CONTRACT FOR BEHAVIORAL HEALTH SERVICES
COUNTY OF SAN LUIS OBISPO

THIS CONTRACT, entered into by and between the County of San Luis Obispo, a public entity in the State of California, (hereafter "County") and Bryan's House, a California sole proprietorship, (hereafter "Contractor"):

WITNESSETH

WHEREAS, County has a need for residential treatment services to serve adult women with children; and

WHEREAS, Contractor operates Bryan's House facility, located at 6480 North Star Lane, Paso Robles, CA 93446, to provide Women with Children Residential Recovery Facility as more particularly described on Exhibit A, attached hereto; and

WHEREAS, Contractor is specially trained, experienced, expert and competent to perform such special services.

WHEREAS, Pursuant to Government Code section 31000, the County may contract for special services on behalf of public entities including County Behavioral Health.

NOW, **THEREFORE**, in consideration of the covenants, conditions, agreements, and stipulations set forth herein, the parties agree as follows:

1. Scope of Services.

County hereby engages Contractor to perform, and Contractor hereby agrees to perform for County, the services set forth on Exhibit A, attached hereto and incorporated herein by reference, all pursuant to the terms and conditions hereinafter set forth.

2. Compensation.

Contractor shall be compensated by County for performing said services in accordance with Exhibit B, attached hereto and incorporated herein by reference.

3. Effective Date and Duration.

The effective date and duration of this Contract shall be as specified on Exhibit C, attached hereto and incorporated herein by reference.

4. General Conditions.

Contractor and County shall comply with all provisions of County's General Conditions, a copy of which is attached hereto as Exhibit D and incorporated herein by reference.

5. Special Conditions.

Contractor and County shall comply with the special conditions attached hereto as Exhibit E and incorporated herein by reference. In the event of conflicts between the

provisions of the General Provisions and the Special Conditions, the provisions of the Special Conditions shall be controlling.

6. **Business Associate Agreement**.

Contractor and County shall comply with the County's Business Associate Agreement in accordance with Exhibit F, a copy of which is attached hereto and incorporated herein by reference.

7. **Qualified Service Organization**.

Contractor shall comply with the County's Qualified Service Organization Agreement in accordance with Exhibit G, a copy of which is attached hereto and incorporated herein by reference.

8. **Perinatal Services Network Guidelines**.

Contractor shall comply with all of the relevant provisions of the Perinatal Services Network Guidelines attached hereto as Exhibit H and incorporated herein by reference

IN WITNESS WHEREOF County and Contractor have executed this Contract on the day and year set forth below.

CONTRACTOR

Sandy Wortley, Executive Director

By: _____

Sandy Wortley, Executive Director

CONTRACTOR

Steve Wortley, Chief Financial Officer

By: _____

Steve Wortley, Chief Financial Officer

Tax ID# Held in Confidential File

COUNTY COUNSEL

Approved as to form and legal effect.

RITA NEAL

COUNTY COUNSEL

By: _____ Date: 6/25/14

Deputy County Counsel

COUNTY OF SAN LUIS OBISPO,

A Public Entity in the State of California

By: _____ Date: _____

Chairman, Board of Supervisors

ATTEST

By: _____

County Clerk and Ex-Officio Clerk

of the Board of Supervisors

EXHIBIT A
CONTRACT FOR WOMEN WITH CHILDREN RESIDENTIAL RECOVERY FACILITY
SCOPE OF SERVICES

A. Target Population

Adult females who are San Luis Obispo County residents that meet the following criteria:

- meet the eligibility criteria for funding as determined by the Court, Child Welfare Services, and County Drug and Alcohol Services (all clients must be participants in the Dependency Drug Court);
- have alcohol or drug related problems as established by standardized assessment;
- are evaluated as requiring, and being able to benefit from, a structured living environment in conjunction with their substance use disorder treatment or case management services; and
- are pregnant, have in their care children 0-6 years of age, or are eligible for reunification services with their children ages 0-6 years of age.

B. Facility

Facility size is to be sufficient to accommodate at least five (5) adult female individuals per location and up to ten (10) children 0-6 years of age. All pertinent licensing and safety requirements must be met, including, without limitation, local fire code, conditional use permits, and zoning requirements. There shall be adequate indoor and outdoor space for residents and program needs. Living quarters and recovery areas shall be attractive, clean, safe and functional. The facility shall meet American with Disabilities Act (ADA) criteria.

C. Staffing

Staffing levels must be sufficient to provide continuous on-site supervision, twenty-four hours a day, seven days per week. Staffing can be volunteer, paid, or student interns or other agency provided staffing. Staffing, including volunteers who provide on-site supervision, must not currently be on Probation or on Parole, have an open Child Welfare Services case or be a current client of Drug and Alcohol Services.

Transportation to existing outpatient treatment services for treatment program participation may be provided by the County treatment staffing. A maximum of five days per week services could be conducted which would require transportation. Court appearances, treatment sessions, and transportation may also be required of the residents. **Staffing of the facility must work in close coordinated cooperation with the intensive outpatient treatment programs in order to meet the Federal definition of a residential treatment facility.**

D. Referrals/Placement

Referrals and placement of adults in the Residential Recovery Beds will be facilitated through San Luis Obispo County Drug and Alcohol Services. **The County will maintain the sole use of the Residential Recovery Beds purchased.** The County will determine discharge dates for each resident with the exception of threats or harm to other residents, drug violations, and other residential rules.

E. Required Essential Service Elements to be provided by the Adult Residential Recovery Beds Provider

- Provide on-site cooking facilities or meals, lodging, bathing, laundry, area for exercise, recreation, and visiting capacity
- Culturally competent recovery maintenance services including afternoon and overnight on-site supervision, seven days per week using paid or volunteer staffing
- Transportation services to outpatient treatment providers and Court
- Collaboration with other treatment providers, including detoxification and medication services
- Collaboration with Social Services and Probation officers, including in-home visitations, searches in conjunction with the client's terms and conditions, administration of any GPS monitoring devices, and conducting of drug and alcohol testing of residents (devices and drug testing services will be included in the bed day cost or be provided by the County)
- Case planning meetings and/or communication with the Drug and Alcohol Services Treatment Team on a weekly basis
- Recovery based activities (such as 12-Step community meetings, in-home lifeskills training, faith-based activities, educational classes, socialization activities, support for employment, etc.)
- Exit/Discharge planning in collaboration with Drug and Alcohol Services and Child Welfare Services Department with linkage to acuity step down services

F. Residential Environment Standards

Contractor will adhere to the attached Residential Standards.

G. Perinatal alcohol and drug free housing services:

1. Scope of Services: Contractor shall provide, maintain, and operate a Perinatal Sober Living Residential Facility consistent with State and Federal Guidelines for pregnant and parenting women and their children ages 0-6 affected by substance abuse as defined below. Said facility shall have a static capacity of serving five (5) women and their children (up to ten) annually. Contractor will comply with the following:
   a. Service Specifications:

1) Contractor shall maintain all required elements necessary to remain operational as a Perinatal Sober Living Residential Facility State Department of Alcohol and Drug Programs "Perinatal Services Network Guidelines of 2009" as referenced in Exhibit H of this contract.

2) Contractor shall provide an alcohol and drug free living environment with a static capacity of five (5) women and their children, up to 15 individuals in total. A woman is defined for purposes of this Agreement as a person who is 18 years of age or older or a minor who has been emancipated pursuant to Division 11 of the Family Code.

3) Contractor shall have a written intake procedure for new residents which shall have, at a minimum, the following:

    i. Contractor shall have a written policy prohibiting alcohol and any drugs other than prescription medication at the facility.

    ii. Admission interviews to be scheduled within 1 week of receipt of referral from County, regardless of bed availability. Vacancies should be filled within two weeks with a name from the waiting list

4) Contractor shall provide alcohol and drug free residential program which will include both individual and group counseling, and which will require for the adult residences a maximum stay of nine months, which may be a consecutive and/or intermittent stay, at the discretion of the County Drug and Alcohol Specialist assigned to the program and/or County Drug and Alcohol Program Supervisor.

5) Contractor will ensure that all families living in the facility have access to and receive services from the Perinatal Outpatient Extended Group (POEG) program provided by San Luis Obispo County Drug and Alcohol Services or other County Drug and Alcohol services as determined by County. No drug or alcohol treatment services will be provided on site unless provided by licensed and certified staff.

6) In the event women living in the facility are placed on the County's DAS waitlist for treatment services, the Contractor shall comply with County's admission priority as defined by 45 CFR 96.131 and ensure women will enter services based on the following priority:

    i. Pregnant women considered as injection drug users;

    ii. Pregnant women considered as substance users;

    iii. Parenting women considered as injection drug users; and

    iv. Parenting women considered as substance users.

    All individuals on any established waiting list shall receive interim services as defined by 45 CFR Sections 96.121 and 96.131. County will provide these interim services.

7) Contractor shall notify the County within 24 hours of a client voluntarily terminating her stay at the facility prior to program completion. If Contractor

must discharge a client prior to program completion for reasons associated with rules violation, Contractor will provide County with telephonic notification within 24 hours of the discharge in order to enable the County to make arrangements as to plan of action for said client. In the event the discharge must take place immediately due to threat to safety of staff or clients, Contractor will contact the County within 24 hours of the client discharge. Contractor will follow all applicable laws and regulations in the performance of the discharge.

8) Contractor and Contractor staff will meet at least 1 time per week with County Drug and Alcohol Services (DAS) Drug and Alcohol Specialist(s) and/or County Drug and Alcohol Services Workers to discuss active cases.

9) Contractor shall ensure that volunteers, hired staff, and Contractor assigned to program oversight are specifically trained in the areas of: Child Abuse, Overview of Medication for Paraprofessionals, Biopsychosocial Model of Addiction, Mood Disorders in Adults-A Summary for Paraprofessionals, Overview of Substance Abuse for Paraprofessionals in Behavioral Health and Social Services Agencies, and Therapeutic Boundaries for Paraprofessionals by participating in training provided by County or provide documentation of completed online/live courses for such individuals.

10) Contractor will ensure that volunteers, hired staff, and Contractor receive continuing education/training in cultural diversity, case management, boundary setting, confidentiality, ethics and other appropriate topics as provided by County.

11) Contractor shall provide referrals to other programs that are supervised activities designed to help women "transition" back into the community, including education; social/recreational events; continuing self-help/support group meetings, searching for a job and/or spiritual or volunteer activities or the Contractor shall provide such services.

12) Contractor shall provide adequate opportunities for residents to participate in activities consistent with the stated goals and objectives of their treatment plans, if any, by facilitating referrals, transportation, and care management. Contractor can choose to bring in community resources to the facility for ease of access.

13) Contractor shall support and cooperate with all residents' known court orders and accommodate residents' schedules for compliance with the residents' treatment plans, if any.

14) Contractor shall conduct drug testing as needed and to the extent permitted by law. County may provide dip stick testing devices to Contractor.

15) Contractor shall report daily occupancy bed count with monthly claim.

16) Contractor shall maintain daily sign-in logs for volunteers that provide house management activities and supervision. The house logs are to provide documentation regarding hours of supervision and shall be available upon request. A sample sign-in log is provided as Exhibit I to this Contract.

Contractor shall use a sign-in log substantially in the form as provided on Exhibit I.

17) When a disagreement regarding placement, treatment, discharge or other client services arises which cannot be resolved by County or Contractor staff, the executive director from Contractor and the County's Drug and Alcohol Services Division Manager, shall confer to resolve the issue.

b. Staffing: There shall be a Program Manager or House Manager who will have direct oversight of all facility activities and ancillary staff. Program/house manager shall be at the facility a minimum of 20 hours per week, while clients are present. Paid, volunteer or intern staff shall provide additional supervision for a total of 40 hours. Program Manager or House Manager should be available by telephone. The on-site supervision of the residents is 24 hours per day, 365 days per year and shall be provided by the Program Manager, House Manager, and/or other staffing.

2. Units of Service:

a. Units Defined:

1) Static Capacity: number of individuals residing in the facility at any one time;

b. Minimum Annual Units:

1) Static Capacity of five (5) women plus their children, up to fifteen (15) individuals total

3. Measurable Outcomes:

a. Provide a supervised drug free residential recovery environment with a static capacity of five women and their children, up to 15 individuals total for a maximum of 9 months stay.

EXHIBIT B

CONTRACT FOR WOMEN WITH CHILDREN RESIDENTIAL RECOVERY FACILITY COMPENSATION

1. Tax Identification Number. Prior to commencement of services, Contractor shall provide a valid and current taxpayer identification number to the San Luis Obispo County Auditor/Controller at: County Government Center, 1055 Monterey Street, Suite D220, San Luis Obispo, California, 93408

2. County's Maximum Cost of the Contract for Services.

   County shall pay to Contractor as compensation in full for all services performed by Contractor pursuant to this Contract, the following sums in the following manner:

   County will pay the Contractor for actual services used by the County. In no event shall the County's obligation under this Contract exceed the maximum fixed amount set forth below. The maximum dollar amount of this Contract is two hundred sixty one thousand dollars ($261,000). Should both parties exercise the right to renew this Contract as described in Exhibits C and D, the maximum fund amount shall be $261,000 per fiscal year, unless the Parties agree otherwise pursuant to Paragraph 30 of Exhibit D.

   Contractor may also elect to start up a new facility during the contracted period. County will reimburse start-up costs, not to exceed $20,000 associated with opening a new facility. Written permission from the County to the Contractor must be established prior to requesting reimbursement. No start-up funds may be used for a new facility if that facility is a replacement for, or is intended to be a replacement for, an existing facility. Start-up amount is not up front to starting a facility but is provided on the back-end. Purchases included in start-up must be justifiable to opening a new house and include such items as deposit, first month's rent, bedding, sheets, towels, kitchen utensils/supplies, furniture and such. Contractor is expected to maintain receipts of all start-up purchases to be available for inspection if requested. Any rent deposit included in this start-up reimbursement that is paid by the County shall be returned to the County in the event the facility moves or closes.

3. Services Covered

   The component of services covered in this Contract and the related compensation rates are anticipated types and rates for services. However, the Board of Supervisors delegates to the Behavioral Health Administrator the authority to exchange types of services for another type described in this Contract at the rates listed for each service respectively. The Board of Supervisors expressly grants to the Behavioral Health Administrator the authority to approve budget adjustments provided the change does not increase the

maximum compensation of this Contract. Contractor shall submit for approval to the Director, all proposed budget adjustments to reallocate funds among line items. Requests for such budget adjustments must be in writing with a showing of good cause that advances the overall purpose of the contract.

4. Billing. Contractor shall bill County for services provided under this Contract as follows:
    a. For all services in a calendar month, the Contractor shall invoice County by the 15th day of the following calendar month. The invoice shall include detailed daily charge by client, showing each client's number of services that were provided on each day of the month, the service rate, and the total charges for that client. The invoice shall include an itemized account of each client's medication support service minutes and provide the name and Medi-Cal provider number of the treating physician. Each client's account will commence on a separate page of Contractor's letterhead so that no other client's information can be observed on the invoice.
    b. Contractor will separately identify for County those services which are reimbursable under the Medi-Cal and Medicare programs so that County may bill and recover said reimbursement. Contractor agrees that any such reimbursement received by County shall be and remain the property of County.
    c. For all services associated with facility start-up, which is not to exceed $20,000, line item documentation of each purchase and associated price paid shall be included in an independent invoice or included with the initial first month invoice.

5. Payment by County. County shall, within thirty (30) days following receipt of a correct monthly invoice, pay the undisputed charges on the invoice. If there are any disputed charges on an invoice, County shall include the explanation of the nature of the dispute with the payment for the undisputed charges. The parties will exchange any information needed to resolve the dispute within a reasonable time.

6. Audit Risk. Contractor agrees to accept risk for Medi-Cal exceptions related to deficiencies in documentation or any other areas of responsibility to County to the extent allowed by law. Contractor further agrees to be responsible for reimbursing County any revenues to be paid to the State or Federal government, including but not limited to exceptions resulting from Medi-Cal audit, or as identified through utilization review and medical review by insurance carriers or other auditors. Said reimbursements shall include all lost revenues, damages of any kind, costs and attorney fees incurred by the County, and other charges assessed against the County to the full extent allowed by law.

7. Disputed Charges

In addition to withholding payment due to disputed charges on an invoice, County shall have the right to withhold payment to Contractor under the following conditions:

a. In the County's sole, discretionary opinion, as issued in writing by the Behavioral Health Administrator, Contractor's performance, in whole or in part, has not been carried out.

b. Contractor has not documented or has not sufficiently documented Contractor's services according to client records standards of the industry and any special requirements needed by third party payors or State or Federal funding agencies.

c. Contractor has failed or refused to furnish information or cooperate with any inspection, review or audit of Contractor's program or County's use of Contractor's program. This includes interviews or reviews of records in any form of information storage.

8. Contractor shall submit a line item budget for each type of service. Said budget shall be subject to approval by the Behavioral Health Administrator.

EXHIBIT C
CONTRACT FOR BEHAVIORAL HEALTH SERVICES
DURATION AND EFFECTIVE DATE

1. Effective Date.

This Contract shall be effective as of the date this Contract is signed by the Board of Supervisors for the County of San Luis Obispo, and that signator shall be the last to sign.

2. Service Date.

a. Services shall commence on or after July 1, 2014 and shall end upon the end of the duration date.

b. The County Board of Supervisors specifically acknowledges that in anticipation of execution of this contract, services within the scope of this contract may have been provided in reliance on assurances that this contract would be executed by the parties on the effective date. The services may have been rendered from July 1, 2014 to the date the Board of Supervisors is executing this contract and which were intended in the best interest of the public health and welfare. The Board of Supervisors expressly authorizes the retroactive effective date under this contract to July 1, 2014. The Board of Supervisors also expressly authorizes payment for those services accepted by the County at the same rates and under the same terms and conditions as stated in this contract, even though this contract is being signed after July 1, 2014.

c. If any services from July 1, 2014 until the effective date have been paid by a purchase order via the County Purchasing Agent, that amount shall be deducted from this contract.

3. Duration Date.

This contract shall remain in effect from the effective date stated above until June 30, 2015, unless terminated sooner pursuant to Sections 6 or 7 of Exhibit D or renewed pursuant to Section 4 of this Exhibit..

4. Option to Renew for One Year

By mutual agreement of the County and Contractor, this Contract may be renewed for a single one-year period beginning immediately upon the expiration of the Contract's initial one-year term. Such renewal shall be made in writing. The Health Agency Director is hereby delegated the authority to determine whether to renew this Contract without additional approval by the Board of Supervisors, so long as the renewal is in writing, approved by County Counsel, and consistent with the limits described in Section 30 of Exhibit D.

EXHIBIT D
CONTRACT FOR BEHAVIORAL HEALTH SERVICES
GENERAL CONDITIONS

1. Independent Contractor.

Contractor shall be deemed to be an independent contractor of County. Nothing in this contract shall be construed as creating an employer-employee relationship, partnership or a joint venture relationship. Nothing in this contract authorizes or permits the County to exercise discretion or control over the professional manner in which Contractor provides services. Contractor's services shall be provided in a manner consistent with all applicable standards and regulations governing such services.

2. No Eligibility for Fringe Benefits.

Contractor understands and agrees that Contractor and its personnel are not, and will not be, eligible for membership in or any benefits from any County group plan for hospital, surgical, or medical insurance, or for membership in any County retirement program, or for paid vacation, paid sick leave, or other leave, with or without pay, or for any other benefit which accrues to a County employee.

3. Warranty of Contractor for Provision of Services.

Contractor shall obtain and shall keep in full force and effect during the term of this Contract all permits, registrations and licenses necessary to accomplish the work specified in the Contract. Contractor shall furnish qualified professional personnel as prescribed by Title 9 of the California Code of Regulations, the Business and Professions Code, and all other applicable laws for the type of services rendered under this Contract. Contractor warrants that it, and each of the personnel employed or otherwise retained by Contractor, will at all times, to the extent required by law, be properly certified and licensed throughout the entire duration of this Contract under the local, state and federal laws and regulations applicable to the provision of services herein.

4. Warranty of Contractor re Compliance with all Laws.

Contractor shall keep informed of, observe, comply with, and cause all of its agents and personnel to observe and comply with all laws, rules, regulations, and administrative requirements adopted by federal, state, and local governments which in any way affect the conduct of work under this Contract. If any conflict arises between provisions of the scope of work or specifications in this Contract and any law, then the Contractor shall immediately notify the County in writing.

5. Power and Authority of Contractor.

If the Contractor is a corporation, Contractor represents and warrants that it is and will remain, throughout the term of this Contract, either a duly organized, validly existing California corporation in good standing under the laws of the State of California or a duly

organized, validly existing foreign corporation in good standing in the state of incorporation and authorized to transact business in the State of California.

6. Termination for Cause.

If the County determines that there has been a material breach of this Contract by Independent Contractor that poses a threat to health and safety, the County may immediately terminate the Contract. In addition, if any of the following occur, County shall have the right to terminate this Contract effective immediately upon giving written notice to the Independent Contractor:

a. Contractor fails to perform his duties to the satisfaction of the County; or

b. Contractor fails to fulfill in a timely and professional manner his obligations under this Contract; or

c. Contractor fails to exercise good behavior either during or outside of working hours that is of such a nature as to bring discredit upon the County; or

d. Any requisite licenses or certifications held by Contractor are terminated, suspended, reduced, or restricted; or

e. Contractor has not, to the satisfaction of the County, documented or has not sufficiently documented services provided by Contractor, which includes without limitation, failure to meet industry standards or failure to satisfy any special requirements needed by third party payors or federal or state funding agencies; or.

f. Contractor has failed or refused to furnish information or cooperate with any inspection, review or audit of Contractor's program or County's use of Contractor's program. This includes interviews or reviews of records in any form of information storage; or

g. Contractor fails to comply with any provision of the Mental Health Compliance Plan, Cultural Competency Plan, and Code of Ethics.

All obligations to provide services shall automatically terminate on the effective date of termination.

For all other material breaches of this Contract, County must give Contractor written notice setting forth the nature of the breach. If Contractor fails to remedy said breach within ten (10) days from the date of the written notice, County may terminate the Contract. Contractor shall thereafter have no further rights, powers, or privileges against County under or arising out of this Contract.

In the event a breach does not result in termination, but does result in costs being incurred by County, said costs shall be charged to and paid by Independent Contractor, which costs may include, but are not limited to, costs incurred by County in investigating and communicating with Contractor regarding said breach, including staff time.

7. Termination for Convenience.

Either party may terminate this Contract at any time by giving the other party at least 30 calendar days' written notice of termination for convenience ("Notice of Termination for Convenience"). Termination for convenience shall be effective at 11:59 p.m., Pacific

Standard Time, on the intended date for termination (the "Termination Date"). The terminating party shall deliver to the other party a notice specifying the date upon which such termination will become effective, which shall be at least 30 calendar days after the date of the notice.

Termination for convenience shall have no effect upon the rights and obligations of the parties arising out of any services, which were provided prior to the effective date of such termination. Contractor shall be paid for all work satisfactorily completed prior to the effective date of termination. After receiving a Notice of Termination for Convenience, Contractor shall, unless directed by County, place no further subcontracts for services or materials, terminate all subcontracts to the extent they relate to the work terminated, and settle all outstanding liabilities arising from the termination of subcontracts.

Neither this section nor Section 6 of this Exhibit apply to a decision by either party not to exercise an option to renew this contract.

8. Power to Terminate.

Termination of this Contract may be effectuated by the Health Agency Director without the need for action, approval, or ratification by the Board of Supervisors.

9. Non-Assignment of Contract.

Inasmuch as this Contract is intended to secure the specialized services of the Contractor, Contractor shall not delegate, assign, or otherwise transfer in whole or in part its rights or obligations under this contract without the prior written consent of County. Any such assignment, transfer, or delegation without the County's prior written consent shall be null and void.

10. Entire Agreement and Modifications.

This Contract supersedes all previous contracts between the parties hereto on the same subject matter and constitutes the entire understanding of the parties hereto on the subject matter of this Contract. Contractor shall be entitled to no other benefits than those specified herein. No changes, amendments or alterations shall be effective unless in writing and signed by both parties. Contractor specifically acknowledges that in entering into and executing this contract, Contractor relies solely upon the provisions contained in this Contract and no others.

11. Governing Law and Venue.

This Contract shall be governed by, and construed in accordance with, the laws of the State of California, without regard to its conflict of laws provisions. All of the parties' rights and obligations created hereunder shall be performed in the County of San Luis Obispo, State of California and such County shall be the venue for any action or proceeding that may be brought, or arise out of, this contract.

12. Waiver.

No delay or failure on the part of any party hereto in exercising any right, power or privilege under this Contract shall impair any such right power or privilege or be construed as a waiver of any default or any acquiescence therein. No single or partial exercise of any such right, power or privilege shall preclude the further exercise of such right power or

privilege or the exercise of any other right, power or privilege. No waiver shall be valid unless made in writing and signed by the party against whom enforcement of such waiver is sought and then only to the extent expressly specified therein.

13. Severability.

The Contractor agrees that if any provision of this Contract is found to be invalid, illegal or unenforceable, such term or provision shall be deemed stricken and the remainder of the Contract shall remain in full force and effect. Upon determination that any term or provision is invalid, illegal or unenforceable, the parties shall negotiate in good faith to modify this contract so as to affect the original intent of the parties as closely as possible.

14. Nondiscrimination.

Contractor agrees that it will abide by all Federal and State labor and employment laws and regulations pertaining to unlawful discrimination prohibiting discrimination against any employee or applicant for employment because of race, color, religion, sexual orientation, disability or national origin, and those conditions contained in Presidential Executive Order number 11246.

15. Notices.

All notices given or made pursuant hereto shall be in writing and shall be deemed to have been duly given if delivered personally, mailed by registered or certified mail (postage paid, return receipt requested) or sent by a nationally recognized overnight courier (providing proof of delivery) to the parties at the following addresses or sent by electronic transmission to the following facsimile numbers (or at such other address or facsimile number for a party as shall be specified by like notice):

Anne Robin, LMFT
Behavioral Health Services Administrator
2180 Johnson Avenue
San Luis Obispo, CA 93401-4535

And to Contractor at:

Any such notice shall be deemed to have been received if: (a) in the case of personal delivery or facsimile transmission with confirmation retained, on the date of such delivery or transmission; (b) in the case of nationally recognized overnight courier, on the next business day after the date sent; (3) in the case of mailing, on the third business day following posting.

16. Inspection Rights.

The Contractor shall allow the County to inspect or otherwise evaluate the quality, appropriateness, and timeliness of services performed under this Contract and to inspect

evaluate and audit any and all books, records, and facilities maintained by Contractor and subcontractors, pertaining to such service at any time during normal business hours. Books and records include, without limitation, all physical records originated or prepared pursuant to the performance under this Contract including work papers, reports, financial records and books of account. Upon request, at any time during the period of this Contract, and for a period of five years thereafter, the Contractor shall furnish any such record, or copy thereof, to County.

17. Headings.

The headings contained in this Contract are for reference purposes only and shall not affect in any way the meaning or interpretation of this Contract.

18. Signatory Authority.

Contractor warrants that it has full power and authority to enter into and perform this Contract, and the person signing this Contract warrants that he/she has been properly authorized and empowered to enter into this Contract.

19. Indemnification.

Contractor shall defend, indemnify and hold harmless the County, its Board of Supervisors, officers and employees from any and all claims, demands, damages, costs, expenses, judgments, attorney fees, experts' fees and expenses, liabilities or other losses that may be asserted by any person or entity, including Contractor, and that arise out of or are in any way connected with this Contract, whether in tort, contract, or otherwise. The obligation to indemnify shall be effective and shall extend to all such claims and losses, in their entirety. However, this indemnity will not extend to any claims or losses arising out of the sole negligence or willful misconduct of the County, its officers and employees.

20. Insurance.

Contractor, at its sole cost, shall purchase and maintain the insurance policies set forth below on all of its operations under this Contract. All of the insurance companies providing insurance for Contractor shall have, and provide evidence of, an A.M. Best & Co. rating of A:VII or above, unless exception is granted by Risk Manager. Further, all policies shall be maintained for the full term of this Contract and related warranty period if applicable.

Scope and Limits of Required Insurance Policies.

a. Commercial General Liability.

1. Policy shall include coverage at least as broad as set forth in Insurance Services Office Commercial General Liability Coverage (CG 00 01) with policy limits of not less than two million dollars ($2,000,000.00) combined single limit per occurrence. Policy shall be endorsed with the following specific language or contain equivalent language in the policy:

    i. The County of San Luis Obispo, its officers and employees, is named as an additional insured for all liability arising out of the operations by or on behalf of the named insured in the performance of this Contract.

ii. The insurance provided herein shall be considered primary coverage to the County of San Luis Obispo with respect to any insurance or self insured retention maintained by the County. Further, the County's insurance shall be considered excess insurance only and shall not be called upon to contribute to this insurance.

iii. The policy shall not be cancelled or materially changed without first giving thirty days prior written notice to the County of San Luis Obispo, Behavioral Health Department.

b. Business Automobile Policy.

1. Policy shall include coverage at least as broad as set forth in the liability section of Insurance Services Office Business Auto Coverage (CA 00 01) with policy limits of no less than $1 million dollars combined single limit for each occurrence. Said insurance shall include coverage for owned, non-owned, and hired vehicles. Policy shall be endorsed with the following specific language or contain equivalent language in the policy:

i. The County of San Luis Obispo, its officers and employees, is named as an additional insured for all liability arising out of the operations by or on behalf of the named insured in the performance of this Contract.

ii. The policy shall not be cancelled or materially changed without first giving thirty days prior written notice to the County of San Luis Obispo, Department of Behavioral Health.

c. Workers' Compensation / Employer's Liability Insurance.

1. Workers' compensation policy shall provide statutory limits as required by State of California. Policy shall be endorsed with the following specific language or contain equivalent language in the policy:

d. Contractor and its insurer shall waive all rights of subrogation against the County, its officers and employees for workers' compensation losses arising out of this contract.

i. The policy shall not be cancelled or materially changed without first giving thirty days prior written notice to the County of San Luis Obispo, Behavioral Health Department.

ii. Employer's liability policy shall provide one million dollars ($1,000,000.00) per accident for bodily injury or disease.

e. Professional Liability (Errors and Omissions).

1. Professional Liability policy shall be appropriate to the Contractor's profession with limits of no less than $1,000,000 per occurrence or claim, $2,000,000 aggregate.

i. The policy shall not be cancelled or materially changed without first giving thirty days prior written notice to the County of San Luis Obispo, Behavioral Health Department.

ii. Claims Made Policies: If any of the required policies provided coverage on a claims-made basis:

1) The Retroactive Date must be shown and must be before the date of the contract or the beginning of contract work;

2) Insurance must be maintained and evidence must be provided *for at least five (5) years after completion of the contract work*;

3) If coverage is canceled or non-renewed, and *not replaced with another claims-made policy form with a Retroactive Date* prior to the contract effective date, the Contractor must purchase "extending reporting" coverage for a minimum of *five (5) years* after completion of contract work.

f. Deductibles and Self-Insurance Retentions.

1. All deductibles and/or self-insured retentions which apply to the insurance policies required herein will be declared in writing and approved by the County prior to commencement of this contract.

g. Documentation.

1. Prior to commencement of work and annually thereafter for the term of this contract, Contractor will provide to the County of San Luis Obispo, Behavioral Health Department properly executed certificates of insurance clearly evidencing the coverage, limits, and endorsements specified in this contract. Further, at the County's request, the Contractor shall provide copies of endorsements and certified copies of the insurance policies within thirty days of request.

h. Absence of Insurance Coverage.

1. County may direct Contractor to immediately cease all activities with respect to this contract if it determines that Contractor fails to carry, in full force and effect, all insurance policies with coverage levels at or above the limits specified in this contract. Any delays or expense caused due to stopping of work and change of insurance shall be considered Contractor's delay and expense.

21. Nonappropriation of Funds.

During the term of this Contract, if the State or any federal government terminates or reduces it's funding to County for services that are to be provided under this Contract, then County may elect to terminate this Contract by giving written notice of termination to Contractor effectively immediately or on such other date as County specifies in the notice. In the event that the term of this Contract extends into fiscal year subsequent to that in which it was approved by the County, continuation of the Contract is contingent on the appropriation of funds by the San Luis Obispo County Board of Supervisors or, if applicable, provision of State or Federal funding source. If County notifies Contractor in writing that the funds for this Contract have not been appropriated or provided, this Contract will terminate. In such an event, the County shall have no further liability to pay any funds to the Contractor or to furnish any other consideration under this Contract, and the Contractor shall not be obligated to perform any provisions of this Contract or to provide services intended to be funded pursuant to this Contract. If partial funds are appropriated or provided, the County shall have the option to either terminate this Contract

with no liability to the County or offer a Contract amendment to the Contractor to reflect the reduced amount.

22. Force Majeure.

Neither the County nor the Contractor shall be deemed in default in the performance of the terms of this contract if either party is prevented from performing the terms of this Contract by causes beyond its control, including without limitation: acts of God; rulings or decisions by municipal, Federal, States or other governmental bodies; any laws or regulations of such municipal, Federal, States or other governmental bodies; or any catastrophe resulting from flood, fire, explosion, or other causes beyond the control of the defaulting party. Any party delayed by force majeure shall as soon as reasonably possible give the other party written notice of the delay. The party delayed shall use reasonable diligence to correct the cause of the delay, if correctable, and if the condition that caused the delay is corrected, the party delayed shall immediately give the other parties written notice thereof and shall resume performance under this Contract.

23. Fiscal Controls.

Contractor shall adhere to the accounting requirements, financial reporting, and internal control standards as described in the Auditor-Controller Contract Accounting and Administration Handbook, (Handbook) which contains the minimum required procedures and controls that must employed by Contractor's accounting and financial reporting system, and which is incorporated herein by reference. The handbook may be modified from time to time and contractor shall comply with modifications from and after the date modified. Contractor shall require subcontractors to adhere to the Handbook for any services funded through this contract, unless otherwise agreed upon in writing by County.

a. The Handbook is available at http://www.slocounty.ca.gov/AC/, under Policies and Procedures or at the Auditor-Controller's Office, 1055 Monterey Street Room D220, County Government Center, San Luis Obispo CA, 93408,

b. The Office of Management and Budget (OMB) circulars are available at http://www.whitehouse.gov/omb/circulars.

24. State Audit.

Pursuant to California Government Code section 8546.7, every county contract involving the expenditure of funds in excess of ten thousand dollars ($10,000) is subject to examination and audit of the State Auditor for a period of three years after final payment under the contract.

25. Nondisclosure.

All reports, information, documents, or any other materials prepared by Contractor under this Contract are the property of the County unless otherwise provided herein. Such reports, information, documents and other materials shall not be disclosed by Contractor without County's prior written consent. Any requests for information shall be forwarded to County along with all copies of the information requested. County shall make sole decision whether and how to release information according to law.

26. Conflict of Interest.

Contractor acknowledges that Contractor is aware of and understands the provisions of Sections 1090 et seq. and 87100 et seq. of the Government Code, which relate to conflict of interest of public officers and employees. Contractor certifies that Contractor is unaware of any financial or economic interest of any public officer or employee of the County relating to this Contract. Contractor agrees to comply with applicable requirements of Government Code Section 87100 et seq. during the term of this Contract.

27. Immigration Reform and Control Act.

Contractor acknowledges that Contractor, and all subcontractors hired by Contractor to perform services under this Contract are aware of and understand the Immigration Reform and Control Act ("IRCA") of 1986, Public Law 99-603. Contractor certifies that Contractor is and shall remain in compliance with ICRA and shall ensure that any subcontractors hired by Contractor to perform services under this Contract are in compliance with IRCA.

28. Third Party Beneficiaries.

It is expressly understood that the enforcement of the terms and conditions and all rights of action related to enforcement, shall be strictly reserved to County and Contractor. Nothing contained in this contract shall give or allow and claim or right of action whatsoever by any other third person.

29. Tax Information Reporting.

Upon request, Contractor shall submit its tax identification number or social security number, whichever is applicable, in the form of a signed W-9 form, to facilitate appropriate fiscal management and reporting.

30. Delegation of Authority.

The component of services covered in this Contract and the related compensation rates are anticipated types and rates for services. Accordingly, the Board of Supervisors delegates to the Behavioral Health Administrator the authority to amend this Contract to exchange, delete, or add to the types of services and/or to increase compensation to Contractor up to the change order limits specified in the County's Contracting for Services Policy.

Any amendment made pursuant to a delegation of authority will only be effective if, prior to the commencement of services or extension of said Contract, the amendment is memorialized in writing, is approved by County Counsel, and is signed by the Behavioral Health Administrator and does not exceed the change order limits. This delegation of authority is expressly limited as stated herein.

The Board of Supervisors expressly delegates to the Health Agency Director or his designee the authority to decide whether to exercise the option to renew this agreement for one year pursuant to Exhibit C. The Health Agency Director is permitted to agree to any rate change associated with a renewal of this contract so long as that rate change falls within the change order limits of the County's Contracting for Services Policy.

EXHIBIT E
CONTRACT FOR BEHAVIORAL HEALTH SERVICES

SPECIAL CONDITIONS

1. Compliance with Health Care Laws.

Contractor agrees to abide by all applicable local, State and Federal laws, rules, regulations, guidelines, and directives for the provision of services hereunder, including without limitation, the applicable provisions of the Civil Code, Welfare and Institutions Code, the Health and Safety Code, the Family Code, the California Code of Regulations, the Code of Federal Regulations, and the Health Insurance Portability and Accountability Act. This obligation includes, without limitation, meeting delivery of service requirements, guaranteeing all client's rights provisions are satisfied, and maintaining the confidentiality of patient records.

2. No Discrimination In Level Of Services.

As a condition for reimbursement, Contractor shall provide to and ensure that clients served under this Contract receive the same level of services as provided to all other clients served regardless of status or source of funding.

3. Nondiscrimination.

Contractor shall comply with the provisions of Section 504 of the Rehabilitation Act of 1973, as amended pertaining to the prohibition of discrimination against qualified handicapped persons in all federally assisted programs or activities, as detailed in regulations signed by the Secretary of Health and Human services, effective June 2, 1977, and found in the Federal Register, Volume 42, No.86 dated May 4, 1977.

Contractor shall comply with the provisions of the Americans with Disabilities Act of 1990, the Fair Employment and Housing Act (Government Code section 12900 et seq.) and the applicable regulation promulgated thereunder (Title 2 Section 7285 et seq.) The Contractor shall give written notice of its obligations under this clause to labor organizations with which they have a collective bargaining or other agreement.

Contractor shall not engage in any unlawful discriminatory practices in the admission of beneficiaries, assignments of accommodations, access to programs or activities, treatment, evaluation, employment of personnel, or in any other respect on the basis of race, color, gender, religion, marital status, national origin, age, sexual preference or mental or physical handicap.

4. Quality Assurance.

Contractor agrees to conduct a program of quality assurance and program review that meets all requirements of the State Department of Health Care Services. Contractor agrees to cooperate fully with program monitoring or other programs that may be established by County to promote high standards of mental health care to clients at economical costs.

5. Compliance Plan.

Contractor and its employees, contractors and agents shall read, acknowledge receipt, and comply with all provisions of the latest edition of the County Mental Health Compliance Plan and Code of Ethics ("Compliance Plan"). The Compliance Plan includes policies and procedures that are designed to prevent and detect fraud, waste and abuse in federal health care programs, as required by Section 6032 of the Deficit Reduction Act ("DRA"). Failure to comply with any Compliance Plan provision, including without limitation, DRA compliance provisions is a material breach of this Contract and grounds for termination for cause. The ethics plan ensures that the conduct of employees reflects the principles of the Mental Health Department to treat consumers, the general public, and other employees with integrity, honesty, courtesy, fairness and to adhere to the requirements set by various federal and statute regulatory agencies. Contractor agrees that all staff employed by Contractor will follow these ethical standards, including compliance with state and federal regulations for safeguarding client information.

Contractor will certify, on an annual basis, that it and all of its employees, contractors and agents have read and received a copy of the Compliance Plan and agree to abide by its provisions, and will orientate staff to enforce established standards to ensure organizational and individual compliance. In addition, at the time Contractor hires a new employee, contractor or agent, Contractor will certify that the individual has read and received a copy of the Compliance Plan and agrees to abide by its provisions.

6. Compliance with County Cultural Competence Plan.

Contractor will meet cultural, ethnic and linguistic backgrounds of the clients served, in accordance with the County Cultural Competence Plan, including access to services in the appropriate language and/or reflecting the appropriate culture or ethnic group. Contractor will certify, on an annual basis, that it and all of its employees, contractors and agents have read and received a copy of the County Cultural Competence Plan and agree to abide by its provisions. Contractor will use professional skills, behaviors, and attitudes in its system that ensures that the system, or those being seen in the system, will work effectively in a cross cultural environment.

7. Training Program.

Contractor will participate in training programs as provided in Title 22 of the California Code of Regulations, Health Information Portability and Accountability Act, and other appropriate regulations, and as required by County.

8. Record keeping and reporting of services.

Contractor shall:

a. Keep complete and accurate records for each client treated pursuant to this Contract, which shall include, but not be limited to, diagnostic and evaluation studies, treatment plans, medication log, progress notes, program compliance, outcome measurement and records of services provided in sufficient detail to permit an evaluation of services without prior notice. Such records shall comply with all applicable Federal, State, and County record maintenance requirements.

b. Submit informational reports as required by County on forms provided by or acceptable to County with respect to Contractor's program, major incidents, and fiscal activities of the program.

c. Collect and provide County with all data and information County deems necessary for County to satisfy State reporting requirements, which shall include, without limitation, Medi-Cal Cost reports in accordance with Welfare and Institutions Code 5651(a)(4), 5664(a) and (b), 5705(b)(3), 5718(c) and guidelines established by DHCS. Said information shall be due no later than 90 days after close of fiscal year of each year, unless a written extension is approved by the County. Contractor shall provide such information in accordance with the requirements of the Short-Doyle/Medi-Cal Cost Reporting System Manual, applicable state manuals and/or training materials, and other written guidelines that may be provided by County to Contractor.

9. State Audits.

Pursuant to California Code of Regulations section 1810.380, Contractor shall be subject to State oversight, including site visits and monitoring of data reports and claims processing; and reviews of program and fiscal operations to verify that medically necessary services are provide in compliance with said code and the contract between the State and County. If the Contractor is determined to be out of compliance with State or Federal laws and regulations, the State may require actions of the County to rectify any out of compliance issue, which may include financial implications. Contractor agrees to be held responsible for their portion of any action the State may impose on the County.

10. Equipment.

Contractor shall furnish all personnel, supplies, equipment, telephone, furniture, utilities, and quarters necessary for the performance of services pursuant to this Contract with the exception of:

a. All required Behavioral Health forms;

b. County may at its option and at County's sole discretion, elect to provide certain equipment which shall remain County property and be returned to the County upon earlier demand by or in no event later than the termination of the Contract. Contractor may at its option use County provided equipment for non-County clients as long as the equipment in any given instance is not for the sole use of non-County clients.

11. Other Employment.

Contractor shall retain the right to provide services at another facility or to operate a separate private practice; subject, however, to the conditions that:

a. No such private practice shall be conducted or solicited on County premises.

b. Such other employment shall not conflict with the duties, nor the time periods within which to perform those duties, described in this Contract.

c. The insurance coverage provided by the County or by the Contractor for the benefit of the County herein is in no way applicable to or diminished by any other employment or services not expressly set forth in this Contract.

12. Screening for Inspector Generals' Excluded Provider List and Medi-Cal List of Excluded Providers.

At the time of securing a new employee or service provider, Contractor shall conduct or cause to be conducted a screening and provide documentation to County certifying that its new employee or service provider is not listed on the Excluded Provider List of the Office of the Inspector General or the Medi-Cal List of Excluded Providers. On an annual basis, Contractor shall conduct or cause to be conducted a screening of all employees, contractors or agents and shall sign a certification documenting that neither Contractor nor any of its employees, contractors or agents are listed on the Excluded Provider List of the Office of the Inspector General or the Medi-Cal List of Excluded Providers. Documentation shall be forwarded to the Mental Health Contracts Coordinator for inclusion in the contract file.

13. State Department of Health Care Services Contract.

Contractor agrees that this Contract shall be governed by and construed in accordance with the laws, regulations and contractual obligations of County under its agreement with the State Department of Health Care Services to provide specialty mental health services to Medi-Cal beneficiaries of San Luis Obispo County. (Medi-Cal Specialty Mental Health Services, Welfare and Institutions Code section 5775).

14. Placement Authority.

County will have sole and exclusive right to screen and approve or disapprove clients prior to placement in Contractor's facility. Approval must be obtained in writing by client's case manager or designee prior to placement under this Contract.

15. Inspection of Records by Local, State or Federal Agency.

The Contractor shall allow the County, State Department of Health Care Services (DHCS), United States Department of Health and Human Services (HHS), the Comptroller General of the United States (Government Accountability Office, GAO), and other authorized federal and state agencies, or their duly authorized representatives, to inspect or otherwise evaluate the quality, appropriateness, and timeliness of services performed under this Contract and to inspect, evaluate and audit any and all books, records, and facilities maintained by Contractor, pertaining to such service at any time during normal business hours. Books and records include, without limitation, all physical records originated or prepared pursuant to the performance under this Contract including work papers, reports, financial records, books of account, beneficiary records, prescription files, and any other documentation pertaining to covered services and other related services for beneficiaries. Upon request, at any time during the period of this Contract, and for a period of five years thereafter, the Contractor shall furnish any such record, or copy thereof, to County, State DHCS, HHS, or GAO as requested.

16. Confidentiality.

Contractor shall abide by all applicable local, State and federal laws, rules, regulations, guidelines, and directives regarding the confidentiality and security of patient information, including without limitation, Sections14100.2 and 5328 et seq. of the Welfare and Institutions Code Sections 14100 and 5328 et seq., Section 431.300 et seq. of Title 42 of the Code of Federal Regulations, the Health Insurance Portability and Accountability

Act (HIPAA) and its implementing regulations, including but not limited to Title 45 CFR Parts 142, 160, 162 and 164, and the provisions of Exhibit F, and the Business Associate Agreement attached to this Contract and incorporated by this reference. Any conflict between the terms and conditions of this Contract and the Business Associate Agreement are to be read so that the more legally stringent terms and obligations of the Contractor shall control and be given effect. Contractor shall not disclose, except as otherwise specifically permitted by the Contract or authorized by the client/patient or the law, any such identifying information without prior written authorization in accordance with State and Federal laws.

17. License Information.

Contractor agrees that all facilities and staff including, but not limited to, all professional and paraprofessional staff used to provide services will maintain throughout the term of this Contract, such qualifications, licenses and/or permits as are required by state or local law. Contractor shall provide County a list of all licensed persons who may be providing services under this Contract. The list shall include the name, title, professional degree, license number, and NPI number.

18. Gifts.

Gifts may not be charged to this Contract, whether to Contractor staff or anyone else. However, incentive items for youth clients used in a clinical behavioral modification program are allowed with clinical documentation and compliance with established County procedures.

19. Reports of Death, Injury, Damage or Abuse.

If the County discovers any practice, procedure, or policy of the Contractor which deviates from the requirements of this Contract, violates federal or state law, threatens the success of the program conducted pursuant to this Contract, jeopardizes the fiscal integrity of such program, or compromises the health or safety of recipients of service, County may require corrective action, withhold payment in whole or in part, or terminate this Contract immediately. If County notifies Contractor that corrective action is required, Contractor shall promptly initiate and correct any and all discrepancies, violations or deficiencies to the satisfaction of the County within thirty (30) days, unless County notifies Contractor that it is necessary to make corrections at an earlier date in order to protect the health and safety of recipients of service.

Contractor agrees to notify the County immediately should Contractor be investigated, charged, or convicted of a health care related offense. During the pendency of any such proceedings, Contractor shall keep the County fully informed about the status of such proceedings and to consult with the County prior to taking any action which will directly impact the County. This Contract may be terminated immediately by County upon the actual exclusion, debarment, loss of licensure, or conviction of Contractor of a health care offense. Contractor will indemnify, defend, and hold harmless the County for any loss or damage resulting from the conviction, debarment, or exclusion of Contract or subcontractors.

If Contractor is an in-patient facility, Contractor shall submit its patient admissions and length of stay requests for utilization review through existing hospital systems or professional standards review organizations.

REPORTS OF DEATH, INJURY, DAMAGE, OR ABUSE

a. Reports of Death, Injury, or Damage. If death, serious personal injury, or substantial property damage occur in connection with the performance of this Contract and involving County's clients, Contractor shall immediately notify the County's Behavioral Health Administrator by telephone. In addition, Contractor shall promptly submit to County a written report including: (1) the name and address of the injured /deceased person; (2) the time and location of the incident; (3) the names and addresses of Contractor s employees or agents who were involved with the incident; (4) the names of County employees, if any, involved with the incident; and (5) a detailed description of the incident.

b. Child Abuse Reporting. Contractor shall ensure that all known or suspected instances of child abuse or neglect are promptly reported to proper authorities as required by the Child Abuse and Neglect Reporting Act, Penal Code § 11164, et eq. Contractor shall require that all of its employees, consultants, and agents performing services under this Contract who are mandated reporters under the Act sign statements indicating that they know of and will comply with the Act's reporting requirements.

c. Elder Abuse Reporting. Contractor shall ensure that all known or suspected instances of abuse or neglect of elderly people 65 years of age or older and dependent adults age 18 or older are promptly reported to proper authorities as required by the Elder Abuse and Dependent Adult Protection Act (Welfare and Institutions Code § 15600 Code, et seq.). Contractor shall require that all of its employees, consultants, and agents performing services under this Contract who are mandated reporters under the Act sign statements indicating that they know of and will comply with the Act's reporting requirements.

20. Disclosure of Unusual Incidents.

Contractor shall notify the County's Behavioral Health Administrator, by telephone, of the violation of any provision of this Contract within 24 hours of obtaining reasonable cause to believe such a violation occurred. Notice of such violation shall be confirmed by deliver to the County's Behavioral Health Administrator, within 72 hours of obtaining a reasonable cause to believe that such violation occurred, of a written notice which shall describe the violation in detail. Contractor shall comply with state law and the County's policies and requirements concerning the reporting of unusual occurrences and incidents.

EXHIBIT F
CONTRACT FOR BEHAVIORAL HEALTH SERVICES

BUSINESS ASSOCIATE AGREEMENT

1. General Provisions and Recitals.

A. All terms used, but not otherwise defined below herein, have the same meaning as in the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), the Health Information Technology for Economic and Clinical Health Act ("HITECH"), and their implementing regulations at 45 CFR Parts 160 through 165 ("HIPAA regulations") (collectively along with state law privacy rules as "HIPAA Laws") as they may exist now or be hereafter amended.

B. A business associate relationship under the HIPAA laws between Contractor and County arises to the extent that Contractor performs, or delegates to subcontractors to perform, functions or activities on behalf of County under the Agreement.

C. County wishes to disclose to Contractor certain information pursuant to the terms of the Agreement, some of which may constitute Protected Health Information ("PHI"), as defined by the HIPAA laws, to be used or disclosed in the course of providing services and activities pursuant to, and as set forth, in the Agreement.

D. The parties intend to protect the privacy and provide for the security of PHI that may be created, received, maintained, transmitted, used, or disclosed pursuant to the Agreement in compliance with the applicable standards, implementation specifications, and requirements of the HIPAA laws.

E. The HIPAA Privacy and Security rules apply to Contractor in the same manner as they apply to County. Contractor agrees therefore to be in compliance at all times with the terms of this Business Associate Agreement and the applicable standards, implementation specifications, and requirements of the Privacy and the Security rules with respect to PHI and electronic PHI created, received, maintained, transmitted, used, or disclosed pursuant to the Agreement.

2. Definitions.

A. "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.

B. "Breach" means the acquisition, access, use, or disclosure of PHI in a manner not permitted under the HIPAA laws which compromise the security or privacy of the PHI.

(1) Breach excludes:

(a) 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.

(b) Any inadvertent disclosure by a person who is authorized to access PHI at Contractor to another person authorized to access PHI at the Contractor's, 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.

(c) 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 retain such information.

(2) 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:

(a) The nature and extent of the PHI involved, including the types of identifiers and the likelihood of re-identification;

(b) The unauthorized person who used the PHI or to whom the disclosure was made;

(c) Whether the PHI was actually acquired or viewed; and

(d) The extent to which the risk to the PHI has been mitigated.

C. "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).

D. "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 required by the HIPAA laws.

E. "County PHI" means either: (1) PHI disclosed by County to Contractor; or (2) PHI created, received, maintained, or transmitted by Contractor pursuant to executing its obligations under the Contract.

3. Obligations and Activities of Contractor as a Business Associate.

A. Contractor agrees not to use or further disclose County PHI other than as permitted or required by this Business Associate Agreement or as required by law.

B. Contractor agrees to use appropriate safeguards and other legally-required safeguards to prevent use or disclosure of County PHI other than as provided for by this Business Associate Agreement.

C. Contractor agrees to comply with the HIPAA Security Rule at Subpart C of 45 CFR Part 164 with respect to electronic County PHI.

D. Contractor agrees to mitigate, to the extent practicable, any harmful effect that is known to Contractor of a Use or Disclosure of County PHI by Contractor in violation of

the requirements of this Business Associate Agreement or HIPAA laws.

E. Contractor agrees to report to County immediately any Use or Disclosure of PHI not provided for by this Business Associate Agreement of which Contractor becomes aware. Contractor must report Breaches of Unsecured PHI in accordance with the HIPAA laws.

F. 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 Agreement to Contractor with respect to such information.

G. Contractor agrees to provide access, within ten (10) calendar days of receipt of a written request by County, to PHI in a Designated Record Set, to County or, as directed by County, to an Individual in order to meet the requirements under 45 CFR § 164.524 or any other provision of the HIPAA laws.

H. Contractor agrees to make any amendment(s) to PHI in a Designated Record Set that County directs or agrees to pursuant to 45 CFR § 164.526 at the request of County or an Individual, within fifteen (15) 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.

I. Contractor agrees to make internal practices, books, and records, including policies and procedures, 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 as determined by County or as designated by the Secretary for purposes of the Secretary determining County's compliance with the HIPAA Privacy Rule.

J. Contractor agrees to document any Disclosures of County PHI 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.

K. Contractor agrees to provide County or an Individual, as directed by County, in a time and manner to be determined by County, any 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 the HIPAA laws.

L. 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.

M. Contractor shall work with County upon notification by Contractor to County of a Breach to properly determine if any Breach exclusions exist.

4. Security Rule.

A. 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, § 164.312, and § 164.316 with respect to electronic County PHI or Contractor creates, receives, maintains, or transmits on behalf of County. Contractor shall follow generally accepted system security principles and the requirements of the HIPAA Security Rule pertaining to the security of electronic PHI.

B. Contractor shall ensure that any Subcontractors that create, receive, maintain, or transmit electronic PHI on behalf of Contractor agree through a contract with Contractor to the same restrictions and requirements contained this Business Associate Agreement.

C. Contractor shall report to County immediately any Security Incident of which it becomes aware. Contractor shall report Breaches of Unsecured PHI in accordance with Paragraph E below and as required by 45 CFR § 164.410.

5. Breach Discovery and Notification.

A. 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.

(1) 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.

(2) 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 or state common law of agency.

(3) Contractor's notification may be oral, but shall be followed by written notification within 24 hours of the oral notification.

B. Notices shall be sent to the following address:

Anne Robin, LMFT
Behavioral Health Administrator
2180 Johnson Avenue
San Luis Obispo, CA 93401-4535

C. Contractor's notification shall include, to the extent possible:

(1) 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;

(2) 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:

(a) A brief description of what happened, including the date of the Breach and the date of the discovery of the Breach, if known;

(b) 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);

(c) Any steps Individuals should take to protect themselves from potential harm resulting from the Breach;

(d) 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

(e) 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.

D. 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.

E. 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 Paragraph E 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.

F. 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.

G. Contractor shall provide County all specific and pertinent information about the Breach, including the information listed 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 ten (10) calendar days after Contractor's initial report of the Breach to County.

H. 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.

I. 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.

J. Contractor shall train and use reasonable measures to ensure compliance with the requirements of this Exhibit by employees who assist in the performance of functions or activities on behalf of County under this Contract and use or disclose protected information; and discipline employees who intentionally violate any provisions.

6. Permitted Use and Disclosure by Contractor.

A. Contractor may use or further disclose County PHI 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.

(1) Contractor may use County PHI, if necessary, for the proper management and administration of Contractor.

(2) 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:

(a) The Disclosure is required by law; or

(b) 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.

(3) Contractor may use or further disclose County PHI to provide Data Aggregation services relating to the Health Care Operations of Contractor.

B. Contractor may use County PHI, if necessary, to carry out legal responsibilities of Contractor.

C. Contractor may use and disclose County PHI consistent with the minimum necessary policies and procedures of County.

D. Contractor may use or disclose County PHI as required by law.

7. Obligations of County.

A. 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.

B. 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.

C. 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.

D. 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.

8. Business Associate Termination.

A. Upon County's knowledge of a material breach or violation by Contractor of the requirements of this Business Associate Agreement, County shall:

(1) Provide an opportunity for Contractor to cure the material breach or end the violation within thirty (30) business days; or

(2) Immediately terminate the Agreement, if Contractor is unwilling or unable to cure the material breach or end the violation within (30) calendar days, provided termination of the Agreement is feasible.

B. 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.

(1) This provision shall apply to all PHI that is in the possession of Subcontractors or agents of Contractor.

(2) Contractor shall retain no copies of the PHI.

(3) 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 Agreement to such PHI and limit 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.

C. The obligations of this Business Associate Agreement shall survive the termination of the Contract.

EXHIBIT G

CONTRACT FOR RESIDENTIAL RECOVERY BEDS

QUALIFIED SERVICE ORGANIZATION AGREEMENT

1. Contractor agrees that it is a Qualified Service Organization to the County within the meaning of 42 Code of Federal Regulations sections 2.11 and 2.12.

2. Contractor acknowledges that in receiving, storing, processing or otherwise dealing with any patient records from County or through performing its obligations per this contract the programs, Contractor is fully bound by 42 Code of Federal Regulations Part 2 and analogous state laws.

3. Contractor further agrees that if necessary, it will resist in judicial proceedings any efforts to obtain access to patient records except as permitted by 42 Code of Regulations Part 2.

EXHIBIT H
PERINATAL SERVICES NETWORK GUIDELINES 2009
FOR NON DRUG MEDI-CAL PERINATAL PROGRAMS

Introduction

In 1993, the Department of Alcohol and Drug Programs (ADP) combined the perinatal program requirements from the federally funded Options for Recovery pilot project, the Federal Substance Abuse Prevention and Treatment (SAPT) Block Grant Perinatal Set-Aside, and the State General Fund Perinatal Treatment Expansion Program (PTEP) into the Perinatal Services Network (PSN). This seamless service delivery system, under the standards of the Perinatal Services Guidelines, Fall 1993, ensured that programs provided consistent and quality services and adhered to the federal and state regulations.

In 1995, ADP revised the Perinatal Services Network Guidelines to reflect the need for contractual agreements among the state, counties, and providers. The PSN Guidelines were revised again in 1997 and 2004 in response to technical changes and to be consistent with terminology used throughout ADP. All PSN programs, regardless of fund source, are required to comply with the PSN Guidelines as specified in Part I, Article I(B)(7) of the Negotiated Net Amount (NNA) contract or NNA and Drug Medi-Cal (D/MC) combined contract between the state and the counties.

The PSN Guidelines are divided into two sections. Part I describes the perinatal program requirements and governing citations from the Code of Federal Regulations (CFR), California Health and Safety Code (HSC), and ADP Policy Letters. Part II lists the continuum of treatment modalities and service options that can be provided with perinatal funding.

In 2009, the PSN Guidelines were updated to clarify the requirement for therapeutic services for children and for consistency of terminology used throughout ADP. In 2010, the following typographical error was corrected on page six, section II, paragraph two; *each client for two or more hours* was corrected to *each client for three or more hours.*

Program requirements specific to Perinatal Drug Medi-Cal (DMC) are contained in the California Code of Regulations (CCR), Title 22, Division 3, Health Care Services.

I. PERINATAL PROGRAM REQUIREMENTS

A. Target Population (45 CFR 96.124 and HSC 10.5, 11757.59(a))

To be eligible for perinatal funding, a program must serve women who are either:

- pregnant and substance using; or
- parenting and substance using, with a child(ren) ages birth through 17. Parenting also includes a woman who is attempting to regain legal custody of her child(ren).

B. Admission Priority (45 CFR 96.131)

Priority admission for all women in perinatal funded services must be given in the following order:

1. pregnant injection drug users;
2. pregnant substance users;
3. parenting injection drug users; and
4. parenting substance users.

A program's admission criteria must comply with the Americans with Disabilities Act (ADA) of 1990. Specific information regarding the ADA is contained in each county's NNA contract.

C. Referral to Other Programs and Interim Services (45 CFR 96.121 and 96.131)

1. When a program is unable to admit a substance-using pregnant woman because of insufficient capacity or because the program does not provide the necessary services, referral to another program must be made and documented.
   Pregnant women must be referred to another program or provided with interim services no later then 48 hours after seeking treatment services. Pregnant women receiving interim services must be placed at the top of the waiting list for program admission.
2. Injection drug-using women must be either:
   a. admitted to a program no later then 14 days after making the request; or
   b. admitted to a program within 120 days after making the request, if interim services are provided.
3. To assist programs in making appropriate referrals, each county must make available a current directory of its community resources.
4. Interim services are defined as:
   a. Counseling and education about human immunodeficiency virus (HIV) and tuberculosis (TB), the risk of needle sharing, the risks of transmission to sexual partners and infants, and steps that can be taken to ensure that HIV and TB transmission does not occur.
   b. Referrals for HIV or TB treatment services, if necessary.
   c. Counseling pregnant women on the effects of alcohol and other drug use on the fetus and referrals for prenatal care for pregnant women.
   d. Referrals based on individual assessments that may include, but are not limited to: self-help recovery groups, pre-recovery and treatment support groups, sources for housing, food and legal aid, case management, children's services, medical services, and Temporary Assistance to Needy Families (TANF)/Medi-Cal services.

D. Women-Specific Treatment and Recovery Services (45 CFR 96.124 and HSC 11757.59(b)(2)(H))

Programs must provide or arrange gender-specific substance abuse treatment and other therapeutic interventions for women, which may address issues of relationships, sexual and physical abuse, and parenting.

E. Case Management (45 CFR 96.124 and HSC 11757.59(b)(2)(A))

Programs must provide or arrange sufficient case management to ensure that women and their children have access to primary medical care, primary pediatric care, gender-specific substance abuse recovery and treatment, and other needed services.

F. Transportation (45 CFR 96.124 and HSC 11757.59(b)(2)(I))

Transportation must be provided or arranged to and from the recovery and treatment site, and to and from ancillary services[1] for women who do not have their own transportation.

G. Therapeutic Services for Children (45 CFR 96.124 and HSC 11757.59(b)(2)(F))

Programs must provide or arrange therapeutic interventions for children in custody of women in treatment which may, among other things, address the children's developmental needs and their issues of sexual abuse, physical abuse, and neglect.

H. Child Care (45 CFR 96.124 and HSC 11757.59(b)(2)(F))

Child care must be available for program participant's children while the women are participating in on-site treatment program activities and off-site ancillary services. Child care may be provided on-site, either through a licensed program or a licensure-exempt cooperative.[2] Children may also be referred to licensed or licensure-exempt child care facilities off-site,[3] except as noted in (1) below.

Depending on the age of the child, the following requirements apply:

1. Child care must be on-site for participant's children between birth and 36 months while the mothers are participating in the program (unless a waiver is approved by ADP).

[1] Ancillary services include, but are not limited to, off-site child care, primary medical care, primary pediatric care, dental care, social services, community services, and educational and vocational training.

[2] On-site cooperative child care is defined by the following elements:

- the mothers are on-site and the children are under their care and supervision;
- the number of children is limited to 12 or less at any one time; and
- child development staff provide the mothers with parenting skills training, child development education, and supportive role modeling. For more information on cooperative child care, refer to the California Health and Safety Code '1598.792(e).

[3] Off-site child care facilities must be either licensed or licensure-exempt since the children are not under the care and supervision of their mothers. For further information on this requirement, refer to the California Child Day Care Facilities Act, '1596.792(k)(1) and (2) of the Health and Safety Code.

2. Child care may be provided on-site or off-site for participants children who are between 37 months and 12 years of age.

3. Child care for children between 13 and 17 years of age, if necessary or appropriate, may be on-site or off-site as long as their inclusion in the program does not negatively impact the younger children.

The Pro-Children Act of 1994 (20 United States Code 6081 et. seq.) prohibits smoking in any indoor facility where services for children are federally funded or where the facility is constructed, operated, or maintained by federal funds.

I. Education Components (HSC 11757.59)

Programs must provide or arrange for the following services:

- educational/vocational training and life skills resources;
- TB and HIV education and counseling;
- education and information on the effects of alcohol and drug use during pregnancy and breast feeding; and
- parenting skills building and child development information.

J. Primary Medical Care and Pediatric Care (45 CFR 96.126 and HSC 11757.59(b)(1))

Programs are required to provide or arrange primary medical care for women in treatment, including referrals for prenatal care. They also must provide or arrange primary pediatric care, including immunizations, for dependent children.

Programs providing direct primary medical care for women and/or primary pediatric care for dependent children must seek alternative funding for these services before using federal perinatal funds. Medi-Cal, Medicare, and other health insurance must be billed first, and programs using federal perinatal funds must document that alternative funding is not available. Programs may use client fees providing the county approved schedule of fee assessment and collection is applied. State General Funds cannot be used to provide medical treatment.

K. Administration

1. Reporting Requirements (45 CFR 96.122(f))

   Once admitted into a perinatal program, a woman's participation must be documented on the California Outcomes Measurement System (CalOMS) Participant Record or a substitute form approved by ADP. Contact the ADP Data Management Section for instructions on completing these forms.

2. Fund Source Requirements

   a. Counties must implement procedures to ensure the requirements of the SAPT Block Grant, the Perinatal Set-Aside (45 CFR 96.124), and the Perinatal State General Fund (HSC 11757.59) are met.

b. Effective July 1, 1995, only pregnant and postpartum women are eligible for Perinatal DMC benefits.[4] For program requirements and reimbursable services specific to Perinatal DMC, see CCR, Title 22, Division 3, Health Care Services.

3. Public Notice and Outreach (45 CFR 96.131)

Counties must publicize that pregnant women are given preference in admission to recovery and treatment programs and encourage women in need of treatment services to access them. Public notice may include street outreach, printed materials, multimedia messages (including public service announcements), interagency collaboration, and/or networking. Additional information about outreach services is provided in Part II, Perinatal Treatment Modalities and Services.

4. Program Monitoring (HSC 11983.2(b)(5))

Counties are responsible for contracting with providers, ensuring that all perinatal programs meet their contractual requirements, and ensuring that quality perinatal services are provided. Monitoring plans may include, but are not limited to, the following:

- site visits to the program;
- provider monthly, quarterly, and/or year end progress reports;
- regular telephone contacts with the providers; and
- program participant satisfaction surveys.

Staff from ADP's Program Services Division, Licensing and Certification Division, and Audit Services Branch may conduct site visits to ensure compliance with the specific regulations monitored by each division.

5. Program Start-Up Costs

Fifteen percent of a programs first year total budget can be used for start-up costs. These costs can only be incurred 90 days before the first participant is admitted for recovery and treatment. Start-up costs incurred more than three months before the first participant is served must be capitalized as deferred charges and amortized over a number of benefiting periods.

II. PERINATAL TREATMENT MODALITIES AND SERVICES

Outpatient Drug Free (ODF) Treatment

This modality provides alcohol and other drug (AOD) treatment services, with or without medication, in a non-residential setting. There is no minimum number of treatment hours prescribed. No licensing is required, but a program providing ODF services must be certified by ADP's Licensing and Certification Division to be reimbursed with DMC funds for services provided to Medi-Cal eligible clients.

[4] The postpartum period is defined as a 60-day period beginning on the last day of pregnancy. Perinatal DMC eligibility ends on the last day of the calendar month in which the 60th day occurs. Perinatal DMC certified providers may either transfer non-pregnant, non-postpartum women to treatment slots paid for with other perinatal funds or refer the women to non-Perinatal DMC treatment programs if they are eligible.

Daycare Rehabilitative (DCR) Treatment

This modality provides AOD treatment services in a non-residential setting to each client for three or more hours, but less than 24 hours per day, for three or more days per week. No licensing is required, but a program providing DCR services must be certified by ADP's Licensing and Certification Division to be reimbursed with DMC funds for services provided to Medi-Cal eligible clients. DMC reimbursement for DCR services is only available for pregnant or postpartum women in a perinatal DCR program.

Narcotic Treatment Program (NTP)

This modality combines AOD treatment services with one of the following approved narcotic replacement drugs:

- *Methadone* treatment provides AOD treatment services in a non-residential facility along with methadone as prescribed by a physician to alleviate the symptoms of withdrawal from opiates (maintenance) or in decreasing amounts in a planned withdrawal from opiate dependence (detoxification).
- *LAAM* (levoalphacetylmethadol) treatment provides AOD treatment services in a non-residential facility, along with LAAM as prescribed by a physician to alleviate the symptoms of withdrawal from opiates.

All narcotic treatment programs must be licensed by ADP's Licensing and Certification Division and comply with the requirements set forth in CCR, Title 9, Chapter 4, commencing with Section 10000.

Outpatient Detoxification Treatment (Other than Narcotic Treatment Detoxification)

This modality provides AOD treatment services, with or without medication, for safe withdrawal from alcohol or drugs in a non-residential, ambulatory setting for less than 24 hours per day.

Residential Treatment (Detoxification or Recovery)

This modality provides AOD treatment services in a residential, non-acute care setting. Residential programs that provide AOD detoxification, educational counseling, individual or group counseling, or treatment/recovery planning must be licensed by ADP's Licensing and Certification Division and comply with requirements set forth in CCR, Title 9, Chapter 5, commencing with Section 10500. Residential perinatal programs must also be certified by ADP's Licensing and Certification Division to be reimbursed with DMC funds for services provided to Medi-Cal eligible clients. DMC reimbursement for residential treatment is only available for pregnant and postpartum women in perinatal residential treatment programs.

Transitional Living Center (TLC)[5]

A facility designed to help women maintain an alcohol and drug-free lifestyle and transition back into the community. TLC activities are supervised (although not necessarily 24 hours per day) within an alcohol and drug-free environment. Attendance at recovery and treatment

[5] State General Funds can be used for TLCs provided that the residence has paid staff or approved volunteer staff, residents are required to attend a perinatal recovery and treatment program, and the TLC documents each participant's attendance at the recovery and treatment program. Federal funds **cannot** be used to fund TLCs. Providers should contact ADP's Licensing and Certification Division to determine if licensure is required.

services is mandatory, although those services need not be on-site. TLCs are not required to provide the perinatal services described in Part I of these guidelines since the provision of those services is the responsibility of the perinatal treatment program the resident attends. TLCs do not require ADP licensure if they do not provide any of the following services on-site: AOD detoxification, educational sessions, individual or group counseling, or treatment/recovery planning.

Alcohol and Drug-Free Housing (ADFH)[6]

A facility designed to help recovering women maintain an alcohol and drug-free lifestyle. Residents are free to organize and participate in self-help meetings or any other activity that helps maintain sobriety. The house or its residents do not and cannot provide any treatment, recovery, or detoxification services; do not have treatment or recovery plans or maintain case files; and do not have a structured, scheduled program of AOD education, group or individual counseling, or recovery support sessions.

Outreach

An element of service that identifies eligible pregnant and parenting women in need of treatment services and encourages them to take advantage of these services. Outreach may include engagement of prospective program participants by informing them of available treatment services, and can serve as "pre-treatment" by reinforcing prevention and education messages prior to enrollment in treatment. Outreach also may be used to educate the professional community on perinatal services so that they become referral sources for potential clients. Additional information on outreach is provided in Part I, Section K(3).

Interim Services

These are services provided to pregnant women or injection drug using women seeking substance abuse treatment who cannot be admitted to a program due to capacity limitations. Additional information on interim services is provided in Part I, Section C(4).

Case Management

A participant-centered, goal-oriented process for assessing the needs of an individual for particular services; assisting the participant in obtaining those services; and reviewing participant accomplishments, outcomes, and barriers to completing recovery goals. Case management may be either an element of a recovery and treatment modality or a free-standing service. This service is a required component of a perinatal program, as specified in Part I, Section E.

Aftercare

Aftercare provides structured services in an outpatient setting to individuals who have completed treatment to support the gradual transition of the individual back into the community, prevent relapse, and ensure successful recovery. Aftercare may be either an element of a recovery and treatment modality or a free-standing service.

[6] Only the start-up phase of ADFH can be funded with State General Funds. Start-up costs are limited to the following one-time expenditures that prepare the residence for occupancy: first and last months deposit to secure a property; security and utilities deposits; and furniture that meets basic needs. Federal funds **cannot** be used to start or fund ADFH on an ongoing basis.

EXHIBIT I

VOLUNTEER HOUSE SIGN-IN LOG SHEET

Month _____ Year _____

Date	Time In	Volunteer Name	Time Out	Volunteer Signature