.
- 7. CONTRACTOR shall notify ADMINISTRATOR immediately if a Covered Individual or entity is currently excluded, suspended or debarred, or is identified as such after being sanction screened. Such individual or entity shall be immediately removed from participating in any activity associated with this Agreement. ADMINISTRATOR will determine appropriate repayment from, or sanction(s) to CONTRACTOR for services provided by ineligible person or individual. CONTRACTOR shall promptly return any overpayments within forty-five (45) business days after the overpayment is verified by ADMINISTRATOR.
- C. GENERAL COMPLIANCE TRAINING ADMINISTRATOR shall make General Compliance Training and Provider Compliance Training, where appropriate, available to Covered Individuals.
- CONTRACTORS that have acknowledged to comply with ADMINISTRATOR's 1. CONTRACTOR shall use its best efforts to encourage completion Compliance Programby all Covered Individuals; provided, however, that at a minimum CONTRACTOR shall assign at least

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|| one (1) designated representative to complete all the General Compliance Trainings Training when

2	offered.
3	2. Such training will be made available to Covered Individuals within thirty (30) calendar
4	days of employment or engagement.
5	3. Such training will be made available to each Covered Individual annually.
6	4. ADMINISTRATOR will track training completion while CONTRACTOR shall provide
7	copies of training certification upon request.
8	5. Each Covered Individual attending a group training shall certify, in writing, attendance at
9	compliance training. <u>ADMINISTRATOR shall provide instruction on group training completion while</u>
10	CONTRACTOR shall retain the training certifications. Upon written request by ADMINISTRATOR,
11	CONTRACTOR shall provide copies of the certifications.
12	D. SPECIALIZED PROVIDER TRAINING – ADMINISTRATOR shall make Specialized
13	Provider Training, where appropriate, available to Covered Individuals.
14	1. CONTRACTOR shall ensure completion of Specialized Provider Training by all Covered
15	Individuals relative to this Agreement.
16	2. Such training will be made available to Covered Individuals within thirty (30) calendar
17	days of employment or engagement.
18	3. Such training will be made available to each Covered Individual annually.
19	4. ADMINISTRATOR will track online completion of training while CONTRACTOR shall
20	provide copies of the certifications upon request.
21	5. Deach Covered Individual attending a group training shall certify, in writing,
22	attendance at compliance training. ADMINISTRATOR shall provide instructions on completing the
23	training in a group setting while CONTRACTOR shall retain the certifications. Upon written request by
24	ADMINISTRATOR, CONTRACTOR shall provide copies of the certifications.
25	E. MEDICAL BILLING, CODING, AND DOCUMENTATION COMPLIANCE STANDARDS
26	1. CONTRACTOR shall take reasonable precaution to ensure that the coding of health care
27	claims, billings and/or invoices for same are prepared and submitted in an accurate and timely manner
28	and are consistent with federal, state and county laws and regulations. This includes compliance with
29	federal and state health care program regulations and procedures or instructions otherwise
30	communicated by regulatory agencies including the Centers for Medicare and Medicaid Services or
31	their agents.
32	2. CONTRACTOR shall not submit any false, fraudulent, inaccurate and/or fictitious claims
33	for payment or reimbursement of any kind.
34	3. CONTRACTOR shall bill only for those eligible services actually rendered which are also fully documented. When such services are added CONTRACTOR shall use accurate preparation billing
35	fully documented. When such services are coded, CONTRACTOR shall use accurate proper billing
36	codes which accurately describes the services provided and must ensure compliance with all billing and
37	documentation requirements.

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- 4. CONTRACTOR shall act promptly to investigate and correct any problems or errors in coding of claims and billing, if and when, any such problems or errors are identified.
- 5. CONTRACTOR shall promptly return any overpayments within forty-five (45) business days after the overpayment is verified by the ADMINISTRATOR.
- F. Failure to comply with the obligations stated in this Paragraph IV (COMPLIANCE) shall constitute a breach of the Agreement on the part of CONTRACTOR and ground for COUNTY to terminate the Agreement. Unless the circumstances require a sooner period of cure, CONTRACTOR shall have thirty (30) calendar days from the date of the written notice of default to cure any defaults grounded on this Paragraph IV (COMPLIANCE) prior to ADMINISTRATOR's right to terminate this Agreement on the basis of such default.

V. CONFIDENTIALITY

- A. CONTRACTOR shall maintain the confidentiality of all records, including billings and any audio and/or video recordings, in accordance with all applicable federal, state and county codes and regulations, as they now exist or may hereafter be amended or changed.
- 1. CONTRACTOR acknowledges and agrees that all persons served pursuant to this Agreement are Clients of the Orange County Mental Health services system, and therefore it may be necessary for authorized staff of ADMINISTRATOR to audit Clientparticipant files, or to exchange information regarding specific Clientsparticipants 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 CCC, Division 1, Part 2.6, relating to confidentiality of medical information.
- 3. In the event of a collaborative service agreement between Mental Health services providers, CONTRACTOR acknowledges and agrees that it is responsible for obtaining releases of information, from the collaborative agency, for Clientsparticipants receiving services through the collaborative agreement.
- B. Prior to providing any services pursuant to this Agreement, all members of the Board of Directors or its designee or authorized agent, employees, consultants, subcontractors, volunteers and interns of the CONTRACTOR 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. -This 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. CONTRACTOR shall have in effect a system to protect patient records from inappropriate disclosure in connection with activity funded under this Agreement. This system shall include

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provisions for employee education on the confidentiality requirements, and the fact that disciplinary 1 2 3 4 5 6 7 8

action may occur upon inappropriate disclosure. CONTRACTOR agrees to implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of all confidential information that it creates, receives, maintains or transmits. CONTRACTOR shall provide ADMINISTRATOR with information concerning such safeguards. D. CONTRACTOR agrees to mitigate, to the extent practicable, any harmful effect that is known to CONTRACTOR, or its subcontractors or agents in violation of the applicable state and federal

regulations regarding confidentiality. E. CONTRACTOR shall monitor compliance with the above provisions on confidentiality and security, and shall include them in all subcontracts.

F. CONTRACTOR shall notify ADMINISTRATOR within twenty four (24) hours during a work week, of any suspected or actual breach of its computer system.

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VI. COST REPORT

A. CONTRACTOR shall submit separatea Cost Reports for Period One and Period Two, or for a portion thereof, to COUNTYReport no later than sixty (60) calendar days following the period for which they are prepared or termination of this Agreement. CONTRACTOR shall prepare the individual and/or consolidated Cost Report in accordance with all applicable federal, state and COUNTY requirements, GAAP and the Special Provisions Paragraph of this Agreement. CONTRACTOR shall allocate direct and indirect costs to and between programs, cost centers, services, and funding sources in accordance with such requirements and consistent with prudent business practice, which costs and allocations shall be supported by source documentation maintained by CONTRACTOR, and available at any time to ADMINISTRATOR upon reasonable notice. In the event CONTRACTOR has multiple Agreements for mental health services that are administered by HCA, consolidation of the individual Cost Reports into a single consolidated Cost Report may be required, as stipulated by ADMINISTRATOR. CONTRACTOR shall submit a consolidated Cost Report to COUNTY no later than five (5) business days following approval by ADMINSTRATOR ADMINISTRATOR of all individual Cost Reports to be incorporated into a consolidated Cost Report.

- 1. If CONTRACTOR fails to submit an accurate and complete individual and/or consolidated Cost Report within the time period specified above, ADMINISTRATOR shall have sole discretion to impose one or both of the following:
- a. CONTRACTOR may be assessed a late penalty of five hundred dollars (\$500) for each business day after the above specified due date that the accurate and complete individual and/or consolidated Cost Report is not submitted. Imposition of the late penalty shall be at the sole discretion of the ADMINISTRATOR. The late penalty shall be assessed separately on each outstanding individual and/or consolidated Cost Report due COUNTY by CONTRACTOR.

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- b. ADMINISTRATOR may withhold or delay any or all payments due CONTRACTOR pursuant to any or all agreements between COUNTY and CONTRACTOR until such time that the accurate and complete individual and/or consolidated Cost Report is delivered to ADMINISTRATOR.
- 2. CONTRACTOR may request, in advance and in writing, an extension of the due date of individual and/or consolidated Cost Report setting forth good cause for justification of the request. Approval of such requests shall be at the sole discretion of ADMINISTRATOR and shall not be unreasonably denied.
- 3. In the event that CONTRACTOR does not submit an accurate and complete individual and/or consolidated Cost Report within one hundred and eighty (180) calendar days following the termination of this Agreement, and CONTRACTOR has not entered into a subsequent or new agreement for any other services with COUNTY, then all amounts paid to CONTRACTOR by COUNTY during the term of the Agreement shall be immediately reimbursed to COUNTY.
- B. The individual and/or consolidated Cost Report prepared for each period shall be the final financial and statistical report submitted by CONTRACTOR to COUNTY, and shall serve as the basis for final settlement to CONTRACTOR for that period. CONTRACTOR shall document that costs are reasonable and allowable and directly or indirectly related to the services to be provided hereunder. The individual and/or consolidated- Cost Report shall be the final financial record for subsequent audits, if any.
- C. Final settlement shall be based upon the actual and reimbursable costs for services hereunder, less applicable revenues and any late penalty, not to exceed COUNTY's Maximum Obligation as set forth in the Referenced Contract Provisions of this Agreement. CONTRACTOR shall not claim expenditures to COUNTY which are not reimbursable pursuant to applicable federal, state and COUNTY laws, regulations and requirements. Any payment made by COUNTY to CONTRACTOR, which is subsequently determined to have been for an unreimbursable expenditure or service, shall be repaid by CONTRACTOR to COUNTY in cash, or other authorized form of payment, within thirty (30) calendar days of submission of the individual and/or consolidated Cost Report or COUNTY may elect to reduce any amount owed CONTRACTOR by an amount not to exceed the reimbursement due COUNTY.
- D. If the individual and/or consolidated Cost Report indicates the actual and reimbursable costs of services provided pursuant to this Agreement, less applicable revenues and late penalty, are lower than the aggregate of interim monthly payments to CONTRACTOR, CONTRACTOR shall remit the difference to COUNTY. Such reimbursement shall be made, in cash, or other authorized form of payment, with the submission of the individual and/or consolidated Cost Report. If such reimbursement is not made by CONTRACTOR within thirty (30) calendar days after submission of the individual and/or consolidated Cost Report, COUNTY may, in addition to any other remedies, reduce any amount owed CONTRACTOR by an amount not to exceed the reimbursement due COUNTY.

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1	E. If the individual and/or consolidated Cost Report indicates the actual and reimbursable costs of		
2	services provided pursuant to this Agreement, less applicable revenues and late penalty, are higher than		
3	the aggregate of interim monthly payments to CONTRACTOR, COUNTY shall pay CONTRACTOR		
4	the difference, provided such payment does not exceed the Maximum Obligation of COUNTY.		
5	F. All Cost Reports shall contain the following attestation, which may be typed directly on or		
6	attached to the Cost Report:		
7			
8	"I HEREBY CERTIFY that I have executed the accompanying Cost Report and		
9	supporting documentation prepared by for the cost report period		
10	beginning and ending and that, to the best of my		
11	knowledge and belief, costs reimbursed through this Agreement are reasonable and		
12	allowable and directly or indirectly related to the services provided and that this Cost		
13	Report is a true, correct, and complete statement from the books and records of		
14	(provider name) in accordance with applicable instructions, except as noted. I also		
15	hereby certify that I have the authority to execute the accompanying Cost Report.		
16			
17	Signed		
18	Name		
19	Title		
20	Date"		
21			
22	VII. <u>DEBARMENT</u> VII. <u>DEBARMENT</u> AND SUSPENSION CERTIFICATION		
23	A. CONTRACTOR certifies that it and its principals:		
24	1. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or		
25	voluntarily excluded by any federal department or agency.		
26	2. Have not within a three-year period preceding this Agreement been convicted of or had a		
27	civil judgment rendered against them for commission of fraud or a criminal offense in connection with		
28	obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract		
29	under a public transaction; violation of federal or state antitrust statutes or commission of		
30	embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or		
31	receiving stolen property.		
32	3. Are not presently indicted for or otherwise criminally or civilly charged by a federal, state,		
33	or local governmental entity with commission of any of the offenses enumerated in Subparagraph A.2.		
34	above.		
35	4. Have not within a three-year period preceding this Agreement had one or more public		
36	transactions (federal, state, or local) terminated for cause or default.		
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- 5. Shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under federal regulations (i.e., 48 CFR Part 9, Subpart 9.4), debarred, suspended, declared ineligible, or voluntarily excluded from participation in such transaction unless authorized by the State of California.
- 6. Shall include without modification, the clause titled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion Lower Tier Covered Transaction," (i.e., transactions with sub-grantees and/or contractors) and in all solicitations for lower tier covered transactions in accordance with 2 CFR Part 376.
- B. The terms and definitions of this paragraph have the meanings set out in the Definitions and Coverage sections of the rules implementing 51 F.R. 6370.

VIII. DELEGATION, ASSIGNMENT AND SUBCONTRACTS

- A. CONTRACTOR may not delegate the obligations hereunder, either in whole or in part, without prior written consent of COUNTY. CONTRACTOR shall provide written notification of CONTRACTOR's intent to delegate the obligations hereunder, either in whole or part, to ADMINISTRATOR not less than sixty (60) calendar days prior to the effective date of the delegation. Any attempted assignment or delegation in derogation of this paragraph shall be void.
- B. CONTRACTOR may not assign the rights hereunder, either in whole or in part, without the prior written consent of COUNTY.
- 1. If CONTRACTOR is a nonprofit organization, any change from a nonprofit corporation to any other corporate structure of CONTRACTOR, including a change in more than fifty percent (50%) of the composition of the Board of Directors within a two (2) month period of time, shall be deemed an assignment for purposes of this paragraph, unless CONTRACTOR is transitioning from a community clinic/health center to a Federally Qualified Health Center and has been so designated by the Federal Government. Any attempted assignment or delegation in derogation of this subparagraph shall be void.
- 2. If CONTRACTOR is a for-profit organization, any change in the business structure, including but not limited to, the sale or transfer of more than ten percent (10%) of the assets or stocks of CONTRACTOR, change to another corporate structure, including a change to a sole proprietorship, or a change in fifty percent (50%) or more of Board of Directors or any governing body of CONTRACTOR at one time shall be deemed an assignment pursuant to this paragraph. Any attempted assignment or delegation in derogation of this subparagraph shall be void.
- 3. If CONTRACTOR is a governmental organization, any change to another structure, including a change in more than fifty percent (50%) of the composition of its governing body (i.e. Board of Supervisors, City Council, School Board) within a two (2) month period of time, shall be deemed an assignment for purposes of this paragraph. Any attempted assignment or delegation in derogation of this subparagraph shall be void.

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- 4. Whether CONTRACTOR is a nonprofit, for-profit, or a governmental organization, CONTRACTOR shall provide written notification of CONTRACTOR's intent to assign the obligations hereunder, either in whole or part, to ADMINISTRATOR not less than sixty (60) calendar days prior to the effective date of the assignment.
- 5. Whether CONTRACTOR is a nonprofit, for-profit, or a governmental organization, CONTRACTOR shall provide written notification within thirty (30) calendar days to ADMINISTRATOR when there is change of less than fifty percent (50%) of Board of Directors or any governing body of CONTRACTOR at one time.
- C. CONTRACTOR's obligations undertaken 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.
- 1. After approval of a subcontract, ADMINISTRATOR may revoke the approval of a subcontract upon five (5) calendar days' written notice to CONTRACTOR if the subcontract subsequently fails to meet the requirements of this Agreement or any provisions that ADMINISTRATOR has required.
- 2. No subcontract shall terminate or alter the responsibilities of CONTRACTOR to COUNTY pursuant to this Agreement.
- 3. ADMINISTRATOR may disallow, from payments otherwise due CONTRACTOR, amounts claimed for subcontracts not approved in accordance with this paragraph.
- 4. This provision shall not be applicable to service agreements usually and customarily entered into by CONTRACTOR to obtain or arrange for supplies, technical support, and professional services provided by consultants.

IX. EMPLOYEE ELIGIBILITY VERIFICATION

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

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X. EQUIPMENT

- A. Unless otherwise specified in writing by ADMINISTRATOR, Equipment is defined as all property of a Relatively Permanent nature with significant value, purchased in whole or in part by ADMINISTRATOR to assist in performing the services described in this Agreement. –"Relatively Permanent" is defined as having a useful life of one year or longer. Equipment which costs \$5,000 or over, including freight charges, sales taxes, and other taxes, and installation costs are defined as Capital Assets. –Equipment which costs between \$600 and \$5,000, including freight charges, sales taxes and other taxes, and installation costs, or electronic equipment that costs less than \$600 but may contained PHI or PII, are defined as Controlled Equipment. Controlled Equipment includes, but is not limited to phones, tablets, audio/visual equipment, computer equipment, and lab equipment. The cost of Equipment purchased, in whole or in part, with funds paid pursuant to this Agreement shall be depreciated according to GAAP.
- B. CONTRACTOR shall obtain ADMINISTRATOR's prior written approval to purchase any Equipment with funds paid pursuant to this Agreement. Upon delivery of Equipment, CONTRACTOR shall forward to ADMINISTRATOR, copies of the purchase order, receipt, and other supporting documentation, which includes delivery date, unit price, tax, shipping and serial numbers. CONTRACTOR shall request an applicable asset tag for said Equipment and shall include each purchased asset in an Equipment inventory.
- C. Upon ADMINISTRATOR's prior written approval, CONTRACTOR may expense to COUNTY the cost of the approved Equipment purchased by CONTRACTOR. To "expense," in relation to Equipment, means to charge the proportionate cost of Equipment in the fiscal year in which it is purchased. Title of expensed Equipment shall be vested with COUNTY.
- D. CONTRACTOR shall maintain an inventory of all Equipment purchased in whole or in part with funds paid through this Agreement, including date of purchase, purchase price, serial number, model and type of Equipment. Such inventory shall be available for review by ADMINISTRATOR, and shall include the original purchase date and price, useful life, and balance of depreciated Equipment cost, if any.
- E. CONTRACTOR shall cooperate with ADMINISTRATOR in conducting periodic physical inventories of all Equipment. Upon demand by ADMINISTRATOR, CONTRACTOR shall return any or all Equipment to COUNTY.
- F. CONTRACTOR must report any loss or theft of Equipment in accordance with the procedure approved by ADMINISTRATOR and the Notices Paragraph of this Agreement. In addition, CONTRACTOR must complete and submit to ADMINISTRATOR a notification form when items of Equipment are moved from one location to another or returned to COUNTY as surplus.
- G. Unless this Agreement is followed without interruption by another agreement between the parties for substantially the same type and scope of services, at the termination of this Agreement for

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any cause, CONTRACTOR shall return to COUNTY all Equipment purchased with funds paid through this Agreement.

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

XI. FACILITIES, PAYMENTS AND SERVICES

- A. CONTRACTOR agrees to provide the services, staffing, facilities, and supplies in accordance with 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.
- B. In the event that CONTRACTOR is unable to provide the services, staffing, facilities, or supplies as required, ADMINISTRATOR may, at its sole discretion, reduce the Maximum Obligation for the appropriate Period as well as the Total Maximum Obligation. The reduction to the Maximum Obligation for the appropriate Period as well as the Total. The reduction to the Maximum Obligation shall be in an amount proportionate to the number of days in which CONTRACTOR was determined to be unable to provide services, staffing, facilities or supplies.

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

- A. CONTRACTOR agrees to indemnify, defend with counsel approved in writing by COUNTY, and hold COUNTY, its elected and appointed officials, officers, employees, agents and those special districts and agencies for which COUNTY's Board of Supervisors acts as the governing Board ("COUNTY INDEMNITEES") harmless from any claims, demands or liability of any kind or nature, including but not limited to personal injury or property damage, arising from or related to the services, products or other performance provided by CONTRACTOR pursuant to this Agreement. If judgment is entered against CONTRACTOR and COUNTY by a court of competent jurisdiction because of the concurrent active negligence of COUNTY or COUNTY INDEMNITEES, CONTRACTOR and COUNTY agree that liability will be apportioned as determined by the court. Neither party shall request a jury apportionment.
- B. Prior to the provision of services under this Agreement, CONTRACTOR agrees to purchase all required insurance at CONTRACTOR's expense and to submit to COUNTY the COI, including all endorsements required herein, necessary to satisfy COUNTY that the insurance provisions of this Agreement have been complied with and CONTRACTOR agrees to maintainkeep such insurance coverage, Certificates of Insurance, and endorsements on deposit with COUNTY during the entire term of this Agreement. In addition, all subcontractors performing work on behalf of CONTRACTOR pursuant to this Agreement shall obtain insurance subject to the same terms and conditions as set forth herein for CONTRACTOR.

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C. CONTRACTOR shall ensure that all subcontractors performing work on behalf of CONTRACTOR pursuant to this Agreement shall be covered under CONTRACTOR's insurance as an Additional Insured or maintain insurance subject to the same terms and conditions as set forth herein for CONTRACTOR. CONTRACTOR shall not allow subcontractors to work if subcontractors have less than the level of coverage required by COUNTY from CONTRACTOR under this Agreement. It is the obligation of CONTRACTOR to provide notice of the insurance requirements to every subcontractor and to receive proof of insurance prior to allowing any subcontractor to begin work. Such proof of insurance must be maintained by CONTRACTOR through the entirety of this Agreement for inspection by COUNTY representative(s) at any reasonable time.

- D. All SIRs and deductibles shall be clearly stated on the COI. If no SIRs or deductibles apply, indicate this on the COI with a zero (0) by the appropriate line of coverage. Any SIR or deductible in an amount in excess of \$2550,000 (\$5,000 for automobile liability), shall specifically be approved by the CEO/Office of Risk Management upon review of CONTRACTOR's current audited financial report
- E. If CONTRACTOR's SIR is approved, CONTRACTOR fails, in addition to maintain insurance acceptable to COUNTY for the full term, and without limitation of, any other indemnity provision(s) in this Agreement, COUNTY may terminate this Agreement agrees to all of the following:
- 1. In addition to the duty to indemnify and hold the COUNTY harmless against any and all liability, claim, demand or suit resulting from CONTRACTOR's, its agents, employee's or subcontractor's performance of this Agreement, CONTRACTOR shall defend the COUNTY at its sole cost and expense with counsel approved by Board of Supervisors against same; and
- CONTRACTOR's duty to defend, as stated above, shall be absolute and irrespective of any duty to indemnify or hold harmless; and
- The provisions of California Civil Code Section 2860 shall apply to any and all actions to which the duty to defend stated above applies, and the CONTRACTOR'S SIR provision shall be interpreted as though the CONTRACTOR was an insurer and the COUNTY was the insured.
- E. If CONTRACTOR fails to maintain insurance as required in this Paragraph XII (INDEMNIFICATION AND INSURANCE) for the full term of this Agreement, such failure shall constitute a breach of CONTRACTOR's obligation hereunder and ground for COUNTY to terminate this Agreement.

F. QUALIFIED INSURER

1. The policy or policies of insurance must be issued by an insurer with a minimum rating of A- (Secure A.M. Best's Rating) and VIII (Financial Size Category as determined by the most current edition of the Best's Key Rating Guide/Property-Casualty/United States or ambest.com). It is preferred, but not mandatory, that the insurer be licensed to do business in the state of California (California Admitted Carrier).

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- 2. If the insurance carrier does not have an A.M. Best Rating of A-/VIII, the CEO/Office of Risk Management retains the right to approve or reject a carrier after a review of the company's performance and financial ratings.
- G. The policy or policies of insurance maintained by CONTRACTOR shall provide the minimum limits and coverage as set forth below:

<u>Coverage</u>	Minimum Limits
Commercial General Liability	\$1,000,000 per occurrence \$2,000,000 aggregate
Automobile Liability including coverage for owned, non-owned and hired vehicles	\$1,000,000 per occurrence
Workers' Compensation	Statutory
Employers' Liability Insurance	\$1,000,000 per occurrence
Network Security & Privacy <u>Liability</u> <u>Liability</u>	\$1,000,000 per claims made
Professional Liability Insurance	\$1,000,000 per claims made \$1,000,000 aggregate
Sexual Misconduct Liability	\$1,000,000 per occurrence

H. REQUIRED COVERAGE FORMS

- 1. The Commercial General Liability coverage shall be written on ISO form CG 00 01, or a substitute form providing liability coverage at least as broad.
- 2. The Business Automobile Liability coverage shall be written on ISO form CA 00 01, CA 00 05, CA 00 12, CA 00 20, or a substitute form providing coverage at least as broad.

I. REQUIRED ENDORSEMENTS

- 1. The Commercial General Liability policy shall contain the following endorsements, which shall accompany the COI:
- a. An Additional Insured endorsement using ISO form CG 2010 or CG 2033 20 26 04 13 or a form at least as broad naming the County of Orange, its elected and appointed officials, officers,

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employees, and agents as Additional Insureds, or provide blanket coverage, which will state AS REOUIRED BY WRITTEN AGREEMENT.

- b. A primary non-contributing endorsement using ISO form CG 20 01 04 13, or a form at least as broad evidencing that the CONTRACTOR's insurance is primary and any insurance or selfinsurance maintained by the County of Orange shall be excess and non-contributing.
- 2. The Network Security and Privacy Liability policy shall contain the following endorsements which shall accompany the COICertificate of Insurance:
- a. An Additional Insured endorsement naming the County of Orange, its elected and appointed officials, officers, agents and employees, and agents as Additional Insureds for its vicarious liability.
- non-contributing b. A primary and endorsement evidencing that the CONTRACTOR's Contractor's insurance is primary and any insurance or self-insurance maintained by the County of Orange shall be excess and non-contributing.
- J. All insurance policies required by this Agreement shall waive all rights of subrogation against the County of Orange and members of the Board of Supervisors, its elected and appointed officials, officers, agents and employees when acting within the scope of their appointment or employment.
- K. The Workers' Compensation policy shall contain a waiver of subrogation endorsement waiving all rights of subrogation against the County of Orange, and members of the Board of Supervisors, its elected and appointed officials, officers, agents and employees, or provide blanket coverage, which will state AS REQUIRED BY WRITTEN AGREEMENT.
- L. CONTRACTOR shall notify COUNTY in writing within thirty (30) days of any policy cancellation and within ten (10) days for non-payment of premium and provide a copy of the cancellation notice to COUNTY. Failure to provide written notice of cancellation may shall constitute a material breach of the Agreement, upon which the CONTRACTOR's obligation hereunder and ground for COUNTY may suspend or to terminate this Agreement.
- M. If CONTRACTOR's Professional Liability and/or Network Security & Privacy Liability are "Claims Made" policy is a "claims made" policy, (ies), CONTRACTOR shall agree to maintain Professional Liability coverage for two (2) years following the completion of the Agreement.
- N. The Commercial General Liability policy shall contain a "severability of interests" clause also known as a "separation of insureds" clause (standard in the ISO CG 0001 policy).
- O. COUNTY expressly retains the right to require CONTRACTOR to increase or decrease insurance of any of the above insurance types throughout the term of this Agreement. Any increase or decrease in insurance will be as deemed by County of Orange Risk Manager as appropriate to adequately protect COUNTY.
- P. COUNTY shall notify CONTRACTOR in writing of changes in the insurance requirements. If CONTRACTOR does not deposit copies of acceptable COIs and endorsements with COUNTY incorporating such changes within thirty (30) calendar days of receipt of such notice, such failure shall

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constitute a breach of CONTRACTOR's obligation hereunder and ground for termination of this Agreement may be in breach without further notice to CONTRACTOR, and by COUNTY shall be entitled to all legal remedies.

Q. The procuring of such required policy or policies of insurance shall not be construed to limit CONTRACTOR's liability hereunder nor to fulfill the indemnification provisions and requirements of this Agreement, nor act in any way to reduce the policy coverage and limits available from the insurer.

R. SUBMISSION OF INSURANCE DOCUMENTS

- 1. The COI and endorsements shall be provided to COUNTY as follows:
 - a. Prior to the start date of this Agreement.
 - b. No later than the expiration date for each policy.
- c. Within thirty (30) calendar days upon receipt of written notice by COUNTY regarding changes to any of the insurance types as set forth in Subparagraph G. of this Agreement, above.
- 2. The COI and endorsements shall be provided to the COUNTY at the address as specified in the Referenced Contract Provisions of this Agreement.
- 3. If CONTRACTOR fails to submit the COI and endorsements that meet the insurance provisions stipulated in this Agreement by the above specified due dates, ADMINISTRATOR shall have sole discretion to impose one or both of the following:
- a. ADMINISTRATOR may withhold or delay any or all payments due CONTRACTOR pursuant to any and all Agreements between COUNTY and CONTRACTOR until such time that the required COI and endorsements that meet the insurance provisions stipulated in this Agreement are submitted to ADMINISTRATOR.
- b. CONTRACTOR may be assessed a penalty of one hundred dollars (\$100) for each late COI or endorsement for each business day, pursuant to any and all Agreements between COUNTY and CONTRACTOR, until such time that the required COI and endorsements that meet the insurance provisions stipulated in this Agreement are submitted to ADMINISTRATOR.
- c. If CONTRACTOR is assessed a late penalty, the amount shall be deducted from CONTRACTOR's monthly invoice.
- 4. In no cases shall assurances by CONTRACTOR, its employees, agents, including any insurance agent, be construed as adequate evidence of insurance. COUNTY will only accept valid COIs and endorsements, or in the interim, an insurance binder as adequate evidence of insurance coverage.

XIII. INSPECTIONS AND AUDITS

A. ADMINISTRATOR, any authorized representative of COUNTY, any authorized representative of the State of California, the Secretary of the United States Department of Health and Human Services, the Comptroller General of the United States, or any other of their authorized representatives, shall have access to any books, documents, and records, including but not limited to, financial statements, general ledgers, relevant accounting systems, medical and Clientparticipant records, of CONTRACTOR that are

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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.

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. 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.
- D. CONTRACTOR shall retain a licensed certified public accountant, who will prepare an annual Single Audit as required by 31 USC 7501 - 7507, as well as its implementing regulations under 2 CFR Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. CONTRACTOR shall forward the Single Audit to ADMINISTRATOR within fourteen (14) calendar days of receipt.
- E. CONTRACTOR shall forward to ADMINISTRATOR a copy of any audit report within fourteen (14) calendar days of receipt. Such audit shall include, but not be limited to, management, financial, programmatic or any other type of audit of CONTRACTOR's operations, whether or not the cost of such operation or audit is reimbursed in whole or in part through this Agreement.

XIV. LICENSES AND LAWS

A. CONTRACTOR, its officers, agents, employees, affiliates, and subcontractors shall, throughout the term of this Agreement, maintain all necessary licenses, permits, approvals, certificates, accreditations, waivers, and exemptions necessary for the provision of the services hereunder and required by the laws, regulations and requirements of the United States, the State of California,

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1	COUNTY, and all other applicable
2	ADMINISTRATOR immediately and in
3	pendency of any hearings or appeals, pe
4	and exemptions. Said inability shall be co
5	B. ENFORCEMENT OF CHILD S
6	1. CONTRACTOR ce
7	State reporting requirements regarding is
8	Assignment Orders and Notices of Assignment
9	term of the Agreement with the County
10	of the Agreement and failure to cure su
11	COUNTY shall constitute grounds for ter
12	<u>2</u> . CONTRACTOR agrees to f
13	of the award of this Agreement:
14	a. In the case of an indiv
15	social security number, and residence add
16	b. In the case of a contrac
17	individual, the name, date of birth, social
18	owns an interest of ten percent (10%) or i
19	c. A certification that CON
20	state reporting requirements regarding its
21	d. A certification that CON
22	and Earnings Assignment Orders and No
23	2. Failure of CONTRACTOR
24	Subparagraphs 1.a., 1.b., 1.c., or 1.d. abo
25	requirements for child support enforcem
26	Assignment Orders and Notices of Assi
27	and failure to cure such breach within six
28	grounds for termination of this Agreemen
29	3. It is expressly understood
30	charged with the establishment and enf
31	and/or state statute.
32	C. CONTRACTOR shall comply
33	requirements as they exist now or may b
34	requirements shall include, but not be lim
35	1. ARRA of 2009.
36	2. WIC, Division 5, Communit
37	3. WIC. Division 6. Admission

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governmental agencies.
                              CONTRACTOR shall notify
writing of its inability to obtain or maintain, irrespective of the
ermits, licenses, approvals, certificates, accreditations, waivers
ause for termination of this Agreement.
UPPORT OBLIGATIONS
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- rtifies it is in full compliance with all applicable federal and ts employees and with all lawfully served Wage and Earnings gnments and will continue to be in compliance throughout the of Orange. Failure to comply shall constitute a material breach sch breach within sixty (60) calendar days of notice from the rmination of the Agreement.
- Furnish to ADMINISTRATOR within thirty (30) calendar days
- ridual contractor CONTRACTOR, his/her name, date of birth, dress;
- etor CONTRACTOR doing business in a form other than as an security number, and residence address of each individual who more in the contracting entity;
- VTRACTOR has fully complied with all applicable federal and employees;
- NTRACTOR has fully complied with all lawfully served Wage tices of Assignment, and will continue to so comply.
- to timely submit the data and/or certifications required by ove, or to comply with all federal and state employee reporting ent, or to comply with all lawfully served Wage and Earnings gnment, shall constitute a material breach of this Agreement; tty (60) calendar days of notice from COUNTY shall constitute It.
- that this data will be transmitted to governmental agencies forcement of child support orders, or as permitted by federal
- with all applicable governmental laws, regulations, and e hereafter amended or changed. These laws, regulations, and ited to, the following:
 - y Mental Health Services.
 - s and Judicial Commitments.

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WIC, Division 7, Mental Institutions. 1 2 HSC, §§1250 et seq., Health Facilities. 3 PC, §§11164-11174.3, Child Abuse and Neglect Reporting Act. CCR, Title 9, Rehabilitative and Developmental Services. 4 CCR. Title 17. Public Health. 5 CCR, Title 22, Social Security. 6 7 10. CFR, Title 42, Public Health. 11. CFR, Title 45, Public Welfare. 8 USC Title 42. Public Health and Welfare. 9 13. Federal Social Security Act, Title XVIII and Title XIX Medicare and Medicaid. 10 42 USC §12101 et seq., Americans with Disabilities Act of 1990. 11 42 USC §1857, et seq., Clean Air Act. 12 33 USC 84, §308 and §§1251 et seq., the Federal Water Pollution Control Act. 13 14 17. 31 USC 7501.70, Federal Single Audit Act of 1984. 18. Policies and procedures set forth in Mental Health Services Act. 15 19. Policies and procedures set forth in DHCS Letters. 16 20. HIPAA privacy rule, as it may exist now, or be hereafter amended, and if applicable. 17 21. 31 USC 7501 7507, as well as its implementing regulations under 2 CFR Part 200, 18 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for 19 Federal Awards. 20 -D. CONTRACTOR shall at all times be capable and authorized by the State of California to 21 provide treatment and bill for services provided to Medi-Cal eligible Clients while working under 22 the terms of this Agreement. 23 —E. CONTRACTOR shall make every reasonable effort to obtain appropriate licenses and/or 24 waivers to provide Medi-Cal billable treatment services at school or other sites requested by 25

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ADMINISTRATOR.

XV. LITERATURE, ADVERTISEMENTS, AND SOCIAL MEDIA

A. Any written information or literature, including educational or promotional materials, distributed by CONTRACTOR to any person or organization for purposes directly or indirectly related to this Agreement must be approved at least thirty (30) days in advance and in writing by ADMINISTRATOR before distribution. For the purposes of this Agreement, distribution of written materials shall include, but not be limited to, pamphlets, brochures, flyers, newspaper or magazine ads, and electronic media such as the Internet.

B. Any advertisement through radio, television broadcast, or the Internet, for educational or promotional purposes, made by CONTRACTOR for purposes directly or indirectly related to this Agreement must be approved in advance at least thirty (30) days and in writing by ADMINISTRATOR.

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C. If CONTRACTOR uses social media (such as Facebook, Twitter, YouTube or other publicly vailable social media sites) in support of the services described within this Agreement, CONTRACTOR shall develop social media policypolicies and procedures and have them available to ADMINISTRATOR upon reasonable notice. CONTRACTOR shall inform ADMINISTRATOR of all orms of social media used to either directly or indirectly support the services described within this CONTRACTOR shall comply with COUNTY Social Media Use policy and rocedures Procedures as they pertain to any social media developed in support of the services described vithin this Agreement. CONTRACTOR shall also include any required funding statement information n social media when required by ADMINISTRATOR.

D. Any information as described in Subparagraphs A. and B. above shall not imply endorsement by COUNTY, unless ADMINISTRATOR consents thereto in writing.

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XVI. MAXIMUM OBLIGATION

A. The Total Maximum Obligation of COUNTY for services provided in accordance with this Agreement, and the separate Maximum Obligations for each period under this Agreement, are is as specified in the Referenced Contract Provisions of this Agreement, except as allowed for in Subparagraph B. below.

B. ADMINISTRATOR may amend the Maximum Obligation by an amount not to exceed ten percent (10%) of Period One funding for this Agreement.

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XVII. MINIMUM WAGE LAWS

A. Pursuant to the United States of America Fair Labor Standards Act of 1938, as amended, and State of California Labor Code, §1178.5, CONTRACTOR shall pay no less than the greater of the federal or California Minimum Wage to all its employees that directly or indirectly provide services pursuant to this Agreement, in any manner whatsoever. CONTRACTOR shall require and verify that all its contractors or other persons providing services pursuant to this Agreement on behalf of CONTRACTOR also pay their employees no less than the greater of the federal or California Minimum Wage.

- B. CONTRACTOR shall comply and verify that its contractors comply with all other federal and State of California laws for minimum wage, overtime pay, record keeping, and child labor standards pursuant to providing services pursuant to this Agreement.
- C. Notwithstanding the minimum wage requirements provided for in this clause, CONTRACTOR, where applicable, shall comply with the prevailing wage and related requirements, as provided for in accordance with the provisions of Article 2 of Chapter 1, Part 7, Division 2 of the Labor Code of the State of California (§§1770, et seq.), as it <u>now</u> exists or may hereafter be amended.

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XVIII. NONDISCRIMINATION

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A. EMPLOYMENT

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- 1. During the term of this Agreement, CONTRACTOR and its Covered Individuals shall not unlawfully discriminate against any employee or applicant for employment because of his/her race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran status. Additionally, during the term of this Agreement, CONTRACTOR and its Covered Individuals shall require in its subcontracts that subcontractors shall not unlawfully discriminate against any employee or applicant for employment because of his/her race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran status.
- 2. CONTRACTOR and its Covered Individuals shall not discriminate against employees or applicants for employment 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.
- 3. CONTRACTOR shall not discriminate between employees with spouses and employees with domestic partners, or discriminate between domestic partners and spouses of those employees, in the provision of benefits.
- 4. CONTRACTOR shall post in conspicuous places, available to employees and applicants for employment, notices from ADMINISTRATOR and/or the United States Equal Employment Opportunity Commission setting forth the provisions of the Equal Opportunity clause.
- 5. All solicitations or advertisements for employees placed by or on behalf of CONTRACTOR and/or subcontractor shall state that all qualified applicants will receive consideration for employment without regard to race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran status. Such requirements shall be deemed fulfilled by use of the term EOE.
- 6. Each labor union or representative of workers with which CONTRACTOR and/or subcontractor 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 and/or subcontractor shall not discriminate in the provision of services, the allocation of benefits, or in the accommodation in facilities on the basis of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender

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expression, age, sexual orientation, or military and veteran status in accordance with Title IX of the Education Amendments of 1972 as they relate to 20 USC §1681 - §1688; Title VI of the Civil Rights Act of 1964 (42 USC §2000d); the Age Discrimination Act of 1975 (42 USC §6101); Title 9, Division 4, Chapter 6, Article 1 (§10800, et seq.) of the California Code of Regulations; and Title II of the Genetic Information Nondiscrimination Act of 2008, 42 USC 2000ff, et seg., as applicable, 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. For the purpose of this Nondiscrimination paragraph, Discrimination includes, but is not limited to the following based on one or more of the factors identified above:

- 1. Denying a Client participant or potential Client participant any service, benefit, or accommodation.
- 2. Providing any service or benefit to a Client participant which is different or is provided in a different manner or at a different time from that provided to other Clients participants.
- 3. Restricting a Client participant in any way in the enjoyment of any advantage or privilege enjoyed by others receiving any service or benefit.
- 4. Treating a Clientparticipant 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.
 - 5. Assignment of times or places for the provision of services.
- C. COMPLAINT PROCESS CONTRACTOR shall establish procedures for advising all Clients participants through a written statement that CONTRACTOR's and/or subcontractor's Clients participants may file all complaints alleging discrimination in the delivery of services with CONTRACTOR, subcontractor, and ADMINISTRATOR or COUNTY's Patient Rights Office.
- 1. Whenever possible, problems shall be resolved informally and at the point of service. CONTRACTOR shall establish an internal informal problem resolution process for Clients participants not able to resolve such problems at the point of service. Clients Participants may initiate a grievance or complaint directly with CONTRACTOR either orally or in writing.
- a. COUNTY shall establish a formal resolution and grievance process in the event informal processes do not yield a resolution.
- b. Throughout the problem resolution and grievance process, Client participant 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.
- 2. 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.
- D. PERSONS WITH DISABILITIES CONTRACTOR and/or subcontractor agree to comply with the provisions of §504 of the Rehabilitation Act of 1973, as amended, (29 USC 794 et seq., as implemented in 45 CFR 84.1 et seq.), and the Americans with Disabilities Act of 1990 as amended

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1	(42 USC 12101 et seq.),: as implemented in 29 CFR 1630), as applicable, pertaining to the prohibition
2	of discrimination against qualified persons with disabilities in all programs or activities; and if
3	applicable, as implemented ir
4	Title 45, CFR, §84.1 et seq., as they exist now or may be hereafter amended together with succeeding
5	legislation.
6	E. RETALIATION – Neither CONTRACTOR nor subcontractor, nor its employees or agents shall
7	intimidate, coerce or take adverse action against any person for the purpose of interfering with rights
8	secured by federal or state laws, or because such person has filed a complaint, certified, assisted or
9	otherwise participated in an investigation, proceeding, hearing or any other activity undertaken to
10	enforce rights secured by federal or state law.
11	F. 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 or subcontractor may be declared ineligible for further contracts involving federal, state or county funds.

XIX. NOTICES

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

- 1. When written and deposited in the United States mail, first class postage prepaid and addressed as specified in the Referenced Contract Provisions of this Agreement or as otherwise directed by ADMINISTRATOR;
 - 2. When faxed, transmission confirmed;
 - 3. When sent by Email; or
- 4. When accepted by U.S. Postal Service Express Mail, Federal Express, United Parcel Service, or other expedited delivery service.
- B. Termination Notices shall be addressed as specified in the Referenced Contract Provisions of this Agreement or as otherwise directed by ADMINISTRATOR and shall be effective when faxed, transmission confirmed, or when accepted by U.S. Postal Service Express Mail, Federal Express, United Parcel Service, or other expedited delivery service.
- C. CONTRACTOR shall notify ADMINISTRATOR, in writing, within twenty-four (24) hours of becoming aware of any occurrence of a serious nature, which may expose COUNTY to liability. Such occurrences shall include, but not be limited to, accidents, injuries, or acts of negligence, or loss or damage to any COUNTY property in possession of CONTRACTOR.
- D. For purposes of this Agreement, any notice to be provided by COUNTY may be given by ADMINISTRATOR.

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XX. NOTIFICATION OF DEATH

- A. Upon becoming aware of the death of any person served pursuant to this Agreement, CONTRACTOR shall immediately notify ADMINISTRATOR.
- B. All Notifications of Death provided to ADMINISTRATOR by CONTRACTOR 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.
- 1. TELEPHONE NOTIFICATION:— CONTRACTOR shall notify ADMINISTRATOR by telephone immediately upon becoming aware of the death due to non-terminal illness of any person served pursuant to this Agreement; 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. WRITTEN NOTIFICATION

- a. NON-TERMINAL ILLNESS: CONTRACTOR shall hand deliver, fax, and/or send via encrypted email to ADMINISTRATOR a written report within sixteen (16) hours after becoming aware of the death due to non-terminal illness of any person served pursuant to this Agreement.
- b. TERMINAL ILLNESS:— CONTRACTOR shall notify ADMINISTRATOR by written report hand delivered, faxed, sent via encrypted email, and/or postmarked and sent via U.S. Mail within forty-eight (48) hours of becoming aware of the death due to terminal illness of any person served pursuant to this Agreement.
- C. If there are any questions regarding the cause of death of any person served pursuant to this Agreement 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 this Notification of Death Paragraph.

XXI. NOTIFICATION OF PUBLIC EVENTS AND MEETINGS

- A. CONTRACTOR shall notify ADMINISTRATOR of any public event or meeting funded in whole or part by the COUNTY, except for those events or meetings that are intended solely to serve Clients participants or occur in the normal course of business.
- B. CONTRACTOR shall notify ADMINISTRATOR at least thirty (30) business days in advance of any applicable public event or meeting. The notification must include the date, time, duration, location and purpose of public event or meeting. Any promotional materials or event related flyers must be approved by ADMINISTRATOR prior to distribution.

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XXII. RECORDS MANAGEMENT AND MAINTENANCE

- A. CONTRACTOR, its officers, agents, employees and subcontractors shall, throughout the term of this Agreement, prepare, maintain and manage records appropriate to the services provided and in accordance with this Agreement and all applicable requirements.
- B. CONTRACTOR shall implement and maintain administrative, technical and physical safeguards to ensure the privacy of PHI and prevent the intentional or unintentional use or disclosure of PHI in violation of the HIPAA, federal and state regulations and/or CHPP. CONTRACTOR shall mitigate to the extent practicable, the known harmful effect of any use or disclosure of PHI made in violation of federal or state regulations and/or COUNTY policies.
- C. CONTRACTOR's participant, Client and/or patient records shall be maintained in a secure manner. -CONTRACTOR shall maintain participant, Clientclient, and/or patient records and must establish and implement written record management procedures.
- D. CONTRACTOR shall retain all financial records for a minimum of seven (7) years from the commencement of the contract, unless a longer period is required due to legal proceedings such as litigations and/or settlement of claims.
- E. CONTRACTOR shall make records pertaining to the costs of services, participant fees, charges, billings, and revenues available at one (1) location within the limits of the County of Orange.
- F. CONTRACTOR shall ensure all HIPAA (DRS) requirements are met. HIPAA requires that Clients clients, participants and/or patients be provided the right to access or receive a copy of their DRS and/or request addendum to their records. Title 45 CFR §164.501, defines DRS as a group of records maintained by or for a covered entity that is:
- 1. The medical records and billing records about individuals maintained by or for a covered health care provider;
- 2. The enrollment, payment, claims adjudication, and case or medical management record systems maintained by or for a health plan; or
 - 3. Used, in whole or in part, by or for the covered entity to make decisions about individuals.
- <u>G. CONTRACTOR</u> may retain participant, <u>Clientclient</u>, and/or patient documentation electronically in accordance with the terms of this Agreement and common business practices. If documentation is retained electronically, CONTRACTOR shall, in the event of an audit or site visit:
- 1. Have documents readily available within forty-eight (48) hour notice of a scheduled audit or site visit.
- 2. Provide auditor or other authorized individuals access to documents via a computer terminal.
- 3. Provide auditor or other authorized individuals a hardcopy printout of documents, if requested.

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1	FH. CONTRACTOR shall ensure compliance with requirements pertaining to the privacy and
2	security of PII and/or PHI. CONTRACTOR shall notify COUNTY immediately by telephone call plus
3	email or fax upon the discovery of a Breach of unsecured PHI and/or PII.
4	GI. CONTRACTOR may be required to pay any costs associated with a Breach of privacy and/or
5	security of PII and/or PHI, including but not limited to the costs of notification. CONTRACTOR shall
6	pay any and all such costs arising out of a Breach of privacy and/or security of PII and/or PHI.
7	H
8	J. CONTRACTOR shall retain all participant, Clientclient, and/or patient medical records for
9	seven (7) years following discharge of the participant, Client and/or patient, with the exception of
10	non-emancipated minors for whom records must be kept for at least one (1) year after such minors have
11	reached the age of eighteen (18) years, or for seven (7) years after the last date of service, whichever is
12	longer.
13	I. CONTRACTOR shall retain all financial records for a minimum of seven (7) years from the
14	commencement of the contract, unless a longer period is required due to legal proceedings such as
15	litigations and/or settlement of claims.
16	J. CONTRACTOR shall make records pertaining to the costs of services, participant fees, charges,
17	billings, and revenues available at one (1) location within the limits of the County of Orange.
18	K. If CONTRACTOR is unable to meet the record location criteria above, ADMINISTRATOR
19	may provide written approval to CONTRACTOR to maintain records in a single location, identified by
20	CONTRACTOR.
21	L. CONTRACTOR may be required to retain all records involving litigation proceedings and
22	settlement of claims for a longer term which will be directed by the ADMINISTRATOR.
23	— M. CONTRACTOR shall notify ADMINISTRATOR of any PRA requests related to, or arising out
24	of, this Agreement, within forty-eight (48) hours. CONTRACTOR shall provide ADMINISTRATOR
25	all information that is requested by the PRA request.
26	\parallel $\!$
27	XXIII. <u>RESEARCH AND PUBLICATION</u>
28	CONTRACTOR shall not utilize information and <u>or</u> data received from COUNTY, or arising out
29	of, or developed, as a result of this Agreement for the purpose of personal or professional research, or
30	for publication.
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32	XXIV. <u>REVENUE</u>
33	A. CLIENT FEES: CONTRACTOR shall charge, unless waived by ADMINISTRATOR, a fee to
34	elients to whom billable services, other than those amounts reimbursed by Medicare, Medi-Cal or other
35	third party health plans, are provided pursuant to this Agreement, their estates and responsible relatives,
36	according to their ability to pay as determined by the State Department of Health Care Services'
37	"Uniform Method of Determining Ability to Pay" (UMDAP) procedure or by any other payment

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procedure as approved in advance, and in writing by ADMINISTRATOR; and in accordance with	Title
9 of the California Code of Regulations. Such fee shall not exceed the actual cost of services pro-	vided
No client shall be denied services because of an inability to pay.	

- THIRD PARTY REVENUE: CONTRACTOR shall make every reasonable effort to obtain all available third party reimbursement for which persons served pursuant to this Agreement may be eligible. Charges to insurance carriers shall be on the basis of CONTRACTOR's usual and customary charges.
- C. PROCEDURES: CONTRACTOR shall maintain internal financial controls which adequately ensure proper billing and collection procedures. CONTRACTOR's procedures shall specifically provide for the identification of delinquent accounts and methods for pursuing such accounts. CONTRACTOR shall provide ADMINISTRATOR, monthly, a written report specifying the current status of fees which are billed, collected, transferred to a collection agency, or deemed by CONTRACTOR to be uncollectible.
- D. OTHER REVENUES CONTRACTOR shall charge for services, supplies, or facility use by persons other than individuals or groups eligible for services pursuant to this Agreement.

XXV. SEVERABILITY

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

XXV. SPECIAL PROVISIONS

- A. CONTRACTOR shall not use the funds provided by means of this Agreement for the following purposes:
 - 1. Making cash payments to intended recipients of services through this Agreement.
- 2. Lobbying any governmental agency or official. CONTRACTOR shall file all certifications and reports in compliance with this requirement pursuant to Title 31, USC, §1352 (e.g., limitation on use of appropriated funds to influence certain federal contracting and financial transactions).
 - 3. Fundraising.

SOCIAL MODEL RECOVERY SYSTEMS, INC.

- 4. Purchase of gifts, meals, entertainment, awards, or other personal expenses for CONTRACTOR's staff, volunteers, or members of the Board of Directors or governing body.
- 5. Reimbursement of CONTRACTOR's members of the Board of Directors or governing body for expenses or services.

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- 6. Making personal loans to CONTRACTOR's staff, volunteers, interns, consultants, subcontractors, and members of the Board of Directors or governing body, or its designee or authorized agent, or making salary advances or giving bonuses to CONTRACTOR's staff.
- 7. Paying an individual salary or compensation for services at a rate in excess of the current Level I of the Executive Salary Schedule as published by the OPM. The OPM Executive Salary Schedule may be found at www.opm.gov.
 - 8. Severance pay for separating employees.
- 9. Paying rent and/or lease costs for a facility prior to the facility meeting all required building codes and obtaining all necessary building permits for any associated construction.
 - 10. Supplanting current funding for existing services.
- B. Unless otherwise specified in advance and in writing by ADMINISTRATOR, CONTRACTOR shall not use the funds provided by means of this Agreement for the following purposes:
 - 1. Funding travel or training (excluding mileage or parking).
- 2. Making phone calls outside of the local area unless documented to be directly for the purpose of Client participant care.
 - 3. Payment for grant writing, consultants, certified public accounting, or legal services.
- 4. 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.
- 5. Purchasing or improving land, including constructing or permanently improving any building or facility, except for tenant improvements.
- 6. Purchase of gifts, meals, entertainment, awards, or other personal expenses for **CONTRACTOR's Clients.**
 - <u>6</u>. Providing inpatient hospital services or purchasing major medical equipment.
- 87. Satisfying any expenditure of non-federal funds as a condition for the receipt of federal funds (matching).
- 8. Purchase of gifts, meals, entertainment, awards, or other personal expenses CONTRACTOR's participants.

XXVI. STATUS OF CONTRACTOR

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

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employment. CONTRACTOR, its agents, employees, consultants, or subcontractors, shall not be entitled to any rights or privileges of COUNTY's employees and shall not be considered in any manner to be COUNTY's employees.

XXVII. TERM

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

XXVIII. TERMINATION

- A. Either party may terminate this Agreement, without cause, upon ninety (90) calendar days' written notice given to 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 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 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.

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D. CONTINGENT FUNDING

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- 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(s) approved by the Board of Supervisors.
- 2. In the event such funding is subsequently reduced or terminated, COUNTY may suspend, 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 suspended or terminated prior to the completion of the term as specified in the Referenced Contract Provisions of 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. In the event this Agreement is terminated by either party pursuant to Subparagraphs B., C. or D. above, 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. Until the date of termination, continue to provide the same level of service required by this Agreement.
- 4. If Clients participants are to be transferred to another facility for services, furnish ADMINISTRATOR, upon request, all Client participant information and records deemed necessary by ADMINISTRATOR to effect an orderly transfer.
- 5. Assist ADMINISTRATOR in effecting the transfer of Clients participants in a manner consistent with Client's participant's best interests.
- 6. If records are to be transferred to COUNTY, pack and label such records in accordance with directions provided by ADMINISTRATOR.
- 7. Return to COUNTY, in the manner indicated by ADMINISTRATOR, any equipment and supplies purchased with funds provided by COUNTY.
- 8. To the extent services are terminated, cancel outstanding commitments covering the procurement of materials, supplies, equipment, and miscellaneous items, as well as outstanding commitments which relate to personal services. With respect to these canceled commitments, CONTRACTOR shall submit a written plan for settlement of all outstanding liabilities and all claims arising out of such cancellation of commitment which shall be subject to written approval of ADMINISTRATOR.

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 - 9. Provide written notice of termination of services to each Clientclient being served under this Agreement, within fifteen (15) calendar days of receipt of termination notice. A copy of the notice of termination of services must also be provided to ADMINISTRATOR within the fifteen (15) calendar day period.
 - 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.

XXIX. 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 participants provided services pursuant to this Agreement.

XXX. 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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Attachment B

SOCIAL MODEL RECOVERY SYSTEMS, INC.	
BY:	DATED:
TITLE:	
COLINITY OF OR A NICE	
COUNTY OF ORANGE	
BY:	DATED:
HEALTH CARE AGENCY	
APPROVED AS TO FORM	
OFFICE OF THE COUNTY COUNSEL	
ORANGE COUNTY, CALIFORNIA	
DV.	DATED:
BY: DEPUTY	DATED.
If the contracting party is a corporation, two (2) signatures at President or any Vice President; and one (1) signature by the	

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X:\Asr\Behavioral Health\Asr - 17-001385 - Smr04 Op Svcs Children And Transitional Youth Cmhsad Fy 18-19 - Sv Redline.Doc<u>SMR04BHKK19</u> SOCIAL MODEL RECOVERY SYSTEMS, INC.

1	EXHIBIT A
2	TO AGREEMENT FOR PROVISION OF
3	OUTPATIENT SERVICES FOR CHILDREN AND TRANSITIONAL AGE YOUTH WITH CO-
4	OCCURRING MENTAL HEALTH AND SUBSTANCE ABUSE DISORDERS
5	<u>BETWEEN</u>
6	COUNTY OF ORANGE
7	<u>AND</u>
8	SOCIAL MODEL RECOVERY SYSTEMS, INC.
9	
10	WITH CO-OCCURRING MENTAL HEALTH AND SUBSTANCE ABUSE DISORDERS
11	BETWEEN
12	COUNTY OF ORANGE
13	AND
14	SOCIAL MODEL RECOVERY SYSTEMS, INC.
15	JULY 1, 2016 THROUGH JUNE 30, 2018 2019
16	
17	I. <u>COMMON TERMS AND DEFINITIONS</u> <u>& DEFINITIONS</u>
18	A. The following standard definitions are for reference purposes only and may or may not
19	apply in their entirety throughout the Agreement. The parties agree to the following terms and
20	definitions, and to those terms and definitions which, for convenience, are set forth elsewhere in the
21	Agreement.
22	A_1. Active and Ongoing Case Load means documentation, by CONTRACTOR, for
23	completion of entry and evaluation services provided to Clients into COUNTY's IRIS.
24	Documentation also includes level, frequency, and duration of services received by Clients, and these
25	services must be consistent with Clients' level of impairments as well as treatment goals. In addition,
26	services are to be individualized and solution-focused, using evidenced-based practices.
27	B_2. Administrative Support means individual(s) who is/are responsible for providing a broad
28	range of office support to program and management staff that includes: answering and directing phone
29	calls, writing correspondences, entering data in spreadsheets, preparing invoices for payment,
30	maintaining tracking reports and files, and working on special projects, as assigned.
31	<u>C_3</u> . <u>Admission</u> means documentation, by CONTRACTOR, for completion of entry and
32	evaluation services provided to Clients into IRIS.
33	4. American Society of Addiction Medicine (ASAM) Criteria is a comprehensive set of
34	guidelines for placement, continued stay and transfer/discharge of Clients with addiction and co-
35	occurring conditions. 5. ASAM-Designated Levels of Care means a designation that is issued by DHCS to a
36	residential program based on the services provided at the facility. For the purposes of this Agreement,
37	residential program based on the services provided at the facility. For the purposes of this Agreement,
	1 CO1 EXHIDIT A

10	CONTRACTOR shall provide services in accordance with one of the following ASAM-Designated
I	Levels of Care:
	a. 3.1 - Clinically Managed Low-Intensity Residential Services means a twenty-four (24)
h	our structure with available trained personnel; at least five (5) hours of clinical service/week and
ŗ	preparation for outpatient treatment.
	b. D3.3 - Clinically Managed Population-Specific High-Intensity Residential Services
n	neans a twenty-four (24) hour structured living environment in combination with high-intensity clinical
S	ervices for Clients with significant cognitive impairment.
	c. 3.5 - Clinically Managed High-Intensity Residential Services means a twenty-four (24)
)	our residential care for Clients who require a twenty-four (24) hour supportive treatment environment
Ù	n order to develop sufficient recovery skills to avoid relapse or continued AOD use.
	6. Assessment means a service activity, which may include a clinical analysis of the history
a	nd current status of a Client's mental, emotional, behavioral disorder, and relevant cultural issues.
I	The Assessment also needs to include history of services being provided, Diagnosis, and use of
(esting procedures.
	7. California Outcomes Measurement System (CalOMS) means a statewide client-based data
	ollection and outcomes measurement system as required by the State to effectively manage and
	mprove the provision of substance use disorder services at State, County, and provider levels.
	8. Care Coordinator means an individual with a Bachelor's degree in human services or
6	elated field who will be responsible for developing and leading the Family Team and guiding the
:	volution of a POC for a Client.
	9. Case Management means services which include, but are not limited to, referral and linkage
	o ancillary services not provided by the Contractor such as contacting outside agencies and making
	eferrals for services, including academic education, vocational training, medical and dental treatment,
į	re-and-post counseling and testing for infectious diseases, legal assistance, job search assistance,
	inancial assistance, childcare, and self-help programs such as 12-step programs. Additionally, Case
	Management includes helping Clients build support in the community and helping Clients deal with
ľ	mpairments in life skills due to their substance use problems. Case management service include
]	eriodic reassessment of the Client's need for continued case management services and assistance to
)	uccessfully transition to lower or higher levels of care, as determined by review of the treatment plans.
	10. E. Client CEST-I (CESI) means the Client Evaluation of Self and Treatment
(ompleted at intake is a motivational scale that represents stage of readiness including Problem
F	Recognition, Desire for Help and Treatment Readiness.
	11. CEST-T (CEST) means the Client Evaluation of Self and Treatment at termination of
tı	reatment is a motivational scale that represents perceived progress made while in Treatment.
	12. Client/Participant means any individual, referred or enrolled, for services under the
/	Agreement, who is living with mental emotional or behavioral disorders

EXHIBIT A

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1	F 13. Collateral means significant support individual(s) in a Client's life and is/are used
2	to define services provided to the Client with the intent of improving or maintaining the mental
3	health status of the Client. The Client may or may not be present for this service activity.
4	14. Co-Occurring means when a person has both a substance use disorder and a mental
5	health disorder at the same time.
6	15. Crisis Intervention means a service, lasting less than twenty-four (24) hours that is
7	provided to or on the behalf of a Client for a condition that requires more timely response than a
8	regularly scheduled visit. Service activities may include, but are not limited to: assessment,
9	individual therapy, collateral therapy, family therapy, case management, and psychiatric evaluation.
10	G 16. Diagnosis means identifying the nature of a Client's disorder. When formulating the
11	diagnosis of Client, CONTRACTOR shall use the diagnostic codes and axes as specified in the
12	most current edition of the Diagnostic and DSM published by the American Psychiatric Association or
13	the international Classification of Diseases (ICD) as directed by the Administrator. Diagnoses will
14	be recorded on all IRIS documents, as appropriate. #
15	international Classification of Diseases (ICD) as directed by the Administrator. 17. Direct
16	Service Hours (DSH) Diagnoses will be recorded on all IRIS documents, as appropriate.
17	H. DSH means the time, measured in hours and portions of hours, that a clinician spends providing
18	services to Clients or others on behalf of Clients. DSH credit, both billable and non-billable minutes, is
19	obtained by providing mental health, case management, medication support, and crisis intervention
20	services to Clients open in IRIS.
21	18. Drug and Alcohol Treatment Access Report (DATAR) is the State Department of
22	Health Care Services (DHCS) system to collect data on Substance Use Disorder (SUD) treatment
23	capacity and waiting lists.
24	19. Drug Medi-Cal is the organized delivery of health care services for Medicaid eligible
25	individuals with substance use disorders (SUD).
26	20. Engagement means the process where a trusting relationship between CONTRACTOR's
27	staff and Client is developed over a short period of time, so CONTRACTOR and Client can develop a
28	plan to link the Client to appropriate services within the community. Engagement of the Client is the
29	objective of a successful outreach.
30	J 21. Face-to-Face Contact means, as it pertains to a FSP, a direct encounter between
31	CONTRACTOR's staff and Client(s)/parent(s)/guardian(s). This does not include contact by phone,
32	email, etc. For the purpose of completing an Encounter Document, Face-to-Face Contact means a direct
33	encounter between staff and Client(s), regardless if another individual(s) is/are present or not.
34	K 22. Family Team means a group formed to meet the needs of a FSP an eligible Client
35	through whatever means possible, and this team includes a program staff, the eligible Client, the
36	Client's family members, and other support individual(s) the family agrees to include on the team.
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L. FSP 23. Full Service Partnership (FSP) means a program model described in COUNTY's MHSA plan that has been approved by the state. The MHSA plan describes how COUNTY will utilize MHSA funds to develop and implement treatment plans for mental health Clients through FSPs. A FSP is an evidence-based and strength-based model with the focus on the individual rather than the disease.

- M 24. Group Home is means a facility for housing youth and is licensed by Community Care Licensing under the provisions of CCR, Title 22, Division 6, et seq.
- N 25. <u>Head of Service</u> means an individual ultimately responsible for overseeing the program and is required to be licensed as a mental health professional.
- 26. Intensive Care Coordination (ICC) means assessment and plan development services, to children and youth that qualify under the Katie A. Subclass, that must address the child/youth's mental health need(s) through the coordination of care with providers not primarily associated with mental health services such as the Social Services Agency, Probation Department, and schools (although the Client, collateral and mental health providers may also be present).
- 27. In Home Behavioral Service (IHBS) means intensive, individualized and strength-based nterventions, with children and youth that qualify under the Katie A. subclass, to assist the child/youth and his/her significant support persons to develop skills to achieve the goals and objectives of the child/youth's treatment plan. IHBS only includes Individual Rehabilitation and Collateral services. Mental Health Services other than Individual Rehabilitation and Collateral will be claimed separately from IHBS.
- 28. <u>Intake</u> means the initial meeting between a Client and CONTRACTOR's staff, and includes an evaluation of the Client to determine if the Client meets program criteria and is willing to seek services. —P.
- 29. IRIS means the ADMINISTRATOR's database system that collects Clients' information such as registration, scheduled appointments, laboratory information system, invoice and reporting capabilities, compliance with regulatory requirements, electronic medical records, and other relevant applications.
- Q. LCSW 30. Licensed Clinical Social Worker (LCSW) means a licensed individual, pursuant to the provisions of Chapter 14 of the California Business and Professions Code, who can provide clinical services to Clients. The license must be current and in force, and has not been suspended or revoked. Also, it is preferred that the individual has at least one (1) year of experience treating children and TAY.
- R 31. <u>Licensed Marriage and Family Counselor (MFT)</u> means a licensed individual, pursuant to the provisions of Chapter 13 of the California Business and Professions Code, pursuant to the provisions of Chapter 14 of the California Business and Professions Code, who can provide clinical services to Clients. The license must be current and in force, and has not been suspended or revoked. Also, it is preferred that the individual has at least one (1) year of experience treating children and TAY.

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EXHIBIT A

individual, pursuant to the provisions of Chapter 13 of the California Business and Professions Code,
pursuant to the provisions of Chapter 16 of the California Business and Professions Code, who can
provide clinical service to Clients. The license must be current and in force, and has not been suspended
or revoked. Also, it is preferred that the individual has at least one (1) year of experience treating
children and TAY.
T. LPT 33. Licensed Psychiatric Technician (LPT) means a licensed individual, pursuant
to the provisions of Chapter 10 of the California Business and Professions Code, who can provide
clinical services to Clients. The license must be current and in force, and has not been suspended or
revoked. Also, it is preferred that the individual has at least one (1) year of experience treating children
and TAY.
<u>U</u>
34. <u>Licensed Psychologist</u> means a licensed individual, pursuant to the provisions of Chapter
6.6 of the California Business and Professions Code, who can provide clinical services to Clients. The
license must be current and in force, and has not been suspended or revoked. Also, it is preferred
that the individual has at least one (1) year of experience treating children and TAY.
V. LVN 35. Linkage means connecting Clients to ancillary services such as outpatient
and/or residential treatment and supportive services which may include self-help groups, social
services, rehabilitation services, vocational services, job training services, or other appropriate services.
36. Licensed Vocational Nurse (LVN) means a licensed individual, pursuant to the provisions
of Chapter 6.5 of the California Business and Professions Code, who can provide clinical services
to Clients. The license must be current and in force, and has not been suspended or revoked. Also, it
is preferred that the individual has at least one (1) year of experience treating children and TAY.
₩ <u>37</u> . Medi-Cal means the State of California's implementation of the federal Medicaid health
care program which pays for a variety of medical services for children and adults who meet eligibility
criteria.
X 38. Medical Necessity means Diagnosis, impairment, and intervention related criteria as
defined in the COUNTY's MHP under Medical Necessity for Medi-Cal reimbursed Specialty
Mental Health Services.
Y 39. Medication Support Services means services provided by licensed physicians,
registered nurses, or other qualified medical staff, which include: prescribing, administering, dispensing
and monitoring of psychiatric medications or biologicals that are necessary to alleviate symptoms of
mental illness. These services also include evaluation and documentation of the clinical justification
and effectiveness of medication, dosage, side effects, compliance, and response to medication. In
addition, the licensed physicians, registered nurses, or other qualified medical staff must obtain
informed consent from Clients prior to providing medication education and plan development related to
the delivery of these services and/or Assessment to Clients.

EXHIBIT A

1	40. Mental Health Services means an individual or a group therapy and intervention being
2	provided to Clients that is designed to reduce mental disability and restores or improves daily
3	functioning. These Mental Health Services must be consistent with goals of learning and
4	development, as well as independent living and enhanced self-sufficiency. In addition, these services
5	cannot be provided as a component of adult residential services, crisis residential treatment services,
6	Crisis Intervention, crisis stabilization, day rehabilitation, or day treatment intensive. Service activities
7	may include, but are not limited to: Assessment, plan development, rehabilitation, and collateral.
8	Also, Mental Health Services may be either Face-to-Face Contact, or by telephone with Clients or
9	significant support individuals, and services may be provided anywhere in the community.
10	41. Mental Health Services Act (MHSA) means the State of California law that
11	provides funding for expanded community Mental Health Services. It is also known as "Proposition
12	<u>63."</u>
13	<u>//</u>
14	42. Mental Health Worker means an individual who has obtained a Bachelor's degree in a
15	mental health field or has a high school diploma along with two (2) years of experience delivering
16	services in a mental health field.
17	43. Mentoring Services means a service that provides support to Clients by building a
18	structured and trusting relationship over a prolonged period of time between a Client and a mentor. The
19	mentor is a peer or older individual who provides one-to-one contact and support in the following
20	areas to assist Client(s)/parent(s)/guardian(s): consistent support, guidance, and coaching in life skills;
21	concrete help and/or other relationship-building activities to the Client(s)/parent(s)/
22	guardian(s); and linking the Client(s)/parent(s)/guardian(s) to other services within the COUNTY and
23	contract operated programs.
24	44. Network Adequacy Certification Tool (NACT) means a staffing report that is required by
25	the State of California to collect information about a provider site and all of the rendering service
26	providers who work at the site.
27	45. National Provider Identifier (NPI) means the standard unique health identifier that was
28	adopted by the Secretary of HHS Services under HIPAA for health care providers. All HIPAA
29	covered healthcare providers, individuals, and organizations must obtain an NPI for use to identify
30	themselves in HIPAA standard transactions. The NPI is assigned for life.
31	46. Notice of Action (NOA-A) means a Medi-Cal requirement that informs the beneficiary that
32	she/he is not entitled to any specialty mental health service. The COUNTY has expanded the
33	requirement for an NOA-A to all beneficiaries requesting an Assessment for services and found not to
34	meet the Medical Necessity criteria for specialty Mental Health Services.
35	47. Notice of Privacy Practices (NPP) means a document that notifies Clients of uses and
36	disclosures of PHI. The NPP may be made by, or on behalf of, the health plan or health care provider
37	as set forth in the of 1996 HIPAA.

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1	48. Nurse Practitioner (NP) means a medical professional with an advanced degree in
2	nursing that performs a variety of duties in care settings focused around a nursing model.
3	49. Outreach means linking potential Clients to appropriate Mental Health Services within
4	the community. Outreach activities will include educating the community about the services offered
5	and requirements for participation in the various mental health programs within the community. Such
6	activities may result in the CONTRACTOR developing Referral sources for Clients from programs
7	being offered within the community.
8	50. Pharmacy Benefit Manager (PBM) Company means a company contracted by the
9	COUNTY that manages the medication benefits for Clients that are qualified for medication benefits.
10	51. Pre-Licensed Psychologist means an individual who has a Ph.D. or Psy.D. in Clinical
11	Psychology and is registered with the Board of Psychology as a Registered Psychologist or
12	Psychological Assistant, while acquiring hours for licensing and providing services under a waiver in
13	accordance with WIC section 575.2. The waiver may not exceed five (5) years.
14	52. Pre-Licensed Therapist means an individual who has a Master's Degree in social work or
15	MFT, PCC and is registered with the BBS as an associate clinical social worker, PCC intern, or MFT
16	intern, while acquiring hours for licensing. Registration is subject to regulations adopted by BBS.
17	53. Program Director means an individual who is responsible for all aspects of administration
18	and clinical operations of the mental health program, including development and adherence to the
19	annual budget. This individual will also be responsible for the following: hiring, development
20	and performance management of professional and support staff, and ensuring mental health
21	treatment services are provided in concert with COUNTY and state rules and regulations.
22	54. Protected health information (PHI) means individually identifiable health information
23	usually transmitted through electronic media. PHI can be maintained in any medium as defined in the
24	regulations, or for an entity such as a health plan, transmitted or maintained in any other medium. It is
25	created or received by a covered entity and is related to the past, present, or future physical or
26	mental health or condition of an individual, provision of health care to an individual, or the past,
27	present, or future payment for health care provided to an individual.
28	55. Psychiatrist means an individual who meets the minimum professional and
29	licensure requirements set forth in Title 9, CCR, Section 623, and, preferably, has at least one
30	(1) year of experience treating children and TAY.
31	56. QIC means a committee that meets quarterly to review one percent (1%) of all "high-
32	risk" Medi-Cal Clients in order to monitor and evaluate the quality and appropriateness of services
33	provided. At a minimum, the committee is comprised of one (1) ADMINSTRATOR, one (1) clinician,
34	and one (1) physician who are not involved in the clinical care of the cases.
35	57. Recovery Services means billable services available after the client has completed a course
36	of treatment. Recovery services emphasize the client's central role in managing their health, use
37	effective self-management support strategies, and organize internal and community resources to provide

EXHIBIT A

ongoing self-management support to patients.

- 58. Referral means effectively linking Clients to other services within the community and documenting follow-up provided within five (5) business days to assure that Clients have made contact with the referred service(s).
- 59. Registered Nurse (RN) means a licensed individual, pursuant to the provisions of Chapter 6 of the California Business and Professions Code, who can provide clinical services to Clients. The license must be current and in force, and has not been suspended or revoked. Also, it is preferred that the individual has at least one (1) year of experience treating children and TAY.
- <u>60</u>. <u>Assessment</u> means a service activity, which may include a clinical analysis of the history and current status of a Client's mental, emotional, behavioral disorder, and relevant cultural issues. The Assessment also needs to include history of services being provided, Diagnosis, and use of testing procedures.
- 2. <u>Collateral means significant support individual(s) in a Client's life and is/are used to define services provided to the Client with the intent of improving or maintaining the mental health status of the Client. The Client may or may not be present for this service activity.</u>
- 3. <u>Co-Occurring</u> can refer dual diagnoses of different conditions occurring within the same individuals. In this case, it refers to clients who have substance use disorders as well as mental health disorders.
- 4. <u>ICC Service</u> means assessment and plan development services, to children and youth that qualify under the Katie A. Subclass, that must address the child/youth's mental health need(s) through the coordination of care with providers not primarily associated with mental health services such as the Social Services Agency, Probation Department, and schools (although the Client, collateral and mental health providers may also be present).
- 5. <u>IHBS Service</u> means intensive, individualized and strength based interventions, with children and youth that qualify under the Katie A. Subclass, to assist the child/youth and his/her significant support persons to develop skills to achieve the goals and objectives of the child/youth's treatment plan. IHBS only includes Individual Rehabilitation and Collateral services. Mental Health Services other than Individual Rehabilitation and Collateral will be claimed separately from IHBS.
- 6. Medication Support Services means services provided by licensed physicians, registered nurses, or other qualified medical staff, which include: prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals that are necessary to alleviate symptoms of mental illness. These services also include evaluation and documentation of the clinical justification and effectiveness of medication, dosage, side effects, compliance, and response to medication. In addition, the licensed physicians, registered nurses, or other qualified medical staff must obtain informed

from Clients prior to providing medication education and plan development related to the delivery of these services and/or Assessment to Clients.

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1	7. Rehabilitation Service means an activity which includes assistance to improving
2	maintaining, or restoring a Client's or group of Clients' functional skills, daily living skills, social and
3	leisure skill, grooming and personal hygiene skills, meal preparation skills, support resources
4	and/or medication education.
5	<u>8//</u>
6	61. Student Intern means student(s) currently enrolled in an accredited graduate or
7	undergraduate program and is/are accumulating supervised work experience hours as part of field
8	work, internship, or practicum requirements. Acceptable programs include all programs that assist
9	students in meeting the educational requirements to be a Licensed MFT, a LCSW, a Licensed Clinical
10	Psychologist, a Licensed PCC, or to obtain a Bachelor's degree. Individuals with graduate degrees and
11	have two (2) years of full-time experience in a mental health setting, either post-degree or as part of
12	the program leading to the graduate degree, are not considered as students.
13	62. Supervisory Review means ongoing clinical case reviews in accordance with
14	procedures developed by the COUNTY to determine the appropriateness of the Diagnosis and
15	treatment plan for Clients, as well as to monitor compliance to the minimum ADMINISTRATOR and
16	Medi-Cal charting standards. Supervisory Review is conducted by the program/clinic director or
17	designee.
18	63. TCM/Targeted Case Management means services that assist a Client to access needed
19	medical, educational, social, prevocational, vocational, rehabilitative, or other community services
20	These service activities may include, but are not limited to: communicating and coordinating services
21	through referral; monitoring service delivery to ensure Clients' access to service and the service delivery
22	system; and tracking of Clients' progress and plan development.
23	9. TBS 64. Therapeutic Behavioral Services (TBS) means one-on-one behavioral
24	interventions with a Client, which is designed to reduce or eliminate targeted behaviors as identified
25	in the Client's treatment plan. Collateral services are also provided to parent(s)/guardian(s) as part of
26	TBS. Clients must be Medi-Cal eligible and meet TBS class membership and service need requirements
27	Documentation in the medical record must support Medical Necessity for these intensive services
28	Cases in which Clients are receiving more than twenty (20) hours per week of TBS or those who are
29	expected to receive more than four months (120 days) of TBS must be approved by
30	ADMINISTRATOR. ADMINISTRATOR has to approve individuals that are delivering these
31	intervention services to ensure they are qualified to deliver these services.
32	1065. Therapy means a therapeutic intervention that focuses primarily on symptom
33	reduction as a means to improve functional impairments. Therapy may be delivered to a Client or a
34	group of Clients, which may include family Therapy with Client being present.
35	Z. MHSA 66 means the State of California law that provides funding for expanded
36	community Mental Health Services. It is also known as "Proposition 63."
37	

1	AA. <u>Mental Health Worker</u> means an individual who has obtained a Bachelor's degree in a
2	mental health field or has a high school diploma along with two (2) years of experience delivering
3	services in a mental health field.
4	— AB. Mentoring Services means a service that provides support to Clients by building a structured
5	and trusting relationship over a prolonged period of time between a Client and a mentor. The mentor is
6	a peer or older individual who provides one-to-one contact and support in the following areas to assist
7	Client(s)/parent(s)/guardian(s): consistent support, guidance, and coaching in life skills; concrete help
8	and/or other relationship-building activities to the Client(s)/parent(s)/guardian(s); and linking the
9	Client(s)/parent(s)/guardian(s) to other services within the COUNTY and contract operated programs.
10	— AC. <u>NPI</u> means the standard unique health identifier that was adopted by the Secretary of HHS
11	Services under HIPAA for health care providers. All HIPAA covered healthcare providers, individuals,
12	and organizations must obtain an NPI for use to identify themselves in HIPAA standard transactions.
13	The NPI is assigned for life.
14	— AD. <u>NOA-A</u> means a Medi-Cal requirement that informs the beneficiary that she/he is not
15	entitled to any specialty mental health service. The COUNTY has expanded the requirement for an
16	NOA-A to all beneficiaries requesting an Assessment for services and found not to meet the Medical
17	Necessity criteria for specialty Mental Health Services.
18	AE. NPP means a document that notifies Clients of uses and disclosures of PHI. The NPP may be
19	made by, or on behalf of, the health plan or health care provider as set forth in the of 1996 HIPAA.
20	AF. Nurse Practitioner means a medical professional with an advanced degree in nursing that
21	performs a variety of duties in care settings focused around a nursing model.
22	AG. Outreach means linking potential Clients to appropriate Mental Health Services within the
23	community. Outreach activities will include educating the community about the services offered and
24	requirements for participation in the various mental health programs within the community. Such
25	activities may result in the CONTRACTOR developing Referral sources for Clients from programs
26	being offered within the community.
27	— AH. PBM Company means a company contracted by the COUNTY that manages the medication
28	benefits for Clients that are qualified for medication benefits.
29	— AI. <u>Pre-Licensed Psychologist</u> means an individual who has a Ph.D. or Psy.D. in Clinical
30	Psychology and is registered with the Board of Psychology as a Registered Psychologist or
31	Psychological Assistant, while acquiring hours for licensing and providing services under a waiver in
32	accordance with WIC section 575.2. The waiver may not exceed five (5) years.
33	AJ. Pre Licensed Therapist means an individual who has a Master's Degree in social work or MFT.
34	PCC and is registered with the BBS as an associate clinical social worker, PCC intern, or MFT intern,
35	while acquiring hours for licensing. Registration is subject to regulations adopted by BBS.
36	AK. Program Director means an individual who is responsible for all aspects of administration and
37	clinical operations of the mental health program, including development and adherence to the annual
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budget. This individual will also be responsible for the following: hiring, development and 1 performance management of professional and support staff, and ensuring mental health treatment 2 services are provided in concert with COUNTY and state rules and regulations. 3 AL. PHI means individually identifiable health information usually transmitted through electronic 4 media. PHI can be maintained in any medium as defined in the regulations, or for an entity such as a 5 health plan, transmitted or maintained in any other medium. It is created or received by a covered entity 6 and is related to the past, present, or future physical or mental health or condition of an individual, 7 provision of health care to an individual, or the past, present, or future payment for health care provided 8 to an individual. 9 AM. Psychiatrist means an individual who meets the minimum professional and licensure 10 requirements set forth in Title 9, CCR, Section 623, and, preferably, has at least one (1) year of 11 experience treating children and TAY. 12 AN. Psychology Student or Psychology Intern means an individual who is in school pursuing a 13 Ph.D. or Psy.D. in Clinical Psychology, and may or may not meet the criteria for a DHCS Waiver in 14 15 order to provide services in accordance with DHCS Information Letter No. 10-03. The waiver may not exceed (5) years. 16 AO. QIC means a committee that meets quarterly to review one percent (1%) of all "high-17 risk" Medi-Cal Clients in order to monitor and evaluate the quality and appropriateness of services 18 19 provided. At a minimum, the committee is comprised of one (1) ADMINSTRATOR, one (1) clinician, and one (1) physician who are not involved in the clinical care of the cases. 20 AP. RCL/Rate Classification Level Group Home means a Group Home reviewed by the State 21 Department of Social Services, Foster Care Rates Bureau, that meets the requirements for a RCL of 1 to 22 14, to provide eligible minors room and board and supervision. 23 AQ. Referral means effectively linking Clients to other services within the community and 24 documenting follow up provided within five (5) business days to assure that Clients have made contact 25 with the referred service(s). 26 AR.RN means a licensed individual, pursuant to the provisions of Chapter 6 of the California 27 Business and Professions Code, who can provide clinical services to Clients. The license must be 28 current and in force, and has not been suspended or revoked. Also, it is preferred that the individual has 29 at least one (1) year of experience treating children and TAY. 30 AS. Student Intern means student(s) currently enrolled in an accredited graduate or undergraduate 31 program and is/are accumulating supervised work experience hours as part of field work, internship, or 32 practicum requirements. Acceptable programs include all programs that assist students in meeting the 33 educational requirements to be a Licensed MFT, a LCSW, a Licensed Clinical Psychologist, a Licensed 34 PCC, or to obtain a Bachelor's degree. Individuals with graduate degrees and have two (2) years of full-35 time experience in a mental health setting, either post-degree or as part of the program leading to the 36 graduate degree, are not considered as students. 37

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AT. <u>Supervisory Review</u> means ongoing clinical case reviews in accordance with procedures developed by the COUNTY to determine the appropriateness of the Diagnosis and treatment plan for Clients, as well as to monitor compliance to the minimum ADMINISTRATOR and Medi-Cal charting standards. Supervisory Review is conducted by the program/clinic director or designee.

— AU. <u>Token</u> means the security device which allows an end-user to access ADMINISTRATOR's computer based IRIS.

AV 67. UMDAP means the method used for determining the annual Client liability for mental health services received from the COUNTY's mental health system and is set by the State of California.

AW

<u>68</u>. <u>Wraparound Orange County</u> means the wraparound program administered by COUNTY's SSA and is available to children and TAY who are returning from or being considered for placement in group homes.

B. CONTRACTOR and ADMINISTRATOR may mutually agree, in writing, to modify the Common Terms and Definitions Paragraph of this Exhibit A to the Agreement.

II. BUDGETBUDGET

A. COUNTY shall pay CONTRACTOR in accordance with the Payments Paragraph in this **ExhibitEXHIBIT** A to the Agreement and the following budgets, which are set forth for informational purposes only and may be adjusted by mutual agreement, in writing, by ADMINISTRATOR and CONTRACTOR.

	PERIOD ONE	PERIOD TWO	TOTAL
ADMINISTRATIVE COST			
Indirect Costs	\$ <u>59,634</u>	\$ <u>59,634</u>	\$ 119,268
SUBTOTAL			
ADMINISTRATIVE COST	\$ 59,634	\$ 59,634	\$ 119,268
PROGRAM COST			
——Salaries	\$263,528	\$263,528	\$527,056
— Benefits	79,058	79,058	158,116
Services and Supplies	- 34,974	34,974	-69,948
— Subcontractor	20,000	20,000	<u> 40,000</u>
SUBTOTAL			
PROGRAM COST	\$397,560	\$397,560	\$795,120
TOTAL GROSS COST	\$457,194	\$457,194	\$914,388
REVENUE			

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1	Federal Medi-Cal	\$182,194	\$182,194	\$364,388
2	MHSA	-275,000	-275,000	<u>-550,000</u>
3	TOTAL REVENUE	\$457,194	\$457,194	\$914,388
4				
5	MAXIMUM OBLIGATION	\$457,194	\$457,194	\$914,388
6				
7	<u>ADMINISTRATIVE</u>	E COSTS		
8	Indirect Costs \$ 65,657			
9	SUBTOTAL ADMINISTRATIVE COSTS			<u>,657</u>
10				
11	PROGRAM COSTS			
12	<u>Salaries</u>		<u>\$270</u>	<u>,331</u>
13	<u>Benefits</u>		<u>67</u>	<u>,583</u>
14	Services and Suppl	<u>lies</u>	99	<u>,799</u>
15	<u>SUBTOTAL</u> <u>\$437,713</u>			
16	PROGRAM COSTS			
17				
18	TOTAL GROSS CO	<u>STS</u>	<u>\$503</u>	<u>,370</u>
19				
20	<u>REVENUE</u>			
21	FEDERAL MEDI-CAL \$200,664			
22	<u>MHSA</u>		\$302	
23	TOTAL REVENUE \$503,370			<u>,370</u>
24	TOTAL MANDAU	A ODLIGATION	Φ502	270
25	TOTAL MAXIMUM	1 OBLIGATION	<u>\$503</u>	,3/0
26	R CONTRACTOR agrees that the	a amount of the Sta	ta match is depende	ant upon, and shall at no
27 28	B. CONTRACTOR agrees that the amount of the State match is dependent upon, and shall at no			
29	time be greater than, the amount of Federal Medi-Cal actually generated by CONTRACTOR, unless authorized by ADMINISTRATOR.			
30				
31	B. BUDGET/STAFFING MODI	FICATIONS – CO	NTRACTOR may	request to shift funds
32	between budgeted line items, for the			_
33	continuity of care to its members, by uti	1 1		1
34	ADMINISTRATOR. CONTRACTOR			-
35	Request to ADMINISTRATOR for consideration, in advance, which shall include a justification			
36	narrative specifying the purpose of the request, the amount of said funds to be shifted, and the sustaining			
37	annual impact of the shift as may be	applicable to the cu	irrent contract perio	od and/or future contract

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36 37 periods. CONTRACTOR shall obtain written approval of any Budget/Staffing Modification Request(s) from ADMINISTRATOR prior to implementation by CONTRACTOR. Failure of CONTRACTOR to obtain written approval from ADMINISTRATOR for any proposed Budget/Staffing Modification Request(s) may result in disallowance of those costs.

C. FINANCIAL RECORDS - CONTRACTOR shall prepare and maintain accurate and complete financial records of its cost and operating expenses. Such records will reflect the actual cost of the type of service for which payment is claimed. Any apportionment of or distribution of costs, including indirect costs, to or between programs or cost centers of CONTRACTOR shall be documented, and will be made in accordance with GAAP, and Medicare regulations. The Client eligibility determination and fee charged to and collected from Clients, together with a record of all billings rendered and revenues received from any source, on behalf of Clients treated pursuant to the Agreement, must be reflected in CONTRACTOR's financial records.

D. The total cost of services provided for in the Agreement are based upon projected revenue generation and shall be reimbursed by federal Medi-Cal and state revenues. CONTRACTOR agrees that if actual federal Medi-Cal reimbursement, based upon the completed Cost Report, as specified in the Cost Report Paragraph of the Agreement, for each Fiscal Year is less than budgeted, the Maximum Obligation may, at ADMINISTRATOR's sole discretion, be adjusted down by the amount of under generated federal Medi-Cal and/or State revenue.

DE. In the event CONTRACTOR collects fees and insurance, including Medicare, for services provided pursuant to the Agreement, CONTRACTOR may make written application to ADMINISTRATOR to retain such revenues; provided, however, the application must specify that the fees and insurance shall be utilized exclusively to provide Mental Health Services. ADMINISTRATOR may, at its sole discretion, approve any such retention of revenues. Approval by ADMINISTRATOR shall be in writing to CONTRACTOR and shall specify the amount of said revenues to be retained and the quantity of services to be provided by CONTRACTOR.

E. BUDGET/STAFFING MODIFICATIONS — CONTRACTOR may request to shift funds between budgeted line items for the purpose of meeting specific program needs or for providing continuity of care to its members, by utilizing a Budget/Staffing Modification Request form provided by ADMINISTRATOR. CONTRACTOR shall submit a properly completed Budget/Staffing Modification Request to ADMINISTRATOR for consideration, in advance, which shall include a justification narrative specifying the purpose of the request, the amount of said funds to be shifted, and the sustaining impact of the shift as may be applicable to the current contract period and/or future contract periods. CONTRACTOR shall obtain written approval of any Budget/Staffing Modification Request(s) from ADMINISTRATOR prior to implementation by CONTRACTOR. Failure of CONTRACTOR to obtain written approval from ADMINISTRATOR for any proposed Budget/Staffing Modification Request(s) may result in disallowance of those costs.

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F. FINANCIAL RECORDS—CONTRACTOR shall prepare and maintain accurate and complete financial records of its cost and operating expenses. Such records will reflect the actual cost of the type of service for which payment is claimed. Any apportionment of or distribution of costs, including indirect costs, to or between programs or cost centers of CONTRACTOR shall be documented, and will be made in accordance with GAAP.

— G. CONTRACTOR and ADMINISTRATOR may mutually agree, in writing, to modify the Budget Paragraph of this Exhibit A to the Agreement.

III. PAYMENTS PAYMENTS

- A. COUNTY shall pay CONTRACTOR monthly, in arrears, the provisional amount of \$38,100\$41,948 per month, as specified in the Referenced Contract Provisions of the Agreement. All payments are interim payments only, and subject to Final Settlement in accordance with the Cost Report Paragraph of the Agreement for which CONTRACTOR shall be reimbursed for the actual cost of providing the services hereunder; provided, however, the total of such payments does not exceed COUNTY's the Maximum Obligation as specified in the Referenced Contract Provisions of the Agreement, and, provided further, CONTRACTOR's costs are reimbursable pursuant to COUNTY, state, and federal regulations. ADMINISTRATOR may, at its discretion, pay supplemental invoices for any month for which the provisional amount specified above has not been fully paid.
- 1. In support of the monthly <u>invoice</u> nvoices, CONTRACTOR shall submit an Expenditure and Revenue Report as specified in the Reports Paragraph of this Exhibit A to the Agreement. ADMINISTRATOR shall use the Expenditure and Revenue Report to determine payment to CONTRACTOR as specified in Subparagraphs A.2. and A.3., below.
- 2. If, at any time, CONTRACTOR's Expenditure and Revenue Reports indicate that the provisional amount payments exceed the actual cost of providing services, ADMINISTRATOR may reduce COUNTY payments to CONTRACTOR by an amount not to exceed the difference between the year-to-date provisional amount payments to CONTRACTOR's and the year-to-date actual cost incurred by CONTRACTOR.
- 3. If, at any time, CONTRACTOR's Expenditure and Revenue Reports indicate that the provisional amount payments are less than the actual cost of providing services, ADMINISTRATOR may authorize an increase in the provisional amount payment to CONTRACTOR by an amount not to exceed the difference between the year-to-date provisional amount payments to CONTRACTOR and the year-to-date actual cost incurred by CONTRACTOR.
- B. CONTRACTOR's <u>invoices invoicing</u> shall be on a form approved or supplied by ADMINISTRATOR and provide such information as is required by ADMINISTRATOR. Invoices are due the tenth (10th) day of each month. Invoices received after the due date may not be paid within the same month. Payments to CONTRACTOR should be released by COUNTY no later than twenty-one (21thirty (30) calendar days after receipt of the correctly completed invoice.

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- C. All invoices to COUNTY shall be supported, at CONTRACTOR's facility, by source documentation including, but not limited to, ledgers; journals; time sheets; invoices; bank statements; canceled checks; receipts; receiving records; and records of services provided.
- D. ADMINISTRATOR may withhold or delay any payment if CONTRACTOR fails to comply with any provision of the Agreement.
- E. COUNTY shall not reimburse CONTRACTOR for services provided beyond the expiration and/or termination of the Agreement, except as may otherwise be provided under the Agreement, or specifically agreed upon in a subsequent Agreement.
- F. CONTRACTOR and ADMINISTRATOR ADMINISRATOR may mutually agree, in writing, to modify the Payments Paragraph of this Exhibit A to the Agreement.

IV. REPORTSREPORTS

A. FISCAL

- 1. CONTRACTOR shall submit monthly Expenditure and Revenue Reports These reports shallwill be on a form acceptable to, or provided by, ADMINISTRATOR. ADMINISTRATOR and shallwill report actual costs and revenues for CONTRACTOR's program described in the Services Paragraph of this Exhibit A to the Agreement. Any changes, modifications, or deviations to any approved budget line item must be approved in advance and in writing Such reports will also include actual productivity as defined by ADMINISTRATOR and annotated on the monthly Expenditure and Revenue Report, or said cost deviations may be subject to disallowance. Such. The reports reports shall be received by submitted to ADMINISTRATOR no later than twenty (20) calendar days the twentieth (20th) day following the end of the month being reported. CONTRACTOR must request in writing any extensions to the due date of the monthly required reports. If an extension is approved by ADMINISTRATOR, the total extension will not exceed more than five (5) calendar days.
- 2. CONTRACTOR shall submit monthly Year-End Projection Reports These reports shallwill be on a form acceptable to, or provided by, ADMINISTRATOR. ADMINISTRATOR and shallwill report anticipated year-end actual costs and revenues for CONTRACTOR's program described in the Services Paragraph of this Exhibit A to the Agreement. Such reports shallwill include actual monthly costs and revenue to date and anticipated monthly costs and revenue to the end of the fiscal year, and shall include a projection narrative justifying the year end projections. Year-End Projection Reports shall will be submitted in conjunction with the Monthly Expenditure and Revenue Reports.
- B. STAFFING REPORT CONTRACTOR shall submit monthly Staffing Reports to ADMINISTRATOR. CONTRACTOR's These reports shall contain required information, and be on a form acceptable to, or provided by, ADMINISTRATOR.- CONTRACTOR shall submit these reports no later than twenty (20) calendar days following the end of the month being reported. CONTRACTOR

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must request in writing any extensions to the due date of the monthly required reports. If an extension is approved by ADMINISTRATOR, the total extension will not exceed more than five (5) calendar days.

C. PROGRAMMATIC – CONTRACTOR shall submit monthly programmatic reports to ADMINISTRATOR, including a program narrative and Performance Outcome report, on a form acceptable to or provided by ADMINISTRATOR, which will be submitted to ADMINISTRATOR no later than twenty (20) calendar days following the end of the month being reported, unless otherwise specified. Programmatic reports to ADMINISTRATOR. These reports shall be in a format approved by ADMINISTRATOR and shall will include, but not be limited to, descriptions of the following:

- 1. Training provided to staff; and
- 2. A description of CONTRACTOR's progress in implementing the provisions of the Agreement, any performance objectives, outcomes, and pertinent facts or interim findings as directed by ADMINISTRATOR., staff changes, status of licenses and/or certifications, changes in population served and reasons for any such changes. CONTRACTOR shall state whether it is or is not progressing satisfactorily in achieving all the terms of the Agreement, and if not, shall specify what steps will be taken to achieve satisfactory progress.
- 3. CONTRACTOR shall be prepared to present and discuss the their programmatic reports at the their monthly scheduled meetings with ADMINISTRATOR, to include whether or not CONTRACTOR is progressing satisfactorily and if not, specify what steps are being taken to achieve satisfactory progress. Such reports and shall be received by state whether it is or is not progressing satisfactorily in achieving all the terms of this Agreement, and if not, shall specify what steps will be taken to achieve satisfactory progress.
- 4. CONTRACTOR shall advise ADMINISTRATOR no later than twentieth (20th) calendar day following the end of the month being reported of any special incidents, conditions, or issues that adversely affect the quality or accessibility of Client-related services provided by, or under contract with, the COUNTY as identified in the HCA P&Ps.
- D. ADDITIONAL REPORTS Upon ADMINISTRATOR's request, CONTRACTOR shall make such additional reports as required by ADMINISTRATOR concerning CONTRACTOR's activities as they affect the services hereunder. ADMINISTRATOR shall be specific as to the nature of information requested and allow up to thirty (30) calendar days for CONTRACTOR to respond.
- E. CONTRACTOR agrees to enter psychometrics into COUNTY's EHR system as requested by ADMINISTRATOR. Said psychometrics are for the COUNTY's analytical uses only, and shall not be relied upon by CONTRACTOR to make clinical decisions. CONTRACTOR agrees to hold COUNTY harmless, and indemnify pursuant to Section XI, from any claims that arise from non-COUNTY use of said psychometrics.
- F. CONTRACTOR shall submit reports as required by the ADMINISTRATOR and/or the State and shall make all collected data available to ADMINISTRATOR upon request by CMS.

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1	G. CONTRACTOR shall collect data on beneficiary characteristics as specified by the
2	ADMINISTRATOR, and on all services through an encounter data system or other method as specified
3	by ADMINISTRATOR.
4	H. ECONTRACTOR shall ensure that data submitted is accurate and complete by verifying
5	the accuracy and timeliness of reported data, screening the data for completeness, logic and consistency,
6	submitting data in standardized formats as determined appropriate by ADMINISTRATOR.
7	I. CONTRACTOR shall document all adverse incidents affecting the physical and/or emotional
8	welfare of Clients including, but not limited to, serious physical harm to self or others, serious
9	destruction of property, developments, etc., and which may raise liability issues with COUNTY.
10	CONTRACTOR shall notify COUNTY within twenty-four (24) hours of becoming aware of any such
11	serious adverse incident, and complete a Special Incident Report in accordance with established P&Ps.
12	J. CONTRACTOR and ADMINISTRATOR may mutually agree, in writing, to modify the
13	Reports Paragraph of this Exhibit A to the Agreement.
14	
15	V. <u>SERVICES</u> SERVICES
16	A. FACILITIES
17	1. CONTRACTOR, CONTRACTOR shall maintain the capability to provide outpatient
18	services to children and transitional age youth with co-occurring mental health and substance abuse
19	disorders in conjunction with the following residential facility(ies), which meets meet(s) the minimum
20	requirements for Medi-Cal eligibility, or any other location approved by ADMINISTRATOR as
21	specified below:
22	
23	Touchstones
24	525 N. Parker St.
25	Orange, CA 92867
26	
27	2. CONTRACTOR shall also make an effort to provide services in community-based facilities
28	such as school sites when appropriate for more effective provision of services to the client.
29	3. CONTRACTOR shall maintain regularly scheduled service hours, five days a week
30	throughout the year and maintain the capability to provide services during after school hours on
31	weekdays until 8:00 p.m., and on weekends, if necessary, in order to accommodate clients unable to
32	participate during regular business hours.
33	a. CONTRACTOR's administrative staff 3. CONTRACTOR shall
34	maintain regularly scheduled service hours throughout the year and maintain the capability to provide
35	services during after-school hours, on weekdays until 8:30 p.m., and on weekends in order to
36	accommodate clients unable to participate during traditional business hours.
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1	4. CONTRACTOR's holiday schedule shall be consistent with COUNTY's holiday schedule
2	unless otherwise approved, in advance and in writing, by ADMINISTRATOR.
3	b. CONTRACTOR shall provide twenty-four (24) hour crisis intervention
4	services and provide a plan for twenty four (24) hour psychiatric emergency services to minors which
5	includes informing clients and their families whom to contact for emergency services when the
6	CONTRACTOR's facility is closed.
7	4. Upon ADMINISTRATOR's certification of the provider's existing site(s), the
8	CONTRACTOR shall be responsible for making any necessary changes to meet and maintain Medi-Cal
9	site standards.
10	B. MENTAL HEALTH OUTPATIENT SERVICES
11	1. CONTRACTOR shall provide outpatient mental health services primarily to COUNTY
12	Medi-Cal eligible clients up to the age of twenty-one (21) years old.
13	2. CONTRACTOR shall conduct outreach to develop and maintain CONTRACTOR's own
14	referral sources to ensure sufficient caseloads to meet contractual obligations.
15	3. CONTRACTOR shall provide medically necessary services to Medi-Cal eligible, special
16	population clients that may include, but not be limited to, preschool children, wards and dependents of
17	the courts, dually diagnosed children, group home and foster children, and TAY. Services shall be
18	provided at a level and frequency and duration that is consistent with each client's level of dysfunction
19	and treatment goals, and consistent with individualized, solution-focused, evidenced-based practices.
20	The population to whom services are to be provided shall include, but may not be limited to:
21	a. Children who are acutely or chronically and seriously mentally ill, and for whom
22	hospitalization or other out-of-home placement is imminent without immediate intervention.
23	b. Children who are severely emotionally ill but not in an emergency situation who,
24	without appropriate treatment, will deteriorate and later require more intensive and costly treatment, and
25	possibly face removal from their homes.
26	c. Families whose children can be diverted from the regular mental health care system
27	through parent education and consultation services.
28	d. Children at risk for psychiatric hospitalization especially those whose mental health
29	issues are complicated by substance use.
30	e. Children who are having difficulty in school, or are at risk of being placed in special
31	education.
32	f. Children who are in special education.
33	g. Minors of all ages who are in group home placement and who meet the COUNTY's
34	admission criteria under the Medi-Cal Outpatient Consolidation Plan.
35	h. Foster children of all ages and underserved clients whose mental health problems are
36	causing them impaired functioning in different life domains.
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- g. Similar children who may be referred by a CalOPTIMA primary care provider.
- 4. In the situation where a Medi-Cal client no longer meets Medi-Cal eligibility as verified by the State Medi-Cal website, CONTRACTOR, upon reasonable discovery of this situation, shall discharge the client from IRIS and refer the client to appropriate services in the community. If necessary, CONTRACTOR can request, in writing, approval from ADMINISTRATOR to continue to provide services for a specified amount of time/sessions as determined appropriate by ADMINSTRATOR while linking the client to other appropriate services.
- 5 4. CONTRACTOR shall offer clinical intervention within five (5) business days of client's referral for services. A sufficient amount of treatment services shall be provided during evening hours in order to accommodate clients and their parents not able to participate during regular day-time hours. Treatment services shall include, but may not be limited to:
- a. Performing clinical and psycho-diagnostic assessment using use the diagnostic codes as specified in the most current International Classification of Diseases Clinical Modification (ICD-CM) and further defined in the current Diagnostic and Statistical Manual of Mental Disorders (DSM-IV Five Axis diagnosis,) published by the American Psychiatric Association or updated classification as directed by ADMINISTRATOR, to This formulation shall include clinical consideration of each fundamental need: physical, psychological, maturational, developmental, familial, educational, social, environmental and recreational. Additional examinations, tests and evaluations may be conducted as clinically indicated. Findings of the examinations and evaluations shall be documented in the client record and signed by CONTRACTOR's appropriate and responsible staff.
 - b. Obtaining valid consents from parents or courts for treatment.
- c. Developing a written treatment plan for each client that shall be based on the assessment and diagnosis of that client. The treatment plan shall delineate and justify all specific treatment modes and therapeutic modalities to be used, and shall be developed in accordance with ADMINISTRATOR standards, and utilize a full range of appropriate psychiatric and psychological treatment modes and modalities. All An interim treatment plan shall be created for each participant at time of entry into the program with the formal treatment/service plans, coordination plans, and assessment documents shall be developed within sixty (60 fourteen (14) calendar days from the first planned face-to-face contact with an individual client and/or significant support person(s). Such plans shall identify specific treatment modes, milestones for the individual client, obstacles/symptoms, and efforts of significant support person(s) and program staff on behalf of the client. All treatment/service plans shall include observable and measurable client milestones.
- d. Use of individual therapy, brief intensive services, and short and long-term group therapy modalities including psycho-educational, cognitive behavioral and child management therapy techniques. CONTRACTOR shall develop and implement group therapy modalities for conditions that, according to established research, would particularly show improvement when treated in this manner.

EXHIBIT A

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1	e. Collateral services, including individual therapy to a client's adult caregivers to help
2	them in their parenting role. Services shall be provided to adult caregivers when it is determined that i
3	is in the best interest in treating the minor client, and CONTRACTOR shall promote active participation
4	of client's family. CONTRACTOR shall refer the adult caregiver(s) to an appropriate adult menta
5	health provider for medication and/or mental health services to address the adult caregiver's DSM-V
6	mental disorder.
7	f. Providing other mental health services which may include, but not be limited to, family
8	therapy, crisis intervention, treatment planning, discharge planning, case management, linkage, and
9	consultation.
10	g. Medication support services, including a system of medication quality review, which
11	shall be provided by well trained, experienced psychiatrists knowledgeable in the use of medication to
12	improve the functioning and enhance the self-esteem of children. Medication used solely for psychiatric
13	purposes, and no other purposes, shall be prescribed for all clients for whom it is clinically indicated
14	CONTRACTOR shall ensure that the following are adhered to:
15	1) Established plan for maximizing use of physician time.
16	2) CONTRACTOR shall use COUNTY's formulary and prescribing practices.
17	3) Prescriptions may be filled at any pharmacy with which the COUNTY's Pharmacy
18	Benefits Manager has a contract; provided that CONTRACTOR shall be responsible for noting the
19	Medi Cal number on prescriptions for Medi Cal clients.
20	4) CONTRACTOR shall provide COUNTY, in writing, with the name, license
21	number, and Drug Enforcement Agency number of any physician who will be prescribing medications
22	prior to the physician's start date. Failure to so notify COUNTY may result in CONTRACTOR being
23	liable for the cost of the medication.
24	5) CONTRACTOR shall order such laboratory tests as are necessary and appropriate
25	to monitor psychotropic medications and shall be responsible for the cost of such tests.
26	hg. In coordination and integration with the COUNTY, provide or cause to be
27	provided, all necessary substance abuse treatment services for clients who are dually diagnosed with a
28	concurrent substance abuse problem in addition to their mental illness, when appropriate.
29	ih. Providing advocacy services on behalf of the clients including intervening for the
30	clients with social services, probation and health departments, justice system, etc., as well as attending
31	Individual Education Program meetings when requested by COUNTY.
32	ji. Providing additional services, through a wide range of service options, which may
33	include, but not be limited to, in-classroom consultation and visits to other facilities, including, but no
34	limited to, Juvenile Hall, schools, Orangewood Children and Family Center, contractor clinics, and
35	COUNTY operated clinics to provide treatment, assessment, and consultation.
36	6. CONTRACTOR shall accept referrals from and make referrals to the various MHSA
37	programs, as appropriate. CONTRACTOR shall coordinate referrals with other existing mental health

services and wraparound services, to ensure that clients and their families are given access to the most appropriate level and type of service. Other services may include Wraparound Orange County; MHSA FSP programs for children, Crisis Residential Programs, TAY, and other COUNTY mental health services.

- 7. CONTRACTOR shall participate in any clinical case review and implement any recommendations made by COUNTY to improve client care.
- 8. CONTRACTOR shall conduct Supervisory Review at sixty (60) calendar day and six (6) month intervals, in accordance with procedures developed by ADMINISTRATOR. CONTRACTOR shall conduct thirty (30)-day review of open cases, or previously opened with another provider. CONTRACTOR shall ensure that all chart documentation complies with all federal, state, and local guidelines and standards.

C. CONTRACTOR RESPONSIBILITIES

- 1. CONTRACTOR shall ensure that all staff are trained and have a clear understanding of CONTRACTOR's administrative and program P&Ps. CONTRACTOR shall provide signature confirmation of its P&P training for each staff member and place in their personnel files.
- 2. CONTRACTOR shall ensure that all staff complete the COUNTY's Annual Provider Training, and those designated staff responsible for input into IRIS complete IRIS New User Training.
- 3. CONTRACTOR shall ensure that Annual Compliance Training is completed as set forth in Subparagraph C. of the Compliance Paragraph of the Agreement.
- 4. CONTRACTOR shall agree to adopt and comply with the documentation standards as per ADMINISTRATOR's Standards of Care practices; P&P's, Annual Provider Training; DHCS State Contract; Title IX; the State EPSDT Documentation Manual; the State EPSDT TBS Documentation Manual; and the EPSDT TBS Coordination of Care Best Practices Manual as provided by ADMINISTRATOR, which describe, but are not limited to, the requirements for Medi-Cal and ADMINISTRATOR charting standards; and any state regulatory requirements.—
- 5. CONTRACTOR shall regularly review their charting, IRIS data input, and invoice systems to ensure compliance with COUNTY and State P&Ps and establish mechanisms to prevent inaccurate claim submissions.
- 6. CONTRACTOR shall maintain on file at the facility minutes and records of all quality improvement meetings and processes. Such records and minutes shall also be subject to regular review by ADMINISTRATOR in the manner specified in the Quality Improvement Implementation Plan and ADMINISTRATOR's P&Ps.

7. CONTRACTOR shall attend:

- a. Case conferences, as requested by ADMINISTRATOR to address any aspect of clinical care.
- b. Monthly meetings with ADMINISTRATOR to discuss contractual and other issues related to, but not limited to compliance with P&Ps, statistics and clinical services.

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EXHIBIT A

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- c. Clinical staff training for individuals by ADMINISTRATOR. Such training shall be conducted by CONTRACTOR and/or ADMINISTRATOR.
 - d. Quarterly QIC meetings.
- 8. CONTRACTOR shall allow ADMINISTRATOR to attend, and if necessary conduct, QIC and medication monitoring meetings.

D. PERFORMANCE OUTCOMES

- 1. CONTRACTOR shall complete Performance Outcome Measures as required by State and/or COUNTY.
- 2. ADMINISTRATOR shall develop and provide CONTRACTOR with performance outcome measure guidelines for the purpose of evaluating the impact and/or contribution of CONTRACTOR's services on the well-being of COUNTY residents being served under the terms of the Agreement. The expected outcomes for the Monitoring Plan are to enable Clients to adaptively function at a higher and more appropriate level and to provide a quantifiable and repeatable measure to assess overall program effectiveness.
- CONTRACTOR shall cooperate in data collection in order to develop baseline figures for future evaluation and report performance in terms of Client satisfaction, length of stay, and duration of services.
- 4. CONTRACTOR shall complete CalOMS in a manner that meets standards as set forth by ADMINISTRATOR with a monthly error rate not to exceed five percent (5%).
- E. TOKENS ADMINISTRATOR shall provide CONTRACTOR the necessary number of Tokens for appropriate individual staff to access IRIS at no cost to the CONTRACTOR.
- 1. CONTRACTOR recognizes Tokens are assigned to a specific individual staff member with a unique password. Tokens and passwords will not be shared with anyone.
- 2. CONTRACTOR shall maintain an inventory of the Tokens, by serial number and the staff member to whom each is assigned.
- 3. CONTRACTOR shall indicate in the monthly staffing report, the serial number of the Token for each staff member assigned a Token.
- 4. CONTRACTOR shall return to ADMINISTRATOR all Tokens under the following conditions:
 - a. Token of each staff member who no longer supports the Agreement;
 - b. Token of each staff member who no longer requires access to IRIS;
 - c. Token of each staff member who leaves employment of CONTRACTOR; or
 - d. Token is malfunctioning;
 - e. Termination of the Agreement.
- 5. ADMINISTRATOR shall issue Tokens for CONTRACTOR's staff members who require access to IRIS upon initial training or as a replacement for malfunctioning Tokens.

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- 6. CONTRACTOR shall reimburse the COUNTY for Tokens lost, stolen, or damaged through acts of negligence.
- 7. CONTRACTOR shall input all IRIS data following COUNTY procedure and practice. All statistical data used to monitor CONTRACTOR shall be compiled using only COUNTY IRIS reports, if available, and if applicable.
 - F. CONTRACTOR shall obtain a NPI.
- 1. All HIPAA covered healthcare providers, individuals and organizations must obtain a NPI for use to identify themselves in HIPAA standard transactions.
- 2. CONTRACTOR, including each employee that provides services under the Agreement, will obtain a NPI upon commencement of the Agreement or prior to providing services under the Agreement. CONTRACTOR shall report to ADMINISTRATOR, on a form approved or supplied by ADMINISTRATOR, all NPI numbers as soon as they are available.
- G. CONTRACTOR shall provide the NPP for the COUNTY, as the MHP, at the time of the first service provided under the Agreement to individuals who are covered by Medi-Cal and have not previously received services at a COUNTY operated clinic. CONTRACTOR shall also provide, upon request, the NPP for the COUNTY, as the MHP, to any individual who received services under the Agreement.
- H. CONTRACTOR shall not conduct any proselytizing activities, regardless of funding sources, with respect to any individual(s) who have been referred to CONTRACTOR by COUNTY under the terms of the Agreement. Further, CONTRACTOR agrees that the funds provided hereunder will not be used to promote, directly or indirectly, any religion, religious creed or cult, denomination or sectarian institution, or religious belief.
- I. CONTRACTOR shall not engage in, or permit any of its employees or subcontractors, to conduct research activity on COUNTY Clients without obtaining prior written authorization from ADMINISTRATOR.
- J. CONTRACTOR shall provide effective Administrative management of the budget, staffing, recording, and reporting portion of the Agreement with the COUNTY. If administrative responsibilities are delegated to subcontractors, CONTRACTOR must ensure that any subcontractor(s) possess the qualifications and capacity to perform all delegated responsibilities. These responsibilities include, but are not limited, to the following:
- 1. Designate the responsible position(s) in your organization for managing the funds allocated to the program;
 - 2. Maximize the use of the allocated funds;
 - 3. Ensure timely and accurate reporting of monthly expenditures;
 - 4. Maintain appropriate staffing levels;
 - 5. Request budget and/or staffing modifications to the Agreement;
 - 6. Effectively communicate and monitor the program for its success;

- 7. Track and report expenditures electronically;
- 8. Maintain electronic and telephone communication between CONTRACTOR and ADMINISTRATOR; and
 - 9. Act quickly to identify and solve problems.
- K. CONTRACTOR shall document all adverse incidents affecting the physical and/or emotional welfare of Clients, including but not limited to serious physical harm to self or others, serious destruction of property, developments, etc., and which may raise liability issues with COUNTY. CONTRACTOR shall notify COUNTY within twenty-four (24) hours of any such serious adverse incident.
- L. CONTRACTOR shall advise ADMINISTRATOR of any special incidents, conditions, or issues that adversely affect the quality or accessibility of Client-related services provided by, or under contract with, the COUNTY as identified in the ADMINISTRATOR's P&Ps.
- M. CONTRACTOR and ADMINISTRATOR may mutually agree, in writing, to modify the Services Paragraph of this Exhibit A to the Agreement.

VI. STAFFING STAFFING

A. CONTRACTOR shall, at a minimum, provide the following staffing pattern expressed in Full-Time Equivalents (FTEFTEs) continuously throughout the term of the Agreement. One (1) FTE shall will be equal to an average of forty (40) hours work per week to provide mental health outpatient services for children and youth:

<u>DIRECT NON-DSH</u> PROGRAM	
Administrative Assistant	
DIRECT NON-DSH PROGRAM SUBTOTAL	
DIRECT DSH PROGRAM	
Program Director	
Program Coordinator MFT	
Administrative Assistant/Billing	-1
_Counselor MFT	
<u>DIRECT DSH</u> PROGRAM SUBTOTAL	
Subcontractor	
TOTAL FTEs	5

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EXHIBIT A

- 37 registered clinical staff, the name

- B. CONTRACTOR shall have as Head of Service; a licensed mental health professional, in conformance to one of the following staff categories: –Psychiatrist, Licensed Psychologist, LCSW, LPCC, Licensed MFT, RN, LVN, or LPT.
- C. CONTRACTOR shall include bilingual/bicultural services to meet the needs of threshold languages as determined by ADMINISTRATOR. Whenever possible, bilingual/bicultural staff should be retained. Any clinical vacancies occurring at a time when bilingual and bicultural composition of the clinical staffing does not meet the above requirement must be filled with bilingual and bicultural staff unless ADMINISTRATOR consents, in advance and in writing, to the filling of those positions with non-bilingual staff. Salary savings resulting from such vacant positions may not be used to cover costs other than salaries and employees benefits unless otherwise authorized, in advance and in writing, by ADMINISTRATOR.
- D. CONTRACTOR shall maintain personnel files for each staff person, including management and other administrative positions, both direct and indirect to the Agreement, which shall include, but not be limited to, an application for employment, qualifications for the position, applicable licenses, Live Scan results, waivers, registrations, documentation of bicultural/bilingual capabilities (if applicable), pay rate and evaluations justifying pay increases.
- E. CONTRACTOR shall make its best effort to provide services pursuant to the Agreement in a manner that is culturally and linguistically appropriate for the population(s) served. CONTRACTOR shall maintain documents of such efforts which may include; but not be limited to: records of participation in COUNTY-sponsored or other applicable <u>Trainingtraining</u>; recruitment and hiring <u>policypolicies</u> and procedures; (P&Ps); copies of literature in multiple languages and formats, as appropriate; and descriptions of measures taken to enhance accessibility for, and sensitivity to, individuals who are physically challenged.
- F. CONTRACTOR shall develop a policy governing supervision of staff that will be approved by the ADMINISTRATOR. That policy will address the training needs of all staff and ensure that direct service staff are trained in: suicide assessment and crisis intervention, developing safety plans, maintaining healthy boundaries, reporting child abuse, dealing with difficult Clients, and medication, confidentiality, identification of strengths, promoting life skills, meeting facilitation and such other topics identified by the ADMINISTRATOR.
- G. CONTRACTOR shall maintain a current signature list including each supervisor and provider of direct services who signs chart documentation. The list shall include the printed/type staff name and title, followed by the legal signature with title as it appears on all chart documents. For licensed or registered clinical staff, the name must match the name on the license or registration.
- H. CONTRACTOR shall maintain a current signature list including each supervisor and provider of direct services who signs chart documentation. The list shall include the printed/type staff name and title, followed by the legal signature with title as it appears on all chart documents. For licensed or registered clinical staff, the name must match the name on the license or registration.

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- H. CONTRACTOR shall establish clear policy and procedures pertaining to staff's work location options (i.e. office vs. field/home) and equipment usage (e.g., cell phones, texting devices, and computers). The policy and procedures shall address at the minimum the following:
 - 1. Eligibility and selection criteria;
 - 2. Staff's field/home on-duty conduct and responsibilities;
 - 3. Supervision plan of staff and equipment including emergency procedure; and
 - 4. Confidentiality and records keeping.
- JI. CONTRACTOR shall notify ADMINISTRATOR, in writing, within seventy-two (72) hours, of any staffing vacancies that occur during the term of the Agreement. CONTRACTOR's notification shall include at a minimum the following information: employee name(s), position title(s), date(s) of resignation, date(s) of hire, and a description of recruitment activity.
- KJ. CONTRACTOR shall notify ADMINISTRATOR, in writing, at least seven (7) days in advance, of any new staffing changes; including promotions, temporary FTE changes and internal or external temporary staffing assignment requests that occur during the term of the Agreement.
- LK. CONTRACTOR shall ensure that all staff, albeit paid or unpaid, complete necessary training prior to discharging duties associated with their titles and any other training necessary to assist the CONTRACTOR and COUNTY to be in compliance with prevailing standards of practice as well as State and Federal regulatory requirements.
- ML. CONTRACTOR shall provide ongoing supervision throughout all shifts to all staff, albeit paid or unpaid, direct line staff or supervisors/directors, to enhance service quality and program effectiveness. Supervision methods should include debriefings and consultation as needed, individual supervision or one-on-one support, and team meetings. Supervision should be provided by a supervisor who has extensive knowledge regarding mental health issues.
- NM. WORKLOAD STANDARDS CONTRACTOR understands and agrees that at any given time the standards referenced below are minimum standards, and shall make every effort to exceed these minimums.
 - 1. One (1) DSH shall be equal to sixty (60) minutes of direct Client service.
- 2. CONTRACTOR shall, during the term of the Agreement, provide a minimum of four thousand eightthree hundred and twenty (4,800320) DSH for Client related services, which shall include mental health, case management, Crisis Intervention, and other support services and is inclusive of both billable and non-billable services.
- 3. CONTRACTOR shall provide a minimum of one hundred (100) billable DSHs per month per FTE or one thousand two hundred (1,200) billable DSHs per year per contracted FTE clinician, of mental health services, unless otherwise approved by ADMINSTRATOR

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 $\frac{\Theta}{N}$. STUDENT INTERNS 1. CONTRACTOR may augment the above paid staff with volunteers or interns upon written approval of ADMINISTRATOR. a. CONTRACTOR shall meet minimum requirements for supervision of each Student Intern as required by the State Licensing Board and/or school program descriptions or work contracts. b. Student Intern services shall not comprise more than twenty percent (20%) of total services provided. 2. CONTRACTOR shall provide a minimum of two (2) hours per week supervision to each Student Intern providing Mental Health Services and one (1) hour of supervision for each ten (10) hours of treatment for Student Interns providing substance abuse services. CONTRACTOR shall provide supervision to volunteers as specified in the respective job descriptions or work contracts. PO. CONTRACTOR and ADMINISTRATOR may mutually agree, in writing, to modify the Staffing Paragraph of this Exhibit A to the Agreement. //

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1	EXHIBIT B
2	TO AGREEMENT FOR PROVISION OF
3	OUTPATIENT SERVICES FOR CHILDREN AND TRANSITIONAL AGE YOUTH WITH CO-
4	OCCURRING MENTAL HEALTH AND SUBSTANCE ABUSE DISORDERS
5	WITH CO-OCCURRING MENTAL HEALTH AND SUBSTANCE ABUSE DISORDERS
6	BETWEEN
7	COUNTY OF ORANGE
8	AND
9	SOCIAL MODEL RECOVERY SYSTEMS, INC.
10	BETWEEN
11	COUNTY OF ORANGE
12	AND
13	SOCIAL MODEL RECOVERY SYSTEMS, INC.
14	JULY 1, 2016 2018 THROUGH JUNE 30, 2018 2019
15	
16	I. BUSINESS ASSOCIATE CONTRACT
17	A. GENERAL PROVISIONS AND RECITALS
18	1. The parties agree that the terms used, but not otherwise defined in the Common Terms and
19	Definitions Paragraph of Exhibit A, B, and C to the Agreement or in Subparagraph B below, shall have
20	the same meaning given to such terms under HIPAA, the HITECH Act, and their implementing
21	regulations at 45 CFR Parts 160 and 164 HIPAA regulations as they may exist now or be hereafter
22	amended.
23	2. The parties agree that a business associate relationship under HIPAA, the HITECH Act,
24	and the HIPAA regulations between the CONTRACTOR and COUNTY arises to the extent that
25	CONTRACTOR performs, or delegates to subcontractors to perform, functions or activities on behalf of
26	COUNTY pursuant to, and as set forth in, the Agreement that are described in the definition of
27	"Business Associate" in 45 CFR § 160.103.
28	3. The COUNTY wishes to disclose to CONTRACTOR certain information pursuant to the
29	terms of the Agreement, some of which may constitute PHI, as defined below in Subparagraph B.10, to
30	be used or disclosed in the course of providing services and activities pursuant to, and as set forth, in the
31	Agreement.
32	4. The parties intend to protect the privacy and provide for the security of PHI that may be
33	created, received, maintained, transmitted, used, or disclosed pursuant to the Agreement in compliance
34	with the applicable standards, implementation specifications, and requirements of HIPAA, the HITECH
35	Act, and the HIPAA regulations as they may exist now or be hereafter amended.
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EXHIBIT B

- 5. The parties understand and acknowledge that HIPAA, the HITECH Act, and the HIPAA regulations do not pre-empt any state statutes, rules, or regulations that are not otherwise pre-empted by other Federal law(s) and impose more stringent requirements with respect to privacy of PHI.
- 6. The parties understand that the HIPAA Privacy and Security rules, as defined below in Subparagraphs B.9 and B.14, apply to the CONTRACTOR in the same manner as they apply to the covered entity (COUNTY). CONTRACTOR agrees therefore to be in compliance at all times with the terms of this Business Associate Contract, as it exists now or be hereafter updated with notice to CONTRACTOR, and the applicable standards, implementation specifications, and requirements of the Privacy and the Security rules, as they may exist now or be hereafter amended, with respect to PHI and electronic PHI created, received, maintained, transmitted, used, or disclosed pursuant to the Agreement.

B. DEFINITIONS

- 1. "Administrative Safeguards" are administrative actions, and policies and procedures, to manage the selection, development, implementation, and maintenance of security measures to protect electronic PHI and to manage the conduct of CONTRACTOR's workforce in relation to the protection of that information.
- 2. "Breach" means the acquisition, access, use, or disclosure of PHI in a manner not permitted under the HIPAA Privacy Rule which compromises the security or privacy of the PHI.

a. Breach excludes:

- 1) Any unintentional acquisition, access, or use of PHI by a workforce member or person acting under the authority of CONTRACTOR or COUNTY-, if such acquisition, access, or use was made in good faith and within the scope of authority and does not result in further use or disclosure in a manner not permitted under the Privacy Rule.
- 2) Any inadvertent disclosure by a person who is authorized to access PHI at CONTRACTOR to another person authorized to access PHI at the CONTRACTOR, or organized health care arrangement in which COUNTY participates, and the information received as a result of such disclosure is not further used or disclosed in a manner not permitted under the HIPAA Privacy Rule.
- 3) A disclosure of PHI where CONTRACTOR or COUNTY has a good faith belief that an unauthorized person to whom the disclosure was made would not reasonably have been able to retains such information.
- b. Except as provided in paragraph (a) of this definition, an acquisition, access, use, or disclosure of PHI in a manner not permitted under the HIPAA Privacy Rule is presumed to be a breach unless CONTRACTOR demonstrates that there is a low probability that the PHI has been compromised based on a risk assessment of at least the following factors:
- 1) The nature and extent of the PHI involved, including the types of identifiers and the likelihood of re-identification;
 - 2) The unauthorized person who used the PHI or to whom the disclosure was made;
 - 3) Whether the PHI was actually acquired or viewed; and

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EXHIBIT B

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4)	The extent to	which th	e risk to	the PHI	has been	mitigated

- 3. "Data Aggregation" shall have the meaning given to such term under the HIPAA Privacy Rule in 45 CFR § 164.501.
- 4. "DRS" shall have the meaning given to such term under the HIPAA Privacy Rule in 45 CFR § 164.501.
- 5. "Disclosure" shall have the meaning given to such term under the HIPAA regulations in 45 CFR § 160.103.
- 6. "Health Care Operations" shall have the meaning given to such term under the HIPAA Privacy Rule in 45 CFR § 164.501.
- 7. "Individual" shall have the meaning given to such term under the HIPAA Privacy Rule in 45 CFR § 160.103 and shall include a person who qualifies as a personal representative in accordance with 45 CFR § 164.502(g).
- 8. "Physical Safeguards" are physical measures, policies, and procedures to protect CONTRACTOR's electronic information systems and related buildings and equipment, from natural and environmental hazards, and unauthorized intrusion.
- 9. "The HIPAA Privacy Rule" shall mean the Standards for Privacy of Individually Identifiable Health Information at 45 CFR Part 160 and Part 164, Subparts A and E.
- 10. "PHI" shall have the meaning given to such term under the HIPAA regulations in 45 CFR § 160.103.
- 11. "Required by Law" shall have the meaning given to such term under the HIPAA Privacy Rule in 45 CFR § 164.103.—
- 12. "Secretary" shall mean the Secretary of the Department of Health and Human Services or his or her designee.
- 13. "Security Incident" means attempted or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system. "Security incident" does not include trivial incidents that occur on a daily basis, such as scans, "pings", or unsuccessful attempts to penetrate computer networks or servers maintained by CONTRACTOR.
- 14. "The HIPAA Security Rule" shall mean the Security Standards for the Protection of electronic PHI at 45 CFR Part 160, Part 162, and Part 164, Subparts A and C.
- 15. "Subcontractor" shall have the meaning given to such term under the HIPAA regulations in 45 CFR § 160.103.
- 16. "Technical safeguards" means the technology and the policy and procedures for its use that protect electronic PHI and control access to it.
- 17. "Unsecured PHI" or "PHI that is unsecured" means PHI that is not rendered unusable, unreadable, or indecipherable to unauthorized individuals through the use of a technology or

EXHIBIT B

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methodology specified by the Secretary of Health and Human Services in the guidance issued on the HHS Web site.

18. "Use" shall have the meaning given to such term under the HIPAA regulations in 45 CFR 45CFR § 160.103.

C. OBLIGATIONS AND ACTIVITIES OF CONTRACTOR AS BUSINESS ASSOCIATE:

- 1. CONTRACTOR agrees not to use or further disclose PHI COUNTY discloses to CONTRACTOR other than as permitted or required by this Business Associate Contract or as required by law.
- 2. CONTRACTOR agrees to use appropriate safeguards, as provided for in this Business Associate Contract and the Agreement, to prevent use or disclosure of PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY other than as provided for by this Business Associate Contract.
- 3. CONTRACTOR agrees to comply with the HIPAA Security Rule at Subpart C of 45 CFR Part 164 with respect to electronic PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY.
- 4. CONTRACTOR agrees to mitigate, to the extent practicable, any harmful effect that is known to CONTRACTOR of a Use or Disclosure of PHI by CONTRACTOR in violation of the requirements of this Business Associate Contract.
- 5. CONTRACTOR agrees to report to COUNTY immediately any Use or Disclosure of PHI not provided for by this Business Associate Contract of which CONTRACTOR becomes aware. CONTRACTOR must report Breaches of Unsecured PHI in accordance with Subparagraph E below and as required by 45 CFR § 164.410.
- 6. CONTRACTOR agrees to ensure that any Subcontractors that create, receive, maintain, or transmit PHI on behalf of CONTRACTOR agree to the same restrictions and conditions that apply through this Business Associate Contract to CONTRACTOR with respect to such information.
- 7. CONTRACTOR agrees to provide access, within fifteen (15) calendar days of receipt of a written request by COUNTY, to PHI in a DRS, to COUNTY or, as directed by COUNTY, to an Individual in order to meet the requirements under 45 CFR § 164.524. If CONTRACTOR maintains an EHR with PHI, and an individual requests a copy of such information in an electronic format, CONTRACTOR shall provide such information in an electronic format.
- 8. CONTRACTOR agrees to make any amendment(s) to PHI in a DRS that COUNTY directs or agrees to pursuant to 45 CFR § 164.526 at the request of COUNTY or an Individual, within thirty (30) calendar days of receipt of said request by COUNTY. CONTRACTOR agrees to notify COUNTY in writing no later than ten (10) calendar days after said amendment is completed.
- 9. CONTRACTOR agrees to make internal practices, books, and records, including policy and procedures P&Ps, relating to the use and disclosure of PHI received from, or created or received by CONTRACTOR on behalf of, COUNTY available to COUNTY and the Secretary in a time and manner

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EXHIBIT B

as determined by COUNTY or as designated by the Secretary for purposes of the Secretary determining COUNTY's compliance with the HIPAA Privacy Rule.

- 10. CONTRACTOR agrees to document any Disclosures of PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY, and to make information related to such Disclosures available as would be required for COUNTY to respond to a request by an Individual for an accounting of Disclosures of PHI in accordance with 45 CFR § 164.528.
- 11. CONTRACTOR agrees to provide COUNTY or an Individual, as directed by COUNTY, in a time and manner to be determined by COUNTY, that information collected in accordance with the Agreement, in order to permit COUNTY to respond to a request by an Individual for an accounting of Disclosures of PHI in accordance with 45 CFR § 164.528.
- 12. CONTRACTOR agrees that to the extent CONTRACTOR carries out COUNTY's obligation under the HIPAA Privacy and/or Security rules CONTRACTOR will comply with the requirements of 45 CFR Part 164 that apply to COUNTY in the performance of such obligation.
- 13. If CONTRACTOR receives Social Security data from COUNTY provided to COUNTY by a state agency, upon request by COUNTY, CONTRACTOR shall provide COUNTY with a list of all employees, subcontractors, and agents who have access to the Social Security data, including employees, agents, subcontractors, and agents of its subcontractors.
- 14. CONTRACTOR will notify COUNTY if CONTRACTOR is named as a defendant in a criminal proceeding for a violation of HIPAA. COUNTY may terminate the Agreement, if CONTRACTOR is found guilty of a criminal violation in connection with HIPAA. COUNTY may terminate the Agreement, if a finding or stipulation that CONTRACTOR has violated any standard or requirement of the privacy or security provisions of HIPAA, or other security or privacy laws are made in any administrative or civil proceeding in which CONTRACTOR is a party or has been joined. COUNTY will consider the nature and seriousness of the violation in deciding whether or not to terminate the Agreement.
- 15. CONTRACTOR shall make itself and any subcontractors, employees or agents assisting CONTRACTOR in the performance of its obligations under the Agreement, available to COUNTY at no cost to COUNTY to testify as witnesses, or otherwise, in the event of litigation or administrative proceedings being commenced against COUNTY, its directors, officers or employees based upon claimed violation of HIPAA, the HIPAA regulations or other laws relating to security and privacy, which involves inactions or actions by CONTRACTOR, except where CONTRACTOR or its subcontractor, employee, or agent is a named adverse party.
- 16. The Parties acknowledge that federal and state laws relating to electronic data security and privacy are rapidly evolving and that amendment of this Business Associate Contract may be required to provide for procedures to ensure compliance with such developments. The Parties specifically agree to take such action as is necessary to implement the standards and requirements of HIPAA, the HITECH

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Act, the HIPAA regulations and other applicable laws relating to the security or privacy of PHI. Upon COUNTY's request, CONTRACTOR agrees to promptly enter into negotiations with COUNTY concerning an amendment to this Business Associate Contract embodying written assurances consistent with the standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations or other applicable laws. COUNTY may terminate the Agreement upon thirty (30) days written notice in the event:

- a. CONTRACTOR does not promptly enter into negotiations to amend this Business Associate Contract when requested by COUNTY pursuant to this subparagraph C; or
- b. CONTRACTOR does not enter into an amendment providing assurances regarding the safeguarding of PHI that COUNTY deems are necessary to satisfy the standards and requirements of HIPAA, the HITECH Act, and the HIPAA regulations.
- 17. CONTRACTOR shall work with COUNTY upon notification by CONTRACTOR to COUNTY of a Breach to properly determine if any Breach exclusions exist as defined in Subparagraph B.2.a above.

D. SECURITY RULE

- 1. CONTRACTOR shall comply with the requirements of 45 CFR § 164.306 and establish and maintain appropriate Administrative, Physical and Technical Safeguards in accordance with 45 CFR § 164.308, § 164.310, and § 164.312, with respect to electronic PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY. CONTRACTOR shall develop and maintain a written information privacy and security program that includes Administrative, Physical, and Technical Safeguards appropriate to the size and complexity of CONTRACTOR's operations and the nature and scope of its activities.
- 2. CONTRACTOR shall implement reasonable and appropriate policies and procedures to comply with the standards, implementation specifications and other requirements of 45 CFR Part 164, Subpart C, in compliance with 45 CFR § 164.316. CONTRACTOR will provide COUNTY with its current and updated policies upon request.
- 3. CONTRACTOR shall ensure the continuous security of all computerized data systems containing electronic PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY. CONTRACTOR shall protect paper documents containing PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY. These steps shall include, at a minimum:
- a. Complying with all of the data system security precautions listed under Subparagraph subparagraphs E, below;
- b. Achieving and maintaining compliance with the HIPAA Security Rule, as necessary in conducting operations on behalf of COUNTY;
- c. Providing a level and scope of security that is at least comparable to the level and scope of security established by the OMB in OMB Circular No. A-130, Appendix III Security of Federal

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Automated Information Systems, which sets forth guidelines for automated information systems in Federal agencies;

- 4. CONTRACTOR shall ensure that any subcontractors that create, receive, maintain, or transmit ePHI on behalf of CONTRACTOR agree through a contract with CONTRACTOR to the same restrictions and requirements contained in this Subparagraph D of this Business Associate Contract.
- 5. CONTRACTOR shall report to COUNTY immediately any Security Incident of which it becomes aware. CONTRACTOR shall report Breaches of Unsecured PHI in accordance with Subparagraph E below and as required by 45 CFR § 164.410.
- 6. CONTRACTOR shall designate a Security Officer to oversee its data security program who shall be responsible for carrying out the requirements of this paragraph and for communicating on security matters with COUNTY.

E. DATA SECURITY REQUIREMENTS

1. Personal Controls

- a. Employee Training. All workforce members who assist in the performance of functions or activities on behalf of COUNTY in connection with Agreement, or access or disclose PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY, must complete information privacy and security training, at least annually, at CONTRACTOR's expense. Each workforce member who receives information privacy and security training must sign a certification, indicating the member's name and the date on which the training was completed. These certifications must be retained for a period of six (6) years following the termination of Agreement.
- b. Employee Discipline. Appropriate sanctions must be applied against workforce members who fail to comply with any provisions of contractor's CONTRACTOR's privacy policy and procedures P&Ps, including termination of employment where appropriate.
- c. Confidentiality Statement. All persons that will be working with PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY must sign a confidentiality statement that includes, at a minimum, General Use, Security and Privacy Safeguards, Unacceptable Use, and Enforcement Policies. The statement must be signed by the workforce member prior to access to such PHI. The statement must be renewed annually. The CONTRACTOR shall retain each person's written confidentiality statement for COUNTY inspection for a period of six (6) years following the termination of the Agreement.
- d. Background Check. Before a member of the workforce may access PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY, a background screening of that worker must be conducted. The screening should be commensurate with the risk and magnitude of harm the employee could cause, with more thorough screening being done for those employees who are authorized to bypass significant technical and

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operational security controls. The CONTRACTOR shall retain each workforce member's background check documentation for a period of three (3) years.

2. Technical Security Controls

- a. Workstation/Laptop encryption. All workstations and laptops that store PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY either directly or temporarily must be encrypted using a FIPS 140-2 certified algorithm which is 128bit or higher, such as AES. The encryption solution must be full disk unless approved by the COUNTY.
- b. Server Security. —Servers containing unencrypted PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY must have sufficient administrative, physical, and technical controls in place to protect that data, based upon a risk assessment/system security review.
- c. Minimum Necessary. Only the minimum necessary amount of PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY required to perform necessary business functions may be copied, downloaded, or exported.
- d. Removable media devices. All electronic files that contain PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY must be encrypted when stored on any removable media or portable device (i.e. USB thumb drives, floppies, CD/DVD, Blackberry, backup tapes etc.). Encryption must be a FIPS 140-2 certified algorithm which is 128bit or higher, such as AES. Such PHI shall not be considered "removed from the premises" if it is only being transported from one of CONTRACTOR's locations to another of CONTRACTOR's locations.
- e. Antivirus software. All workstations, laptops and other systems that process and/or store PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY must have installed and actively use comprehensive anti-virus software solution with automatic updates scheduled at least daily.
- f. Patch Management. All workstations, laptops and other systems that process and/or store PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY must have critical security patches applied, with system reboot if necessary. There must be a documented patch management process which determines installation timeframe based on risk assessment and vendor recommendations. At a maximum, all applicable patches must be installed within thirty (30) calendar or business days of vendor release. Applications and systems that cannot be patched due to operational reasons must have compensatory controls implemented to minimize risk, where possible.
- g. User IDs and Password Controls. All users must be issued a unique user name for accessing PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY. Username must be promptly disabled, deleted, or the password

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EXHIBIT B

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changed upon the transfer or termination of an employee with knowledge of the password, at maximum within twenty-four (24) hours. Passwords are not to be shared. Passwords must be at least eight characters and must be a non-dictionary word. Passwords must not be stored in readable format on the computer. Passwords must be changed every ninety (90) days, preferably every sixty (60) days. Passwords must be changed if revealed or compromised. Passwords must be composed of characters from at least three (3) of the following four (4) groups from the standard keyboard:

- 1) Upper case letters (A-Z)
- 2) Lower case letters (a-z)
- 3) Arabic numerals (0-9)
- 4) Non-alphanumeric characters (punctuation symbols)
- h. Data Destruction. When no longer needed, all PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY must be wiped using the Gutmann or DoD 5220.22-M (7 Pass) standard, or by degaussing. -Media may also be physically destroyed in accordance with NIST Special Publication 800-88.— Other methods require prior written permission by COUNTY.
- i. System Timeout. The system providing access to PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY must provide an automatic timeout, requiring re-authentication of the user session after no more than twenty (20) minutes of inactivity.
- j. Warning Banners. All systems providing access to PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY must display a warning banner stating that data is confidential, systems are logged, and system use is for business purposes only by authorized users. User must be directed to log off the system if they do not agree with these requirements.
- k. System Logging. The system must maintain an automated audit trail which can identify the user or system process which initiates a request for PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY, or which alters such PHI. The audit trail must be date and time stamped, must log both successful and failed accesses, must be read only, and must be restricted to authorized users. If such PHI is stored in a database, database logging functionality must be enabled. Audit trail data must be archived for at least 3 years after occurrence.
- 1. Access Controls. The system providing access to PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY must use role based access controls for all user authentications, enforcing the principle of least privilege.
- m. Transmission encryption. All data transmissions of PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY outside the secure internal network must be encrypted using a FIPS 140-2 certified algorithm which is

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128bit or higher, such as AES. Encryption can be end to end at the network level, or the data files containing PHI can be encrypted. This requirement pertains to any type of PHI in motion such as website access, file transfer, and E-Mail.

n. Intrusion Detection. –All systems involved in accessing, holding, transporting, and protecting PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY that are accessible via the Internet must be protected by a comprehensive intrusion detection and prevention solution.

3. Audit Controls

- a. System Security Review. CONTRACTOR must ensure audit control mechanisms that record and examine system activity are in place. All systems processing and/or storing PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY must have at least an annual system risk assessment/security review which provides assurance that administrative, physical, and technical controls are functioning effectively and providing adequate levels of protection. Reviews should include vulnerability scanning tools.
- b. Log Reviews. All systems processing and/or storing PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY must have a routine procedure in place to review system logs for unauthorized access.
- c. Change Control. All systems processing and/or storing PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY must have a documented change control procedure that ensures separation of duties and protects the confidentiality, integrity and availability of data.

4. Business Continuity/Disaster Recovery Control

- a. Emergency Mode Operation Plan. CONTRACTOR must establish a documented plan to enable continuation of critical business processes and protection of the security of PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY kept in an electronic format in the event of an emergency. Emergency means any circumstance or situation that causes normal computer operations to become unavailable for use in performing the work required under this Agreement for more than 24 hours.
- b. Data Backup Plan. CONTRACTOR must have established documented procedures to backup such PHI to maintain retrievable exact copies of the PHI. The plan must include a regular schedule for making backups, storing backup offsite, an inventory of backup media, and an estimate of the amount of time needed to restore DHCS PHI or PI should it be lost. At a minimum, the schedule must be a weekly full backup and monthly offsite storage of DHCS data. BCP for contractor and COUNTY (e.g. the application owner) must merge with the DRP.

5. Paper Document Controls

a. Supervision of Data. PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY in paper form shall not be left

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unattended at any time, unless it is locked in a file cabinet, file room, desk or office. Unattended means that information is not being observed by an employee authorized to access the information. Such PHI in paper form shall not be left unattended at any time in vehicles or planes and shall not be checked in baggage on commercial airplanes.

- b. Escorting Visitors. Visitors to areas where PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY is contained shall be escorted and such PHI shall be kept out of sight while visitors are in the area.
- c. Confidential Destruction. PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY must be disposed of through confidential means, such as cross cut shredding and pulverizing.
- d. Removal of Data. PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY must not be removed from the premises of the CONTRACTOR except with express written permission of COUNTY.
- Faxes containing PHI COUNTY discloses to CONTRACTOR or e. Faxing. CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY shall not be left unattended and fax machines shall be in secure areas. Faxes shall contain a confidentiality statement notifying persons receiving faxes in error to destroy them. Fax numbers shall be verified with the intended recipient before sending the fax.
- f. Mailing. Mailings containing PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY shall be sealed and secured from damage or inappropriate viewing of PHI to the extent possible. Mailings which include five hundred (500) or more individually identifiable records containing PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY in a single package shall be sent using a tracked mailing method which includes verification of delivery and receipt, unless the prior written permission of COUNTY to use another method is obtained.

F. BREACH DISCOVERY AND NOTIFICATION

- 1. Following the discovery of a Breach of Unsecured PHI-, CONTRACTOR shall notify COUNTY of such Breach, however both parties agree to a delay in the notification if so advised by a law enforcement official pursuant to 45 CFR § 164.412.
- a. A Breach shall be treated as discovered by CONTRACTOR as of the first day on which such Breach is known to CONTRACTOR or, by exercising reasonable diligence, would have been known to CONTRACTOR.
- b. CONTRACTOR shall be deemed to have knowledge of a Breach, if the Breach is known, or by exercising reasonable diligence would have known, to any person who is an employee, officer, or other agent of CONTRACTOR, as determined by federal common law of agency.

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EXHIBIT B

SOCIAL MODEL RECOVERY SYSTEMS, INC.

- 2. CONTRACTOR shall provide the notification of the Breach immediately to the COUNTY Privacy Officer. CONTRACTOR's notification may be oral, but shall be followed by written notification within 24 hours of the oral notification.
 - 3. CONTRACTOR's notification shall include, to the extent possible:
- a. The identification of each Individual whose Unsecured PHI has been, or is reasonably believed by CONTRACTOR to have been, accessed, acquired, used, or disclosed during the Breach;
- b. Any other information that COUNTY is required to include in the notification to Individual under 45 CFR §164.404 (c) at the time CONTRACTOR is required to notify COUNTY or promptly thereafter as this information becomes available, even after the regulatory sixty (60) day period set forth in 45 CFR § 164.410 (b) has elapsed, including:
- 1) A brief description of what happened, including the date of the Breach and the date of the Breach, if known;
- 2) A description of the types of Unsecured PHI that were involved in the Breach (such as whether full name, social security number, date of birth, home address, account number, diagnosis, disability code, or other types of information were involved);
- 3) Any steps Individuals should take to protect themselves from potential harm resulting from the Breach;
- 4) A brief description of what CONTRACTOR is doing to investigate the Breach, to mitigate harm to Individuals, and to protect against any future Breaches; and
- 5) Contact procedures for Individuals to ask questions or learn additional information, which shall include a toll-free telephone number, an e-mail address, Web site, or postal address.
- 4. COUNTY may require CONTRACTOR to provide notice to the Individual as required in 45 CFR § 164.404, if it is reasonable to do so under the circumstances, at the sole discretion of the COUNTY.
- 5. In the event that CONTRACTOR is responsible for a Breach of Unsecured PHI in violation of the HIPAA Privacy Rule, CONTRACTOR shall have the burden of demonstrating that CONTRACTOR made all notifications to COUNTY consistent with this Subparagraph F and as required by the Breach notification regulations, or, in the alternative, that the acquisition, access, use, or disclosure of PHI did not constitute a Breach.
- 6. CONTRACTOR shall maintain documentation of all required notifications of a Breach or its risk assessment under 45 CFR § 164.402 to demonstrate that a Breach did not occur.
- 7. CONTRACTOR shall provide to COUNTY all specific and pertinent information about the Breach, including the information listed in Section E.3.b.(1)-(5) above, if not yet provided, to permit COUNTY to meet its notification obligations under Subpart D of 45 CFR Part 164 as soon as practicable, but in no event later than fifteen (15) calendar days after CONTRACTOR's initial report of the Breach to COUNTY pursuant to Subparagraph F.2 above.

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EXHIBIT B

- 8. CONTRACTOR shall continue to provide all additional pertinent information about the Breach to COUNTY as it may become available, in reporting increments of five (5) business days after the last report to COUNTY. CONTRACTOR shall also respond in good faith to any reasonable requests for further information, or follow-up information after report to COUNTY, when such request is made by COUNTY.
- 9. If the Breach is the fault of CONTRACTOR, CONTRACTOR shall bear all expense or other costs associated with the Breach and shall reimburse COUNTY for all expenses COUNTY incurs in addressing the Breach and consequences thereof, including costs of investigation, notification, remediation, documentation or other costs associated with addressing the Breach.

G. PERMITTED USES AND DISCLOSURES BY CONTRACTOR

- 1. CONTRACTOR may use or further disclose PHI COUNTY discloses to CONTRACTOR as necessary to perform functions, activities, or services for, or on behalf of, COUNTY as specified in the Agreement, provided that such use or Disclosure would not violate the HIPAA Privacy Rule if done by COUNTY except for the specific Uses and Disclosures set forth below.
- a. CONTRACTOR may use PHI COUNTY discloses to CONTRACTOR, if necessary, for the proper management and administration of CONTRACTOR.
- b. CONTRACTOR may disclose PHI COUNTY discloses to CONTRACTOR for the proper management and administration of CONTRACTOR or to carry out the legal responsibilities of CONTRACTOR, if:
 - 1) The Disclosure is required by law; or
- 2) CONTRACTOR obtains reasonable assurances from the person to whom the PHI is disclosed that it will be held confidentially and used or further disclosed only as required by law or for the purposes for which it was disclosed to the person and the person immediately notifies CONTRACTOR of any instance of which it is aware in which the confidentiality of the information has been breached.
- c. CONTRACTOR may use or further disclose PHI COUNTY discloses to CONTRACTOR to provide Data Aggregation services relating to the Health Care Operations of CONTRACTOR.
- 2. CONTRACTOR may use PHI COUNTY discloses to CONTRACTOR, if necessary, to carry out legal responsibilities of CONTRACTOR.
- 3. CONTRACTOR may use and disclose PHI COUNTY discloses to CONTRACTOR consistent with the minimum necessary policies and procedures of COUNTY.
- 4. CONTRACTOR may use or disclose PHI COUNTY discloses to CONTRACTOR as required by law.

H. PROHIBITED USES AND DISCLOSURES

1. CONTRACTOR shall not disclose PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY about an individual to

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a health plan for payment or health care operations purposes if the PHI pertains solely to a health care item or service for which the health care provider involved has been paid out of pocket in full and the individual requests such restriction, in accordance with 42 USC § 17935(a) and 45 CFR § 164.522(a).

2. CONTRACTOR shall not directly or indirectly receive remuneration in exchange for PHI COUNTY discloses to CONTRACTOR or CONTRACTOR creates, receives, maintains, or transmits on behalf of COUNTY, except with the prior written consent of COUNTY and as permitted by 42 USC § 17935(d)(2).

I. OBLIGATIONS OF COUNTY

- 1. COUNTY shall notify CONTRACTOR of any limitation(s) in COUNTY's notice of privacy practices in accordance with 45 CFR § 164.520, to the extent that such limitation may affect CONTRACTOR's Use or Disclosure of PHI.
- 2. COUNTY shall notify CONTRACTOR of any changes in, or revocation of, the permission by an Individual to use or disclose his or her PHI, to the extent that such changes may affect CONTRACTOR's Use or Disclosure of PHI.
- 3. COUNTY shall notify CONTRACTOR of any restriction to the Use or Disclosure of PHI that COUNTY has agreed to in accordance with 45 CFR § 164.522, to the extent that such restriction may affect CONTRACTOR's Use or Disclosure of PHI.
- 4. COUNTY shall not request CONTRACTOR to use or disclose PHI in any manner that would not be permissible under the HIPAA Privacy Rule if done by COUNTY.

J. BUSINESS ASSOCIATE TERMINATION

- 1. Upon COUNTY's knowledge of a material Breach or violation by CONTRACTOR of the requirements of this Business Associate Contract, COUNTY shall:
- a. Provide an opportunity for CONTRACTOR to cure the material Breach or end the violation within thirty (30) business days; or
- b. Immediately terminate the Agreement, if CONTRACTOR is unwilling or unable to cure the material Breach or end the violation within (30) days, provided termination of the Agreement is feasible.
- 2. Upon termination of the Agreement, CONTRACTOR shall either destroy or return to COUNTY all PHI CONTRACTOR received from COUNTY or CONTRACTOR created, maintained, or received on behalf of COUNTY in conformity with the HIPAA Privacy Rule.
- a. This provision shall apply to all PHI that is in the possession of Subcontractors or agents of CONTRACTOR.
 - b. CONTRACTOR shall retain no copies of the PHI.
- c. In the event that CONTRACTOR determines that returning or destroying the PHI is not feasible, CONTRACTOR shall provide to COUNTY notification of the conditions that make return or destruction infeasible. Upon determination by COUNTY that return or destruction of PHI is infeasible, CONTRACTOR shall extend the protections of this Business Associate Contract to such PHI and limit

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EXHIBIT B

further Uses and Disclosures of such PHI to those purposes that make the return or destruction infeasible, for as long as CONTRACTOR maintains such PHI. 3. The obligations of this Business Associate Contract shall survive the termination of the Agreement.

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EXHIBIT C TO AGREEMENT FOR PROVISION OF

OUTPATIENT SERVICES FOR CHILDREN AND TRANSITIONAL AGE YOUTH

4	WITH CO-OCCURRING MENTAL HEALTH AND SUBSTANCE ABUSE DISORDERS
5	BETWEEN
6	COUNTY OF ORANGE
7	AND
8	SOCIAL MODEL RECOVERY SYSTEMS, INC.
9	JULY 1, 2016 2018 THROUGH JUNE 30, 2018 2019
10	
11	I. PERSONAL INFORMATION PRIVACY AND SECURITY CONTRACT
12	Any reference to statutory, regulatory, or contractual language herein shall be to such language as in
13	effect or as amended.
14	A. DEFINITIONS
15	1Breach shall have the meaning given to such term under the IEA and CMPPA. It shall
16	include a ""PII loss" as that term is defined in the CMPPA.
17	2. "Breach of the security of the system" shall have the meaning given to such term under
18	the CIPA, Civil Code § 1798.29(d).
19	3. "CMPPA Agreement" means the CMPPA Agreement between the SSA and CHHS.
20	4. ""DHCS PI" shall mean Personal Information, as defined below, accessed in a database
21	maintained by the COUNTY or DHCS, received by CONTRACTOR from the COUNTY or DHCS or
22	acquired or created by CONTRACTOR in connection with performing the functions, activities and
23	services specified in the Agreement on behalf of the COUNTY.
24	5. ""IEA" shall mean the Information Exchange Agreement currently in effect between the
25	SSA and DHCS.
26	6. ""Notice-triggering Personal Information" shall mean the personal information identified
27	in California Civil Code § 1798.29(e) whose unauthorized access may trigger notification requirements
28	under California Civil Code § 1709.29. For purposes of this provision, identity shall include, but not be
29	limited to, name, identifying number, symbol, or other identifying particular assigned to the individual,
30	such as a finger or voice print, a photograph or a biometric identifier. Notice-triggering PI includes PI
31	in electronic, paper or any other medium.
32	7. ""PII" shall have the meaning given to such term in the IEA and CMPPA.
33	8. "PI" shall have the meaning given to such term in California Civil Code§ 1798.3(a).
34	
35	9. ""Required by law" means a mandate contained in law that compels an entity to make a
36	use or disclosure of PI or PII that is enforceable in a court of law. This includes, but is not limited to,
37	court orders and court-ordered warrants, subpoenas or summons issued by a court, grand jury, a
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	X:\CONTRACTS - 2016 -\2016-2018\BH\SMR-OP-MHSUD FY 16-18-VW.doc SMR04BHKK18 X:\ASR\BEHAVIORAL HEALTH\ASR - 17-001385 - SMR04 OP SVCS CHILDREN AND TRANSITIONAL YOUTH CMHSAD FY 18-19 - SV REDLINE.DOCSMR04BHK

 governmental or tribal inspector general, or an administrative body authorized to require the production of information, and a civil or an authorized investigative demand. It also includes Medicare conditions of participation with respect to health care providers participating in the program, and statutes or regulations that require the production of information, including statutes or regulations that require such information if payment is sought under a government program providing public benefits. 10.

""Security Incident" means the attempted or successful unauthorized access, use, disclosure, modification, or destruction of PI, or confidential data utilized in complying with this Agreement; or interference with system operations in an information system that processes, maintains or stores Pl.

B. TERMS OF AGREEMENT

- 1. Permitted Uses and Disclosures of DHCS PI and PII by CONTRACTOR.— Except as otherwise indicated in this Exhibit, CONTRACTOR may use or disclose DHCS PI only to perform functions, activities, or services for or on behalf of the COUNTY pursuant to the terms of the Agreement provided that such use or disclosure would not violate the CIPA if done by the COUNTY.
 - 2. Responsibilities of CONTRACTOR—CONTRACTOR agrees:

CONTRACTOR agrees:

- a. Nondisclosure. Not to use or disclose DHCS PI or PII other than as permitted or required by this Personal Information Privacy and Security Contract or as required by applicable state and federal law.
- b. Safeguards. To implement appropriate and reasonable administrative, technical, and physical safeguards to protect the security, confidentiality and integrity of DHCS PI and PII, to protect against anticipated threats or hazards to the security or integrity of DHCS PI and PII, and to prevent use or disclosure of DHCS PI or PII other than as provided for by this Personal Information Privacy and Security Contract. CONTRACTOR shall develop and maintain a written information privacy and security program that include administrative, technical and physical safeguards appropriate to the size and complexity of CONTRACTOR's operations and the nature and scope of its activities, which incorporate the requirements of Subparagraph (c), below. CONTRACTOR will provide COUNTY with its current policies upon request.
- c. Security. CONTRACTOR shall ensure the continuous security of all computerized data systems containing DHCS PI and PII. CONTRACTOR shall protect paper documents containing DHCS PI and PII. These steps shall include, at a minimum:
- 1) -Complying with all of the data system security precautions listed in Subparagraph E of the Business Associate Contract, Exhibit B to the Agreement; and
- 2) -Providing a level and scope of security that is at least comparable to the level and scope of security established by the Office of Management and Budget in OMB Circular No. A-130, Appendix III-Security of Federal Automated Information Systems, which sets forth guidelines for automated information systems in Federal agencies.

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- 3) If the data obtained by CONTRACTOR from COUNTY includes PII, CONTRACTOR shall also comply with the substantive privacy and security requirements in the CMPPA Agreement between the SSA and the CHHS and in the Agreement between the SSA and DHCS, known as the IEA. The specific sections of the IEA with substantive privacy and security requirements to be complied with are sections E, F, and G, and in Attachment 4 to the IEA, Electronic Information Exchange Security Requirements, Guidelines and Procedures for Federal, State and Local Agencies Exchanging Electronic Information with the SSA. CONTRACTOR also agrees to ensure that any of CONTRACTOR's agents or subcontractors, to whom CONTRACTOR provides DHCS PII agree to the same requirements for privacy and security safeguards for confidential data that apply to CONTRACTOR with respect to such information.
- d. Mitigation of Harmful Effects. To mitigate, to the extent practicable, any harmful effect that is known to CONTRACTOR of a use or disclosure of DHCS PI or PII by CONTRACTOR or its subcontractors in violation of this Personal Information Privacy and Security Contract.
- e. CONTRACTOR's Agents and Subcontractors. To impose the same restrictions and conditions set forth in this Personal Information and Security Contract on any subcontractors or other agents with whom CONTRACTOR subcontracts any activities under the Agreement that involve the disclosure of DHCS PI or PII to such subcontractors or other agents.
- f. Availability of Information. To make DHCS PI and PII available to the DHCS and/or COUNTY for purposes of oversight, inspection, amendment, and response to requests for records, injunctions, judgments, and orders for production of DHCS PI and PII. If CONTRACTOR receives DHCS PII, upon request by COUNTY and/or DHCS, CONTRACTOR shall provide COUNTY and/or DHCS with a list of all employees, contractors and agents who have access to DHCS PII, including employees, contractors and agents of its subcontractors and agents.
- g. Cooperation with COUNTY. With respect to DHCS PI, to cooperate with and assist the COUNTY to the extent necessary to ensure the DHCS's compliance with the applicable terms of the CIPA including, but not limited to, accounting of disclosures of DHCS PI, correction of errors in DHCS PI, production of DHCS PI, disclosure of a security Breach involving DHCS PI and notice of such Breach to the affected individual(s).
- h. Breaches and Security Incidents. During the term of the Agreement, CONTRACTOR agrees to implement reasonable systems for the discovery of any Breach of unsecured DHCS PI and PII or security incident. CONTRACTOR agrees to give notification of any beach of unsecured DHCS PI and PII or security incident in accordance with Subparagraph F, of the Business Associate Contract, Exhibit B to the Agreement.
- i. Designation of Individual Responsible for Security. CONTRACTOR shall designate an individual, (e.g., Security Officer), to oversee its data security program who shall be responsible for carrying out the requirements of this Personal Information Privacy and Security Contract and for communicating on security matters with the COUNTY.