SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE, STATE OF CALIFORNIA



FROM: Department of Mental Health

SUBJECT: Approval of the Professional Services Agreement with Loma Linda University Behavioral Medicine Center to Provide Electroconvulsive Treatment Services (District: All) [\$105,600 Ongoing]. State & Federal

RECOMMENDED MOTION: That the Board of Supervisors:

- 1. Approve and execute the Professional Services Agreement with Loma Linda University Behavioral Medicine Center (LLUBMC) to provide Electroconvulsive Treatment (ECT) services for \$105,600;
- 2. Authorize the Chairman of the Board to sign the Agreement with LLUBMC;
- 3. Authorize the Director of Mental Health to administer the Agreement with LLUBMC; and
- 4. Authorize the Purchasing Agent, in accordance with Ordinance No. 459, to sign renewals, based on the availability of funding, and to sign amendments that do not change the substantive terms of the agreement through June 30, 2019.

BACKGROUND:

The Department of Mental Health operates a continuum of care system that consists of County-operated and contracted service providers delivering a variety of mental health treatment services within each geographic region of Riverside County.

(Continued on page 2)

JW:JB

Jerry Wengerd, Director

Department of Mental Health

FINANCIAL DATA	Curre	nt Fiscal Year:	Next	Fiscal Year:	Total	Cost:	Ongo	oing Cost:	POLICY/C	
COST	\$	105,600	\$	105,600	\$	528,000	\$	105,600	Consent 🗆	Policy
NET COUNTY COST	\$	0	\$	0	\$	0	\$	0	Consent	

SOURCE OF FUNDS:

State, Federal

Budget Adjustment: NO

For Fiscal Year: 14/15

C.E.O. RECOMMENDATION:

APPROVE

County Executive Office Signature

Jennifer/L. Sargent

MINUTES OF THE BOARD OF SUPERVISORS

2010 01 -8 84 4:03

Prev. Agn. Ref.:

District: All

Agenda Number:

3-47

SUBMITTAL TO THE BOARD OF SUPERVISORS, COUNTY OF RIVERSIDE, STATE OF CALIFORNIA

FORM 11: Approval of the One-Year Agreement with Loma Linda University Behavioral Medicine Center to Provide Electroconvulsive Treatment Services. (District: All) [\$105,600 ongoing]. State & Federal

DATE:

PAGE: Page 2 of 2

BACKGROUND (Continued):

The Agreement with LLUBMC will provide ECT services to consumers referred by the Riverside County Department of Mental Health (RCDMH). ECT continues to be the most effective biological treatment for certain severe mental disorders such as depression, mania (elated mood with excessive energy) and catatonia (mental withdrawal and physical immobilization). LLUBMC's ECT services are a comprehensive and all inclusive, specialized treatment which includes physician services, anesthesiologist, recovery nurse and hospital facility.

Therefore, the DMH is requesting that the Board of Supervisors approve and execute the Professional Services Agreement with LLUBMC for \$105,600 through June 30, 2015 as outlined herein.

Impact on Citizens and Businesses

These services are a component of the Department's system of care aimed at improving the health and safety of consumers and the community. RCDMH serves people who have severe mental illness. For a number of consumers for whom conventional psychotropic medications have been ineffective, ECT is the next appropriate treatment option. Consumers are referred by RCDMH for ECT services on both a voluntary and involuntary basis. However, in both cases, treatment is only provided upon the consensus of the Treating Physician, LLUBMC Physician and RCDMH's Medical Director.

Contract History and Price Reasonableness

ECT is the most appropriate treatment for some consumers and the most cost effective for the County. A treatment course for ECT services range from 9-12 treatments at a cost of \$1,100 per treatment and is considered reasonable and comparable to the Medi-Cal Approved Rates.

There are sufficient funds in the department's FY 14/15 budget and no additional County funds are required.

Date:

April 9, 2014

From:

Jerry Wengerd, Director

Department/Agency: Department of Mental Health

To:

Board of Supervisors/Purchasing Agent

Via:

Purchasing Agent

Subject:

Sole Source Procurement of Electroconvulsive Treatment Services with Loma Linda

University Behavioral Medicine Center

The below information is provided in support of my Department requesting approval for a sole source. Outside of a duly declared emergency, the time to develop a statement of work or specifications is not in itself justification for sole source.

1. Supply/Service being requested:

Electroconvulsive Treatment (ECT) Services. The services includes: Consultation, physician services, anesthesiologist, recovery nurse and hospital facility

2. Supplier being requested:

Loma Linda University Behavioral Medicine Center (LLUBMC)

3. Alternative suppliers that can or might be able to provide supply/service:

None

4. Extent of market search conducted:

ECT is a unique treatment modality. Currently there is no provider within Riverside County that is able to provide the blend of ECT services needed to treat Riverside County Department of Mental Health (RCDMH) clients requiring this type of treatment.

5. Unique features of the supply/service being requested from this supplier, which no alternative supplier can provide:

ECT is a comprehensive and all inclusive, specialized treatment that includes physician services, anesthesiologist, recovery nurse, and hospital facility. It would be difficult for any other provider to successfully compete for this unique and specialized service.

6. Reasons why my department requires these unique features and what benefit will accrue to the county:

The agreement with LLUBMC will provide ECT services to clients referred by RCDMH. ECT is considered the safest, quickest, and most effective biological treatment for consumers with certain severe mental disorders who are not responding to reasonable pharmacological treatment.

7. Price Reasonableness including purchase price and any ongoing maintenance or ancillary costs from the supplier:

ECT is the most appropriate treatment for some consumers and the most cost effective for the County. A treatment course for ECT services range from 9-12 treatments at a cost of \$1,100 per treatment and is considered reasonable and comparable to the Medi-Cal Approved Rates. Without this treatment option, clients would be placed in a residential treatment hospital for an average stay of 14 to 30 days at a cost of \$750 per day. The contract maximum obligation for FY 14/15 is \$105,600.

8. Does moving forward on this product or service further obligate the county to future similar contractual arrangements or any ongoing costs affiliated with this sole source? (Maintenance, support, or upgrades, if so, please explain).

No

9.	Period	of Perfo	rmance
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Date of execution through June 30, 2015 with the	e option to renew, based on the availability of
funding, through June 30, 2019, renewable in one	e (1) year increments.
Jens Wenned	5-30-14
Department Head Signature	Date

Purchasing Department Comments:

Approve	Approve with Condition	on/s Disa	Disapprove	
Not to exceed: \$ \(\lambda 5, 6 \alpha \)	One time	Annual Amount through_	6-30-19	
Malexe	6-18-1	8 15-0	43	
Purchasing Agent	Date	Approval Number		
		(Reference on Purchasing D	ocuments)	

COUNTY OF RIVERSIDE DEPARTMENT OF MENTAL HEALTH



This agreement is made and entered into by and between the County of Riverside, a political subdivision of the State of California, hereinafter referred to as "COUNTY" and Loma Linda University Behavioral Medicine Center, hereinafter referred to as "CONTRACTOR."

PREAMBLE

WHEREAS, the COUNTY wishes to extend to the residents of Riverside County certain mental health services contemplated and authorized by the California Welfare and Institutions Code (WIC) Section 5600 et seq., 5608 et seq., and Government Code Section 26227 et seq., California Code of Regulations, Title 9, Division 1, and Title 22, which the CONTRACTOR is equipped, staffed and prepared to provide; and

WHEREAS, the COUNTY believes it is in the best interest of the people of Riverside County to provide these mental health services by contract; and

WHEREAS, these services as described in Exhibit A attached hereto, shall be provided by CONTRACTOR in accordance with the applicable laws, codes and policies contained in, but not limited to, Exhibit B attached hereto;

NOW THEREFORE, in consideration of the mutual promises, covenants and conditions hereinafter contained, the Parties hereto mutually agree as provided on pages 1 through 44 and Exhibits A, B, C, and Schedule I attached hereto and incorporated herein, hereinafter referred to as "Agreement."

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CONTRACTOR	COUNTY
By: Heller Colle	By:
Ost Pollock	Jeff Stone, Chairman Board of Supervisors
Print Name	·
Date: 6 19119	Date:
COUNTY COUNSEL:	
Pamela J. Walls	
Approved as to form	
By: ///COD	
Deputy County Counsel Classes	<i>a</i>

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EXHIBIT A EXHIBIT B EXHIBIT C SCHEDULE I

DESCRIPTION OF SERVICES:

CONTRACTOR agrees to provide services in the form as described in Exhibit A, attached hereto and by reference incorporated herein.

II

PERIOD OF PERFORMANCE:

This Agreement shall be effective as of the date of execution, and continue in effect through June 30, 2015. The Agreement may thereafter be renewed annually, up to an additional four (4) years, subject to the availability of funds.

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REIMBURSEMENT AND PAYMENT:

In consideration of services provided by CONTRACTOR, COUNTY shall reimburse CONTRACTOR in the amount and manner described in Exhibit C, attached hereto and by this reference incorporated herein.

A. All HIPAA covered healthcare providers must obtain an NPI. Provider site NPIs must be submitted to the Riverside County Department of Mental Health DMH) Information Services Unit prior to rendering services to clients. Contractors providing Medi-Cal billable services must also submit rendering (individual) provider NPIs to DMH Information Services Unit for each staff member providing Medi-Cal billable services. CONTRACTOR reimbursement will not be processed unless NPIs are on file with DMH in advance of providing services to clients. It is the responsibility of each contract provider site and individual staff member that bills Medi-Cal to obtain an NPI from the National Plan and Provider Enumeration

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System (NPPES). Each contract site, as well as every staff member that provides billable services, is responsible for notifying the National Plan & Provider Enumeration System (NPPES) within 30 days of any updates to personal information (worksite address, name changes, taxonomy code changes, etc.)

IV

PROGRAM SUPERVISION, MONITORING AND REVIEW:

Pursuant to Welfare & Institutions Code (WIC), Section 5608 and Government Code Section 8546.7, services hereunder shall be provided by CONTRACTOR under the general supervision of the COUNTY Director of Mental Health, hereinafter called DIRECTOR, or his authorized designee. CONTRACTOR agrees to extend to DIRECTOR or his designee, the COUNTY Contract Monitoring Team, COUNTY Case Management Staff; and other authorized County, Federal and/or State representatives, the right to enter the program facilities during operating hours to monitor only COUNTY client's well-being; and the right to review and monitor CONTRACTOR's personnel and documents in direct association with the provision of services to Riverside County Department of Mental Health client only. COUNTY agrees to notify CONTRACTOR at least seventy two (72) hours in writing prior to any audits, monitoring or reviews being performed. In addition, CONTRACTOR shall make available during examinations and audits at minimum, those matters connected with the performance of the Agreement, including but not limited to, the costs of administering the Agreement. The COUNTY shall enforce applicable Agreement provisions and COUNTY policies with regards to threats and violent behavior or harassment in the workplace concerning its employees. CONTRACTOR further agrees to authorize the COUNTY, under this Agreement, to have access to all COUNTY consumers only, to collaborate with treating

staff, and to review necessary documents to ensure that the consumer has received all necessary assessments, all necessary treatment planning with measurable goals, and documented progress towards goals. CONTRACTOR agrees to allow COUNTY to collaborate with CONTRACTOR personnel regarding COUNTY consumer aftercare services and continuity of care with the COUNTY.

A. As it pertains to COUNTY Contract and/or Program Monitoring, if at any point during the length of this Agreement, the COUNTY determines the CONTRACTOR is out of compliance with any provision in this Agreement and has been cited for non-compliance, the COUNTY may request a plan of correction, after providing the CONTRACTOR with written notification detailing the basis for the finding of noncompliance. Within thirty (30) days of receiving this separate notification, the CONTRACTOR shall provide a written plan of corrective action addressing the non-compliance. If the COUNTY accepts the CONTRACTOR'S proposed plan of correction, it shall temporarily suspend other punitive actions to give the CONTRACTOR the opportunity to come into full compliance in the area of deficiency. If the COUNTY determines the CONTRACTOR has failed to implement an appropriate corrective action, CONTRACTOR funds or invoice payment may be withheld until compliance is fully achieved. CONTRACTOR shall cooperate with any such effort by COUNTY, including follow-up investigation(s) and interview(s) of witnesses. Failure to cooperate or take corrective action as may be indicated by an investigation could result in further punitive actions and/or termination of this Agreement. Notwithstanding the forgoing, the COUNTY reserves the right, at any time and without a thirty (30) day

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written notice, to disallow or withhold CONTRACTOR funding if and when deemed necessary for material non-compliance as it pertains to any provision of this Agreement.

V

STATUS OF CONTRACTOR:

This Agreement is by and between the COUNTY and CONTRACTOR and is not intended, and shall not be construed, to create the relationship of agent, servant, employee, partnership, joint venture, or association, as between COUNTY and CONTRACTOR and CONTRACTOR and its employees and agents shall not be entitled to any benefits payable to COUNTY employees. CONTRACTOR is, and shall at all times be deemed to be, an independent contractor and shall be wholly responsible for the manner in which it performs the services required of it by the terms of this Agreement. CONTRACTOR assumes the exclusive responsibility and liability for the acts of its employees or agents as they relate to services to be provided. CONTRACTOR shall bear the sole responsibility and liability for furnishing workers' compensation benefits to any person for injuries arising from or connected with services performed on behalf of COUNTY pursuant to this Agreement. CONTRACTOR certifies that it is aware of the Occupational Safety and Health Administration (OSHA) of the U.S. Department of Labor, the derivative Cal/OSHA standards and laws and regulations relating thereto, and shall comply therewith as to all relative elements under this Agreement. CONTRACTOR is responsible for payment and deduction of all employment-related taxes on CONTRACTOR's behalf and for CONTRACTOR's employees, including but not limited to all federal and state income taxes and withholdings. COUNTY shall not be required to make any deductions from compensation payable to

2.7

CONTRACTOR for these purposes. CONTRACTOR shall indemnify COUNTY against any and all claims that may be made against COUNTY based upon any contention by a third party that an employer-employee relationship exists by reason of this Agreement; and CONTRACTOR shall indemnify COUNTY for any and all federal or state withholding or retirement payments which COUNTY may be required to make pursuant to federal or state law.

CONTRACTOR shall maintain on file at all times, and as deemed applicable and appropriate for CONTRACTOR, the following, but not limited to, organization status related documentation:

- a) Articles of Incorporation;
- b) Any and all Amendment of Articles;
- c) List of agency's Board of Directors and Advisory Board;
- d) A resolution indicating who is empowered to sign all Agreement documents pertaining to the agency;
- e) By-laws and minutes of Board meetings; and
- f) All applicable Federal, State and County licenses.

VI

ADMINISTRATIVE CHANGE IN STATUS:

If, during the term of the Agreement, there is a change in CONTRACTOR'S status, a detailed description of the change must be submitted to COUNTY in writing at least sixty (60) days prior to the effective date of the change. A change in status is defined as moving a facility's service location, closing a facility, structural changes, change of ownership or majority ownership, change in business structure, CONTRACTOR'S ownership of other

businesses dealing with CONTRACTOR under this Agreement changes, or change in services offered. Involuntary changes of status due to disasters should be reported to the COUNTY as soon as possible.

A. If there are any CONTRACTOR administrative changes, such as signatory authority, management, site addresses, business locations, remittance addresses, tax identification numbers, business ownership, etc., a letter, on CONTRACTOR's letterhead and signed by the CONTRACTOR's Chairman of the Board or President or Chief Executive Officer, or its designee, and/or a copy of CONTRACTOR's Board minutes authorizing the change(s), the appropriate documentation must be submitted to COUNTY within two weeks of the change.

VII

DELEGATION AND ASSIGNMENT:

CONTRACTOR may not delegate the obligations hereunder, either in whole or in part, without prior written consent of COUNTY; provided, however, obligations undertaken by CONTRACTOR pursuant to this Agreement may be carried out by means of subcontracts, provided such subcontracts are approved in writing by the Director of the Department of Mental Health (DIRECTOR) (or his designee), meet the requirements of this Agreement as they relate to the service or activity under subcontract, and include any provisions that DIRECTOR (or his designee) may require. No subcontract shall terminate or alter the responsibilities of CONTRACTOR to COUNTY pursuant to this Agreement. CONTRACTOR may not assign the rights hereunder, either in whole or in part, without the prior written consent of COUNTY. Any attempted assignment or delegation in derogation of

this paragraph shall be void. Any change in the corporate or business structure of CONTRACTOR, shall be deemed an assignment for purposes of this paragraph.

<u>VIII</u>

ALTERATION:

No alteration or variation of the terms of this Agreement shall be valid unless made in writing and signed by the parties hereto, and no oral understanding or agreement not incorporated herein, shall be binding on any of the parties hereto.

IX

LICENSES:

CONTRACTOR warrants that it has all applicable, appropriate and necessary licenses, permits, approvals, certifications, waivers and exemptions necessary for the business to operate and personnel to provide services hereunder and as required by laws and regulations set forth by the Federal, State and County laws and all other appropriate governmental agencies, and agrees to maintain these throughout the term of this Agreement. CONTRACTOR shall notify DIRECTOR, or its designee, immediately and in writing of its inability to maintain, irrespective of the pendency of an appeal of such licenses, permits, approvals, certifications, waivers or exemptions.

X

INDEMNIFICATION:

CONTRACTOR shall indemnify and hold harmless the COUNTY, its Agencies, directors, officers, Board of Supervisors, elected and appointed officials, employees, agents and representatives (individually and collectively hereinafter referred to as Indemnitees) from any liability whatsoever, based or asserted upon any services of CONTRACTOR, its officers,

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employees, subcontractors, agents or representatives arising out of or in any way relating to this Agreement, including but not limited to property damage, bodily injury, or death or any other element of any kind or nature whatsoever arising from the performance of CONTRACTOR, its officers, employees, subcontractors, agents or representatives Indemnitors for this Agreement. CONTRACTOR shall defend, at its sole expense, all costs and fees including but not limited to attorney fees, cost of investigation, defense and settlements or awards, the Indemnitees in any claim or action based upon such alleged acts or omissions. With respect of any actions or claims subject to indemnification herein by CONTRACTOR, CONTRACTOR shall, at their sole cost, have the right to use counsel of their own choice and shall have the right to adjust, settle, or compromise any such action or claim without the prior consent of COUNTY; provided, however, that any such adjustment, settlement or compromise in no manner whatsoever limits or circumscribes CONTRACTOR'S indemnification to Indemnitees as set for herein. CONTRACTOR'S obligation hereunder shall be satisfied when CONTRACTOR has provided to COUNTY the appropriate form of dismissal relieving COUNTY from any liability for the action or claim involved. The specified insurance limits required in this Agreement shall in no way limit or circumscribe CONTRACTOR'S obligation to indemnified and hold harmless the Indemnitees herein from third party claims. In the event there is conflict between this clause and California Civil Code Section 2782, this clause shall be interpreted to comply with Civil Code 2782. Such interpretation shall not relieve the CONTRACTOR from indemnifying the Indemnitees to the fullest extent allowed by the law.

INSURANCE

Without limiting or diminishing the CONTRACTOR'S obligation to indemnify or hold harmless the County of Riverside, CONTRACTOR shall procure and maintain or cause to be maintained, at its sole cost and expense, insurance coverage as determined in this Agreement. Insurance requirements stated herein may be met with a program of self-insurance subject to the approval of County's Risk Management. CONTRACTOR must provide a copy of its self-insurance to the Department of Mental Health for submission and approval by Riverside County Risk Management.

A. Workers' Compensation:

If CONTRACTOR has employees as defined by the State of California, CONTRACTOR shall maintain Workers' Compensation Insurance (Coverage A) as prescribed by the laws of the State of California. Policy shall include Employers' Liability (Coverage B) including Occupational Disease with limits not less than \$1,000,000 per person per accident. Policy

shall be endorsed to waive subrogation in favor of the County of Riverside; and, if applicable, to provide a Borrowed Servant/Alternate Employer Endorsement.

B. Commercial General Liability:

Commercial General Liability insurance coverage, including but not limited to, premises liability, contractual liability, completed operations, personal and advertising injury covering claims which may arise from or out of CONTRACTOR'S performance of its obligations hereunder, whether such operations, use or performance by CONTRACTOR, and, including but not limited to, any subcontractor, vendor, or anyone employed directly

or indirectly by them or volunteers serving either of them. Policy's limit of liability shall not be less than \$1,000,000 per occurrence combined single limit. If such insurance contains a general aggregate limit, it shall apply separately to this Agreement or be no less than two (2) times the occurrence limit.

C. Vehicle Liability:

If CONTRACTOR uses any vehicles or mobile equipment in the performance of the obligations under this Agreement, CONTRACTOR shall maintain liability insurance for all owned, non-owned or hired vehicles in an amount not less than \$1,000,000 per occurrence combined single limit. If such insurance contains a general aggregate limit, it shall apply separately to this Agreement or be no less than two (2) times the occurrence limit.

D. Professional Liability:

CONTRACTOR shall maintain Professional Liability Insurance providing coverage for performance of work included within this Agreement, with a limit of liability of not less than \$1,000,000 per occurrence and \$3,000,000 annual aggregate. If CONTRACTOR'S Professional Liability Insurance is written on a 'claims made' basis rather than on an 'occurrence' basis, such insurance shall continue through the term of this Agreement. Upon termination of this Agreement or the expiration or cancellation of the claims made insurance policy CONTRACTOR shall purchase at his sole expense either 1) an Extended Reporting Endorsement (also known as Tail Coverage); or, 2) Prior Dates Coverage from a new insurer with a retroactive date back to the date of, or prior to, the inception of this Agreement; or, 3) demonstrate through Certificates of Insurance that CONTRACTOR has maintained continuous coverage with the same or original insurer.

Coverage provided under items; 1), 2) or 3) will continue for a period of five (5) years beyond the termination of this Agreement.

E. General Insurance Provisions - All lines:

- 1. Any insurance carrier providing insurance coverage hereunder shall be admitted to the State of California and have an A.M. BEST rating of not less than an A: VIII (A: 8) unless such requirements are waived, in writing, by the COUNTY Risk Manager. If the County's Risk Manager waives a requirement for a particular insurer such waiver is only valid for that specific insurer and only for one policy term.
- 2. The CONTRACTOR'S insurance carrier(s) must declare its insurance deductibles or self-insured retentions. If such deductibles or self-insured retentions exceed \$500,000 per occurrence such deductibles and/or retentions shall have the prior written consent of the County Risk Manager before the commencement of operations under this Agreement. Upon notification of deductibles or self insured retentions which are deemed unacceptable to the COUNTY, at the election of the COUNTY'S Risk Manager, CONTRACTOR'S carriers shall either; 1) reduce or eliminate such deductibles or self-insured retentions as respects this Agreement with the COUNTY, or 2) procure a bond which guarantees payment of losses and related investigations, claims administration, defense costs and expenses.
- 3. The CONTRACTOR shall cause their insurance carrier(s) to furnish the County of Riverside with 1) a properly executed original Certificate(s) of Insurance and certified original copies of Endorsements effecting coverage as required herein; or, 2) if requested to do so orally or in writing by the COUNTY Risk Manager,

provide original Certified copies of policies including all Endorsements and all attachments thereto, showing such insurance is in full force and effect. Further, said Certificate(s) and policies of insurance shall contain the covenant of the insurance carrier(s) shall provide no less than thirty (30) days written notice be given to the County of Riverside prior to any material modification or cancellation of such insurance. In the event of a material modification or cancellation of coverage, this Agreement shall terminate forthwith, unless the County of Riverside receives, prior to such effective date, another properly executed original Certificate of Insurance and original copies of endorsements or certified original policies, including all endorsements and attachments thereto evidencing coverage and the insurance required herein is in full force and effect. Individual(s) authorized by the insurance carrier to do so on its behalf shall sign the original endorsements for each policy and the Certificate of Insurance. Certificates of insurance and certified original copies of Endorsements effecting coverage as required herein shall be delivered to Riverside County Mental Health Department, P.O. Box 7549, Riverside, CA 92513-7549, Program Support's Contracts Division. CONTRACTOR shall not commence operations until the County of Riverside has been furnished original Certificate (s) of Insurance and certified original copies of endorsements or policies of insurance including all endorsements and any and all other attachments as required in this Section.

4. It is understood and agreed by the parties hereto and the CONTRACTOR'S insurance company(s), that the Certificate(s) of Insurance and policies shall so covenant and shall be construed as primary insurance, and the COUNTY'S

insurance and/or deductibles and/or self-insured retentions or self-insured programs shall not be construed as contributory.

- CONTRACTOR shall pass down the insurance obligations contained herein to all tiers of subcontractors working under this Agreement.
- 6. Failure by CONTRACTOR to procure and maintain the required insurance shall constitute a material breach of Agreement upon which COUNTY may immediately terminate or suspend this Agreement.

XII

LIMITATION OF COUNTY LIABILITY:

Not withstanding any other provision of this Agreement, the liability of COUNTY shall not exceed the amount of funds appropriated in support of this Agreement by the California Legislature or by the United States Congress. In addition, either party reserves the right, based on applicable law, to terminate this Agreement, upon written notice, upon unavailability of funds for the provisions of services under this Agreement in accordance with Section XXX.

XIII

WARRANTY AGAINST CONTINGENT FEES:

CONTRACTOR warrants that no person or selling agency has been employed or retained to solicit or secure this Agreement upon any agreement or understanding for any commission, percentage, brokerage, or contingent fee, excepting bona fide employees or bona fide established commercial or selling agencies maintained by CONTRACTOR for the purpose of securing business. For CONTRACTOR'S breach or violation of this warranty, COUNTY may, at its sole discretion, deduct from the Agreement price of consideration, or

otherwise recover, the full amount of such commission, percentage, brokerage, or contingent fee.

XIV

NONDISCRIMINATION.

A. <u>EMPLOYMENT:</u>

- 1. CONTRACTOR shall not unlawfully discriminate on the basis of race, national origin, gender, religion, physical or mental handicap, medical condition, color, sexual orientation, marriage status, age or disability in the performance of this Agreement. CONTRACTOR is a non-profit religious corporation and does not waive any exceptions or rights that it may have under federal or state laws as a result of its corporate status. There shall be posted in conspicuous places, available to employees and applicants for employment, notices from DIRECTOR, or his designee, and/or the United States Equal Employment Opportunity Commission setting forth the provisions of this section.
- 2. All solicitations or advertisements for employees placed by or on behalf of CONTRACTOR shall state that all qualified applicants will receive consideration for employment without regard to race, religion, color, sex, national origin, age, sexual preference, or physical or mental handicap, medical conditions or marital status.
- 3. Each labor union or representative of workers with which CONTRACTOR has a collective bargaining agreement or other contract or understanding must post a notice advising the labor union or workers' representative of the commitments

under this Nondiscrimination Section and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

4. In the event of noncompliance with this section or as otherwise provided by State and Federal law, this Agreement may be terminated or suspended in whole or in part and CONTRACTOR may be declared ineligible for further agreements involving State funds.

B. SERVICES, BENEFITS, AND FACILITIES:

CONTRACTOR shall not discriminate in the provision of services, the allocation of benefits, or in the accommodation in facilities on the basis of color, race, religion, national origin, sex, age, sexual preference, physical or mental handicap, medical conditions, or marital status in accordance with Title VI of the Civil Rights Act of 1964, 42 U.S.C. Section 2000d and all other pertinent rules and regulations promulgated pursuant thereto, and as otherwise provided by State law and regulations, as all may now exist or be hereafter amended or changed.

- 1. For the purpose of this Section, discrimination means denying a participant or potential participant any service, benefit, or accommodation that would be provided to another and includes, but is not limited to, the following:
 - a. Denying a participant any service or benefit or availability of a facility.
 - b. Providing any service or benefit to a participant, which is different or is provided in a different manner or at a different time or place from that provided to other participants on the basis of race, color, creed or national origin.

- c. Restricting a participant in any way in the enjoyment of any advantage or privilege enjoyed by others receiving any service or benefit.
- d. Treating a participant differently from others in satisfying any admission requirement or condition, or eligibility requirement or condition, which individuals must meet in order to be provided any service or benefit.
- 2. CONTRACTOR shall further establish and maintain written procedures under which any person, applying for or receiving services hereunder, may seek resolution from CONTRACTOR of a complaint with respect to any alleged discrimination in the provision of services by CONTRACTOR'S personnel. Such procedures shall also include a provision whereby any such person, who is dissatisfied with CONTRACTOR'S resolution of the matter, shall be referred by CONTRACTOR to DIRECTOR, or his authorized designee, for the purpose of presenting his or her complaint of alleged discrimination. Such procedures shall also indicate that if such person is not satisfied with COUNTY'S resolution or decision with respect to the complaint of alleged discrimination, he or she may appeal the matter to the appropriate federal or state agencies. CONTRACTOR will maintain a written log of complaints for a period of seven (7) years.
- 3. All individual group and organizational providers will maintain a safe facility in accordance with Title 9, Chapter 11, Section 1810.435 (b)(2) of the California Code of Regulations. Individual, group and organizational providers will store and dispense medications in compliance with all applicable State and Federal laws and regulations and COUNTY'S "Medication Guidelines," and

"Psychotropic Medication Protocols for Children and Adolescents" publications distributed by COUNTY Quality Improvement Division.

XV

PERSONS WITH DISABILITIES:

CONTRACTOR agrees to comply with Section 504 of the Rehabilitation Act of 1973, as amended (29 USC 794) and all requirements as imposed by the applicable Federal Department of Health and Human Services (DHHS) regulations (45 CFR 84), and all guidelines and interpretations issued pursuant thereto.

XVI

VOTER REGISTRATION ACT:

CONTRACTOR agrees to comply with section 7 of the National Voter Registration Act 1993 (42 USC SECTION 1973gg) and all requirements as imposed by State Department of Mental Health and all guidelines and interpretations issued pursuant thereto.

XVII

REPORTS:

- A. CONTRACTOR shall participate in the COUNTY'S Management Information System as required by the DIRECTOR, or his designee. CONTRACTOR shall report program, client and staff data about the CONTRACTOR'S program, within specified time periods as required by the DIRECTOR, or his authorized designee.
- B. CONTRACTOR shall provide the COUNTY with applicable reporting documentation as specified and/or required by the COUNTY, State Department of Health Care Services and Federal guidelines. COUNTY may provide additional instructions on reporting requirements.

C.	COUNTY shall provide the CONTRACTOR with a detailed list of required reports and
	associated deadline requirements as it relates to the services provided under this
	contractual Agreement.

- D. Title 9 Reporting Requirements "CONTRACTOR shall comply with the State reporting requirements pursuant to the California Code of Regulations, Title 9, Section 10561."

 Upon the occurrence of any of the events listed hereafter, the CONTRACTOR shall make a telephonic report to the State department licensing staff (hereinafter "State") within one (1) working day. The telephonic report is to be followed by a written report to the COUNTY within twenty-four (24) hours of the incident and within seven (7) days of the event to the State. If a report to local authorities exists which meets the requirements cited, a copy of such a report shall suffice for the written report required by the State.
 - (1) Events reported shall include:
 - (a) Death of any resident from any cause
 - (b) Any facility related injury of any resident which requires medical treatment
 - (c) All cases of communicable disease reportable under Section 2502 of Title 17, California Code of Regulations shall be reported to the local health officer in addition to the State.
 - (d) Poisonings
 - (e) Catastrophes such as flooding, tornado, earthquake or any other natural disaster
 - (f) Fires or explosions which occur in or on the premises
 - (2) Information provided shall include the following:

- (a) Residents' name, age, sex, and date of admission
- (b) Date, time and nature of the event
- (c) Attending physician's name, findings and treatment, if any.
- (d) The items below shall be reported to the State within ten (10) working days following the occurrence.
 - (i.) The organizational changes specified in Section 10531(a) of this subchapter.
 - (ii.) Any change in the licensee's or applicants mailing address
- (3) Any change of the administrator of the facility. Such notification shall include the new administrator's name, address and qualifications.
- E. COUNTY reserves the right to perform further inquires of any and all adverse incidents as outlined in subparagraph C (1) above at their discretion, and based on the outcome of the adverse incident investigation the COUNTY may suspend referrals or terminate CONTRACTOR's Agreement until COUNTY receives corrective action.
- F. CONTRACTOR must adhere to all applicable Federal, State and County reporting requirements as mandated. The COUNTY shall provide necessary instructions and direction to CONTRACTOR regarding COUNTY policies and procedures for meeting requirements.
- G. CONTRACTOR shall report client and staff data about the CONTRACTOR's program and services as required by the DIRECTOR, or its authorized designee, or by the State, regarding the CONTRACTOR's activities as they affect the duties, roles, responsibilities, and purposes contained in this Agreement, and as may be specifically referenced in Exhibit A. COUNTY shall provide CONTRACTOR with at least thirty (30) days prior

written notice of any additional, required reports in this matter. COUNTY shall provide instructions on the reporting requirements as required herein.

- H. As Mental Health and/or Substance Abuse service providers and funding recipients, under the State Charitable Choice requirements, CONTRACTOR, must adhere to the following:
 - 1. Ensure that CONTRACTOR provides notice to all its clients of their right to alternative services if, when and where applicable;
 - 2. Ensure that CONTRACTOR refers clients to alternative services if, when and where applicable; and
 - 3. Fund and/or provide alternative service if, when and where applicable. Alternative services are services determined by the State to be accessible, comparable, and provided within a reasonable period of time from another Mental Health and/or Substance Abuse provider (or alternative provider if, when and where applicable) to which the client has no objection.

<u>XVIII</u>

HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)

The CONTRACTOR in this Agreement is subject to all relevant requirements contained in the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Public Law 104-91, enacted August 21, 1996, and the laws and regulations promulgated subsequent thereto. The CONTRACTOR hereto agrees to cooperate in accordance with the terms and intent of this Agreement for implementation of relevant law(s) and/or regulation(s) promulgated under this Law.

6

CONFIDENTIALITY OF CLIENT INFORMATION:

CONTRACTOR shall maintain the confidentiality of all consumer identifying information contained in records, including but not limited to patient/client records/charts, billing records, research and client identifying reports, and the COUNTY'S consumer management information system (ELMR) in accordance with WIC Sections 14100.2 and 5328 et seq, Title 42 Code of Federal Regulations, Section 431.300 et seq., Section 1320 D et seq, of Title 42, United States Code and it's impending regulations (including but not limited to Title 45, CFR, Parts 142, 160, 162, 164) and all other applicable current or future COUNTY, State and Federal laws, regulations, ordinances and directives relating to confidentiality and security of client records and information. In addition, CONTRACTOR shall notify COUNTY of any breach of confidentiality in which the COUNTY could be named as a liable party to such an action simply based on this Agreement relationship with the CONTRACTOR.

- A. The CONTRACTOR shall protect from unauthorized disclosure, confidential consumer identifying information obtained or generated in the course of providing services pursuant to this Agreement except for non-identifying statistical information. The CONTRACTOR shall not use identifying information for any purpose other than carrying out the CONTRACTOR'S obligations under this Agreement.
- B. The CONTRACTOR shall not disclose confidential client identifying information except as authorized by consumer, consumers' legal representative or as permitted by Federal or State law, to anyone other than the COUNTY or State without prior valid authorization from the consumer or consumers' legal representative in accordance with State and

Federal laws. Any disclosures made shall be logged and the log maintained in accordance with State and Federal law.

- C. If CONTRACTOR receives any requests by subpoena pertaining to COUNTY clients only, from attorneys, insurers or beneficiaries for copies of bills, CONTRACTOR will provide the COUNTY with a copy of any document released as a result of such request, and will provide the name, address and telephone number of the requesting party.
- D. For purposes of the above paragraphs, identifying information is considered to be any information that reasonably identifies an individual and their past, present, or future physical or mental health or condition. This includes, but is not limited to, any combination of the person's name, address, Social Security Number, date of birth, identifying number, symbol, or other identifying particular assigned to the individual, such as finger or voice print, or photograph.
- E. Notification of Electronic Breach or Improper Disclosure: During the term of this Agreement, CONTRACTOR shall notify COUNTY, immediately upon discovery of any breach of Protected Health Information (PHI) and/or data in which the COUNTY could be named, where the information and/or data is reasonably believed to have been acquired by an unauthorized person. Immediate notification shall be made to the COUNTY Mental Health Compliance Officer within two (2) business days of discovery at (800) 413-9990. The CONTRACTOR shall take prompt corrective action to cure any deficiencies and any action pertaining to such unauthorized disclosures as required by applicable Federal, State and or County laws and regulations. The CONTRACTOR shall investigate such breach and provide a written report of the

investigation to the COUNTY Mental Health Compliance Officer, postmarked within thirty (30) working days of the discovery of the breach to the address as follows:

Attention: Mental Health Compliance Officer

Riverside County Department of Mental Health

P.O. Box 7549

Riverside, CA 92513

Safeguards: The CONTRACTOR shall implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of the Protected Health Information (PHI), included electronic PHI, that it creates, receives, maintains, or transmits on behalf of DMH; and to prevent use or disclosure of PHI other than as provided for by this Agreement. In addition, CONTRACTOR shall develop and maintain a written information privacy and security program that includes administrative, technical and physical safeguards appropriate to the size and complexity of the CONTRACTOR's operations and the nature and scope of its activities. CONTRACTOR shall also provide COUNTY with a copy of information outlining such safeguards that are developed and implemented by the CONTRACTOR upon thirty (30) days written request by the COUNTY.

XX

RECORDS:

All records shall be available for inspection by the designated auditors of COUNTY, State Department of Health Care Services, State Department of Justice, U.S. Department of Health and Human Services and the U.S Office of the Inspector General at reasonable times during normal business hours. Records include, but are not limited to all physical and

electronic records originated or prepared pursuant to the performance under this Agreement including, but not limited to, working papers, reports, financial records or books of account, medical records, prescription files, subcontracts, any and other documentation pertaining to medical and non-medical services for consumers. Upon request, at any time during the period of this Agreement, the CONTRACTOR will furnish any such record or copy thereof, to the COUNTY. CONTRACTOR shall be subject to the examination and audit of the Office of the Inspector General for a period of three years after final payment under this Agreement.

- A. Medical Records. CONTRACTOR shall maintain adequate medical records on each individual patient which shall include at a minimum, a client care plan, diagnostic procedures, evaluation studies, problems to be addressed, medications provided, and records of service provided by the various personnel in sufficient detail to make possible an evaluation of services, including records of patient interviews and progress notes.
 - Financial Records. CONTRACTOR shall maintain complete financial records that clearly reflect the cost of each type of service for which payment is claimed. Any apportionment of costs shall be made in accordance with generally accepted accounting principles and shall evidence proper audit trails reflecting the true cost of the services rendered. Allowable costs shall be those costs defined in Centers for Medicare and Medicaid Services Manual (CMS 15-1). Statistical data shall be kept and reports made as required by the DIRECTOR, or his designee, and the State of California.
- C. <u>Financial Record Retention</u>. Appropriate financial records shall be maintained and retained by CONTRACTOR for at least five (5) years or, in the event of an audit exception and appeal, until the audit finding is resolved, whichever is later.

- D. <u>Patient Record Retention</u>. Patient records shall be maintained and retained by CONTRACTOR for a minimum of seven (7) years following discharge of the client except that the records of unemancipated minors shall be kept at least one year after such minor has reached the age of eighteen years and in any case not less than seven years.
- E. <u>Shared Records</u>. CONTRACTOR and COUNTY shall maintain a reciprocal shared record policy, which allows for sharing of client records between CONTRACTOR and COUNTY. Either COUNTY or CONTRACTOR cannot release these client records to a third party without prior authorization from consumer.
- F. Records Ownership. COUNTY is the owner of all patient care/client records. In the event that the Agreement is terminated, the CONTRACTOR is required to prepare and box the client medical records so that they can be archived by the County, according to procedures developed by the County.

The COUNTY is responsible for taking possession of the records and storing them according to regulatory requirements. The COUNTY is required to provide the CONTRACTOR with a copy of any medical record that is requested by the CONTRACTOR, as required by regulations, at no cost to the CONTRACTOR, and in a timely manner.

G. Inspection of Records. All records shall be available for inspection by all applicable and designated Federal, State and COUNTY auditors during normal business hours. Records include, but are not limited to, all physical and electronic records originated or prepared pursuant to the performance under this Agreement; including, but not limited to, working papers, reports, financial records or books of account, medical records, prescription files, subcontracts, any and other documentation pertaining to medical and non-medical services

for clients. Upon request, at any time during the period of this Agreement, the CONTRACTOR will furnish any such records or copies thereof, to the applicable Federal, State and COUNTY auditors. CONTRACTOR shall be subject to the examination and audit of the Office of the Inspector General for a period of no less than five (5) years pertaining to individuals over the age of 18 years of age related documentation; and no more than 10 years pertaining to minor related documentation after final payment under Agreement.

XXI

STAFFING:

CONTRACTOR shall operate continuously throughout the term of this Agreement in conformance to the staffing expectations as described in Exhibit A. Such personnel shall be qualified, holding appropriate licenses in accordance with the WIC Section 5751.2, the requirements set forth in Title 9 of the California Code of Regulations (CCR's), State Department of Mental Health policy letters, and any amendments thereto. Furthermore, CONTRACTOR acknowledges all its officers; employees, associates, and agents providing services hereunder are eligible for reimbursement for said services by their exclusion from the Federal "List of Excluded Parties" registry.

- A. During the term of this Agreement, CONTRACTOR shall maintain and shall provide upon request to authorized representatives of COUNTY, the following:
 - 1. A list of persons by name, title, and professional degree, including, but not limited to, licensing, experience, credentials, Cardiopulmonary Resuscitation (CPR) Training, First Aid training, languages spoken, Race/Ethnicity with an option to select "Prefer Not to Say" and/or certification of persons providing services

hereunder, and any other information deemed necessary by the DIRECTOR or designee. All certifications should comply with applicable California Health and Safety Code of Regulations.

- 2. Previously established and/or updated Personnel policies and procedures;
- 3. Updated personnel file for each staff member (including subcontractors, as approved by COUNTY and volunteers) that includes at minimum the following:
 - i.Resume, employment application, proof of current licensure, all applicable employment related certifications, registration;
 - ii.List of all applicable trainings;
- iii.Annual Job performance evaluation; and
- iv.Personnel action document for each change in status of the employee.
- B. CONTRACTOR shall provide an initial orientation to the program, program goals, policy and procedure review, emergency procedures and treatment services.
- C. CONTRACTOR shall have appropriate staff trained and/or certified in CPR, First Aid,

 Emergency/Disaster Planning, non-violent crisis intervention, de-escalation of agitation and
 potential violence, and procedures to protect both staff and the clients from violent behavior.
- D. Training plans shall be documented and discussed with staff. Continuing development of staff expertise shall be encouraged.
- E. The CONTRACTOR recognizes the importance of child and family support obligations and shall fully comply with all applicable State and Federal laws relating to child and family support enforcement, including, but not limited to, disclosure of information and compliance with earnings assignment orders, as provided in Chapter 8, commencing with Section 5200, of Part 5 of Division 9 of the Family Code.

- F. In accordance with section 6032 of the Deficit Reduction Act of 2005, CONTRACTOR shall establish and disseminate written policies for all employees that include detailed information about the False Claims Act and the other provisions named in section 1902(a)(68)(A). Included in these written policies shall be detailed information about CONTRACTOR's policies and procedures for detecting and preventing fraud, waste, and abuse in federal, state and local health care programs. CONTRACTOR shall also include in any employee handbook a specific discussion of the laws described in the written policies, the rights of employees to be protected as whistleblowers, and a specific discussion of CONTRACTOR's policies and procedures for detecting and preventing fraud, waste and abuse.
- G. CONTRACTOR shall follow all applicable Federal, State and County policies, laws and regulations regarding Staffing and/or Employee compensation. CONTRACTOR shall not pay or compensate any of its Staff, Personnel or Employees by means of cash. All payments or compensation made to CONTRACTOR Staff, Personnel and/or Employees in association with the fulfillment of this Agreement shall be made by means of Staff, Personnel and/or Employee Certified Payroll only.

XXII

CULTURAL COMPETENCY:

CONTRACTOR shall provide services pursuant to this Agreement in a culturally competent manner by recruiting, hiring, maintaining and providing staff that can deliver services in the manner specified to the diverse Multi-cultural population served under this Agreement. CONTRACTOR shall provide multi-cultural services in a language appropriate and culturally sensitive manner, in a setting accessible to diverse communities. Multi-cultural

diversity includes, but is not limited to, ethnicity; age; sexual preference; gender and persons who are physically challenged. CONTRACTOR shall document its efforts to provide multicultural services in the manner specified. Documentation may include, but not limited to, the following: records in personnel files attesting to efforts made in recruitment and hiring practices; participation in COUNTY sponsored and other cultural competency training; the availability of literature in multiple languages/formats as appropriate: and identification of measures taken to enhance accessibility for, and sensitivity to, physically challenged individuals.

- CONTRACTOR shall demonstrate program access; linguistically appropriate and timely mental health service delivery; staff training; and organizational policies and procedures related to the treatment of culturally diverse populations.
 CONTRACTOR shall perform specific outcome studies, on-site reviews and written reports as requested by COUNTY and made available to the COUNTY upon request.
- 2. CONTRACTOR shall provide services that are non-discriminatory and that meet the individual needs of the multi-cultural client(s) to be served. CONTRACTOR shall ensure that high quality accessible mental health care includes:
 - a. Clinical care and therapeutic interventions which are linguistically and culturally appropriate; including, at a minimum, admission, discharge, and medication consent forms available in Spanish.
 - b. Have a comprehensive management strategy to address culturally and linguistically appropriate services, including strategic goals, plans, policies, procedures, and designated staff responsible for implementation.

- c. Medically appropriate interventions which acknowledge specific cultural influences.
- d. Provision and utilization of qualified interpreters within twenty-four (24) hours of identified need.
- e. Screening and certification of interpreters as specified in subparagraph

 3a below.
- f. Training to mental health providers in building the cultural knowledge and skill required to provide culturally appropriate treatment of client population served.
- g. Develop and implement a strategy to recruit, retain, and promote qualified, diverse and culturally competent administrative, clinical, and support staff that are trained and qualified to address the needs of the culturally diverse population of the communities being served.
- h. Client related information translated into the various languages of the diverse populations served.
- i. Provide oral and written notices, including translated signage at key points of contact, to clients in their primary language, informing them of their right to receive no-cost interpreter services.
- j. CONTRACTOR agrees to comply with the COUNTY'S Cultural Competency Plan as set forth in the Board of Supervisors approved Cultural Competency Plan. The Cultural Competency Plan may be obtained from the COUNTY'S website at www.mentalhealth.co.riverside.us or by contacting the COUNTY'S

Cultural Competency Manager or designee upon written request via certified mail or facsimile to:

Riverside County Department of Mental Health

Cultural Competency Program

P.O. Box 7549

Riverside, California 92513

Attention: Cultural Competency Manager

Fax: 951-358-4792

- 3. CONTRACTOR shall make available upon request by client bilingual professional staff or qualified interpreter to ensure adequate communication between clients and mental health staff. Any individual with limited English language capability or other communicative barriers, shall have equal access to mental health services.
 - a. A qualified interpreter is defined as someone who is fluent in English and in the necessary second language, who can accurately speak, read and readily interpret the necessary second language and/or accurately sign and read sign language. A qualified interpreter must be able to translate in linguistically appropriate mental health terminology necessary to convey information such as symptoms or instructions to the client in both languages
 - b. A fluently bilingual person, who is not trained in the provision of mental health services, must complete training prior to providing services, which covers terms and concepts associated with mental illness,

psychotropic medications, and cultural beliefs and practices which may influence the client's mental health condition.

XXIII

INFORMING MATERIALS

CONTRACTOR shall provide all clients with a Notice of Privacy Practices information brochure or pamphlet during the time of the client's first visit. The CONTRACTOR is subsequently responsible for issuing the Notice of Privacy Practices (NPP) information brochure or pamphlet to all clients upon admission for services at a minimum and upon patient's readmission. Also, the CONTRACTOR is responsible for having the client or consumer sign acknowledging receipt of the NPP information, and CONTRACTOR must keep client or consumer signed acknowledgement on file upon receipt from client or consumer.

XXIV

CONFLICT OF INTEREST:

CONTRACTOR shall employ no COUNTY employee whose position in COUNTY enables him to influence the award of this Agreement or any competing Agreement, and no spouse or economic dependent of such employee in any capacity herein, or in any other direct or indirect financial interest in this Agreement.

XXV

PATIENT RIGHTS:

CONTRACTOR shall observe patient rights as provided in the WIC Section 5600 et seq., 5608 et seq., and Government Code Section 26227 et seq., 5325 and Title 9 and Title 22, Division 4.5 of the California Code of Regulations (CCR's). Patient Rights information is available on the COUNTY Department of Mental Health website. COUNTY Patients' Rights

Advocates will be given access to clients, clients' records, and facility personnel to monitor the CONTRACTOR'S compliance with said statutes and regulations.

XXVI

FAIR HEARING:

State and Federal law guarantees beneficiaries a right to a Fair Hearing if services are being denied, terminated, or reduced. CONTRACTOR shall comply with the process established and indicated in the Riverside County Mental Health Plan Provider Manual.

XXVII

WAIVER OF PERFORMANCE:

No waiver by COUNTY at any time of any of the provisions of this Agreement shall be deemed or construed as a waiver at any time thereafter of the same or any other provisions contained herein or of the strict and timely performance of such provisions.

XXVIII

FEDERAL AND STATE STATUTES:

CONTRACTOR shall adhere to Title XIX of the Social Security Act and comply with all other applicable Federal and State statutes and regulations, including but not limited to laws and regulations listed in Exhibit B.

<u>XXIX</u>

DRUG-FREE WORKPLACE CERTIFICATION:

By signing this Agreement, the CONTRACTOR hereby certifies under penalty of perjury under the laws of the State of California that the CONTRACTOR will comply with the requirements of the Drug-Free Workplace Act of 1990 (Government Code Section 8350 et seq.) and will provide a drug-free workplace doing all of the following:

Publish a statement notifying employees that unlawful manufacture, distribution,
dispensation, possession, or use of controlled substances is prohibited and specifying
actions to be taken against employees for violations, as required by Government Code
Section 8355 (a).

- B. Establish a Drug-Free Awareness Program as required by Government Code Section8355 (a) to inform employees about all of the following:
 - 1. The dangers of drug abuse in the workplace.
 - 2. The CONTRACTOR'S policy of maintaining a drug-free workplace.
 - 3. Any available counseling, rehabilitation, and employee assistance programs and
 - 4. Penalties that may be imposed upon employees for drug abuse violations.
- C. Provide as required by Government Code Section 8355 (a) that every employee who works on the Agreement:
 - 1. Will receive a copy of the CONTRACTOR'S drug-free policy statement, and
 - 2. Will agree to abide by the terms of the CONTRACTOR'S statement as a condition of employment on the Agreement.
- D. Failure to comply with these requirements may result in suspension of payments under the Agreement or termination of the Agreement or both and the CONTRACTOR may be ineligible for award of future State contracts if the COUNTY determines that any of the following has occurred:
 - 1. The CONTRACTOR has made a false certification or,
 - 2. Violates the certification by failing to carry out the requirements as noted above.

<u>TERMINATION</u>	PROVISIONS:	

- A. Either party may terminate this Agreement without cause, upon thirty (30) days written notice served upon the other party.
- B. Notify client in writing about Agreement termination, within fifteen (15) days after submitting termination notice to COUNTY.
- C. The COUNTY may terminate this Agreement upon thirty (30) days written notice served upon the CONTRACTOR if sufficient funds are not available for continuation of services.
- D. The COUNTY reserves the right, to terminate the Agreement without warning at the discretion of the Director or designee, when CONTRACTOR has been accused and/or found to be in violation of any County, State, or Federal laws and regulations.
- E. The COUNTY may terminate this Agreement with (30) days written notice due to a change in status, or delegation, assignment or alteration of the Agreement.
- F. The COUNTY may terminate this Agreement immediately if, in the opinion of the Director of Mental Health, CONTRACTOR fails to provide for the health and safety of patients served under this Agreement. In the event of such termination, the COUNTY may proceed with the work in any manner deemed proper to the COUNTY.
- G. If CONTRACTOR fails to comply with the conditions of this Agreement, COUNTY may take one or more of the following actions as appropriate:
 - a. Temporarily withhold payments pending correction of the deficiency.
 - b. Disallow (that is deny funds) for all or part of the cost or activity not in compliance.

- c. Wholly or partially suspend or terminate the Agreement and if necessary, request repayment to COUNTY if any disallowance is rendered after audit findings.
- H. After receipt of the Notice of Termination, pursuant to Paragraphs A, B, C, D, E or F above, or the CONTRACTOR is notified that the Agreement will not be extended beyond the termination date as specified in Section II, PERIOD OF PERFORMANCE.

1. CONTRACTOR shall:

- a. Stop all services under this Agreement on the date, and to the extent specified, in the Notice of Termination;
- b. Continue to provide the same level of care as previously required under the terms of this Agreement until the date of termination;
- c. If clients are to be transferred to another facility for services, furnish to COUNTY, upon request, all client information and documents deemed necessary by COUNTY to affect an orderly transfer;
- d. If appropriate, assist COUNTY in effecting the transfer of clients in a manner consistent with the best interest of the clients' welfare;
- e. Cancel outstanding commitments covering the procurement of materials, supplies, equipment and miscellaneous items. In addition, CONTRACTOR shall exercise all reasonable diligence to accomplish the cancellation of outstanding commitments required by this Agreement, which relate to personal services. With respect to these canceled commitments, the CONTRACTOR agrees to provide a written plan to Director (or his designee within thirty (30) days for settlement of all outstanding liabilities and all claims arising out of

such cancellation of commitments. Such plan shall be subject to the approval or ratification of the COUNTY, which approval or ratification shall be final for all purposes of this clause;

- f. Transfer to COUNTY and deliver in the manner, at the times, and to the extent, if any, as directed by COUNTY, any equipment which, if the Agreement had been completed, would have been required to be furnished to COUNTY; and
- g. Take such action as may be necessary, or as COUNTY may direct, for the protection and preservation of the equipment related to this Agreement which is in the possession of CONTRACTOR and in which COUNTY has or may acquire an interest;
- 2. COUNTY shall continue to pay CONTRACTOR at the same rate as previously allowed until the date of termination, as determined by the Notice of Termination.
- I. The CONTRACTOR shall submit a termination claim to COUNTY promptly after receipt of a Notice of Termination, or on expiration of this Agreement as specified in Section II, PERIOD OF PERFORMANCE, but in no event, later than sixty (60) days from the effective date thereof, unless an extension, in writing, is granted by the COUNTY.
- J. In instances where the CONTRACTOR's Agreement is terminated and/or allowed to expire by the COUNTY and not renewed for a subsequent fiscal year, COUNTY reserves the right to enter into settlement talks with the CONTRACTOR in order to resolve any remaining and/or outstanding contractual issues, including but not limited to, financial, services, billing, cost report, etc. In such instances of settlement and or litigation, CONTRACTOR will be solely responsible for associated costs for their

organization legal process pertaining to these matters including, but not limited to, legal fees, documentation copies, and legal representatives. CONTRACTOR further understands that if settlement agreements are entered into in association with this Agreement, the COUNTY reserves the right to collect interest on any outstanding amount that is owed by the CONTRACTOR back to the COUNTY at a rate of no less than 5% of the balance.

K. The rights and remedies of COUNTY provided in this section shall not be exclusive and are in addition to any other rights and remedies provided by law or under this Agreement.

XXXI

DISPUTE:

In the event of a dispute between a designee of the DIRECTOR and the CONTRACTOR over the execution of the terms of this Agreement and/or the quality of the patient services being rendered, every attempt will be made to informally resolve the issue. If an informal resolution cannot be reached, the CONTRACTOR may file a written protest as specified in the PLAN. If the CONTRACTOR is dissatisfied with the response, the CONTRACTOR may file successive written protests up through the Department of Mental Health's administrative levels of Program Chief/Assistant Director, and (finally) DIRECTOR. Each administrative level shall have twenty (20) working days to respond in writing to the CONTRACTOR. The DIRECTOR'S decision shall be final.

XXXII

SEVERABILITY:

If any provision of this Agreement or application thereof to any person or circumstances shall be declared invalid by a court of competent jurisdiction, or is in contravention of any Federal, State, or COUNTY statute, ordinance, or regulation, the remaining provisions of this Agreement or the application thereof shall not be invalidated thereby and shall remain in full force and effect, and to that extent the provisions of this Agreement are declared severable.

XXXIII

VENUE:

This Agreement shall be construed and interpreted according to the laws of the State of California. Any action at law or in equity brought by either of the parties hereto for the purpose of enforcing a right or rights provided by this Agreement shall be tried in a court of competent jurisdiction in the COUNTY OF RIVERSIDE, and the parties hereby waive all provisions of law providing for a change of venue in such proceedings in any other county.

XXXIV

NOTICES:

All correspondence and notices required or contemplated by this Agreement shall be delivered to the respective parties at the addresses set forth below and are deemed submitted one day after their deposit in the United States mail, postage prepaid:

1	<u>CONTRACTOR</u> :
2	LOMA LINDA UNIVERSITY BEHAVIORAL MEDICINE CENTER
3	1710 BARTON RD REDLANDS, CA 92373
4	ATTENTION: CONTRACT DIRECTOR
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COUNTY:
COUNTY OF RIVERSIDE
DEPARTMENT OF MENTAL HEALTH
P.O. BOX 7549
RIVERSIDE, CA 92513

EXHIBIT A

CONTRACTOR NAME: LOMA LINDA UNIVERSITY BEHAVIORAL

MEDICINE CENTER

A. SERVICES TO BE PROVIDED:

CONTRACTOR shall provide a comprehensive program of multiple levels of care including partial hospitalization, intensive outpatient and an ongoing support group specifically for the treatment of Electroconvulsive Therapy (ECT). All services, and the time spent in the rendering of the services, shall be reported to COUNTY in accordance with the Provider Manual, which will be provided to the CONTRACTOR by the COUNTY upon execution of this Agreement. As needed, CONTRACTOR will provide referrals for medication evaluations to providers identified and authorized by the COUNTY. CONTRACTOR shall adhere to Title XIX of the Social Security Act and conform to all other applicable Federal and State statutes and regulations.

SERVICE BACKGROUND:

Electroconvulsive treatment (ECT) is the safest, fastest and most effective biological treatment for certain severe mental disorders such as depression, mania (elated mood with excessive energy) and catatonia (mental withdrawal with physical immobilization). The principal client indications which warrant ECT include:

1. Severe depression or other mental disorder described above which has currently been refractory to reasonable pharmacological treatment.

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2. Severe depression or other mental disorder as above which is recurrent and in the past has been proven refractory to reasonable pharmacological treatment and yet responsive to ECT.

COUNTY purports that it serves the most severely and chronically mentally ill. As such, the COUNTY has had an increasing number of patients for whom ECT is the best and/or the only treatment option, despite the increase in availability of medications for serious mental illness. Therefore, the COUNTY agrees to contract with the CONTRACTOR to provide ECT services as follows:

ECT SCOPE OF WORK:

- ECT treatment for COUNTY clients shall consist of between nine and twelve (9 ECT treatments or more, depending on the attending Psychiatrist's recommendation, which shall be based on the patient's response to treatment.
- Maintenance treatments are defined as the prophylactic use of ECT longer than six
 (6) months beyond the end of the index episode. However, the COUNTY shall only reimburse the CONTRACTOR for maintenance therapy if such therapy is performed within the term of this Agreement.
- 3. COUNTY shall reimburse CONTRACTOR at a rate of \$1,100 per treatment per client for ECT services to be provided solely at Loma Linda University Behavioral Medicine Center. This rate includes a consult, physician services, hospital facility, recovery nurse and anesthesiologist.
- 4. COUNTY agrees to make provisions for pre-ECT work-up and evaluation, which shall include, but may not be limited to, a baseline psychiatric and cognitive status examination. This examination shall include a medical history, physical

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examination, psychiatric history, Mini Mental Status Examination (MMSE) and Montgomery Depression Rating Scale (MDRS).

- 5. CONTRACTOR requires that the COUNTY supply CONTRACTOR with a limited laboratory evaluation (to include an electrocardiogram, complete blood count, electrolytes, TSH, HCG for women age 50 and younger, and UA) prior to initiating ECT services to COUNTY client.
- 6. CONTRACTOR will administer to all ECT COUNTY clients received, a preanesthesia consultation and other selected tests as outlined in the CONTRACTOR consult, which are indicated, based on the patient's specific presentation. Prior to each ECT treatment, the treating CONTRACTOR Psychiatrist will evaluate the COUNTY client, and CONTRACTOR will provide a physical examination that will be performed by the anesthesiologist.
- 7. CONTRACTOR shall provide a portion of the ECT treatment services in the ECT suite at Loma Linda University Outpatient Surgery Center.
- 8. CONTRACTOR shall provide COUNTY client with short-acting anesthetic and muscle relaxant to assure limited movement when ECT services are being administered.
- 9. CONTRACTOR shall administer ECT services in the following manner to COUNTY clients: Electrodes are placed on the scalp to induce seizure in client, which is believed to treat depression and other mental illness.
- 10. CONTRACTOR agrees that each ECT treatment service session will take approximately three (3) hours.

- 11. CONTRACTOR shall constantly monitor COUNTY client (pre, intra and post) as ECT services are being administered. CONTRACTOR monitoring of COUNTY client shall be performed by an experienced Post Anesthesia Care Unit (PACU) Registered Nurse, and client shall only be discharged by a licensed medical staff when fully recovered from anesthesia.
- 12. COUNTY and CONTRACTOR mutually agrees that upon awakening from ECT treatment services, some clients may experience mild confusion. When the confusion resolves, the client returns to normal cognitive functioning.
- 13. COUNTY shall provide or shall assist COUNTY ECT clients in arranging transportation as needed. COUNTY will work with client to have a responsible person drive client to and from ECT treatments, and for a responsible person to stay with client for at least 24 hours after each ECT treatment is administered by the CONTRACTOR.

B. DELIVERY OF SERVICES

CONTRACTOR shall establish timely appointments for services within five (5) business days of the service authorization request sent by the COUNTY. CONTRACTOR must notify the COUNTY in writing if CONTRACTOR is unable to schedule services for the client within five (5) business days of authorization.

C. <u>VERIFICATION OF MEDI-CAL COVERAGE</u>

If, when, and where applicable, CONTRACTOR shall be responsible for verifying Medi-Cal eligibility for all services provided to COUNTY clients under this agreement herein.

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D. TARGET GROUP TO BE SERVED:

Clients who are considered to be severely and chronically mentally ill, depressed or have other mental disorders including but not limited to, mania (elated mood with excessive energy) and catatonia (mental withdrawal with physical immobilization), which has currently been refractory to reasonable pharmacological treatment. Severe depression or other mental disorders, which are recurrent and in the past have been proven refractory to reasonable pharmacological treatment and yet responsive to ECT shall be considered for treatment.

F. REFERRALS:

All services provided under this Agreement shall be authorized by the COUNTY and be limited to persons referred by COUNTY. Exceptions to this requirement may be authorized by COUNTY'S Contract Monitor and CONTRACTOR by written mutual agreement subject to the final approval of the DIRECTOR.

G. ADMISSION POLICIES:

CONTRACTOR certifies that its admission policies are in writing and made available to the public in accordance with Section 526, Title 9 of the California Code of Regulations.

H. ASSESSMENT:

From time to time, the COUNTY may require that a client be reassessed by a second provider to ensure appropriate treatment planning and outcome. Upon request of COUNTY, the CONTRACTOR will cooperate with facilitating their client's referral for reassessment.

<u>I. STAFFING:</u>

CONTRACTOR certifies that all personnel are qualified; hold appropriate licenses in

accordance with Welfare and Institutions Code Section 5600.2 and all other applicable requirements of Code, and State policy letters. During the term of this Agreement, CONTRACTOR shall have available and shall provide upon request to authorized representatives of COUNTY a list of persons by title, professional degree and experience who are providing services hereunder. Credentialing or proof of credentialing will be required from the CONTRACTOR for all clinicians of a Group Provider or Organizational Provider. A copy of each clinician's credentialing will be sent to the COUNTY before services are rendered. The number and classification of personnel at CONTRACTOR'S site of service shall reflect the understandings reached during the negotiation of this agreement and reasonable workload standards.

<u>J. MEETINGS</u>:

CONTRACTOR and COUNTY'S Contract Monitor shall meet at least once a year to review and discuss the performance and obligations under this Agreement of each party thereto. The COUNTY Contract Monitor shall be responsible for preparing and submitting to CONTRACTOR a written report of each meeting no later than ten (10) working days after the meeting date. The report shall include, but not be limited to, the identification of issues, actions taken or to be taken, and any recommendations for programmatic or fiscal changes.

<u>K. PROGRAM MONITORING</u>:

The Department of Mental Health will utilize the "Program Monitoring Team Manual" (PMT) as a tool to monitor the services provided by this CONTRACTOR as stipulated in the Agreement. The monitoring will include all clinical, fiscal, and administrative components, including compliance with COUNTY'S "Medication Guidelines" and

"Psychotropic Medication Protocols for Children and Adolescents" publications.

CONTRACTOR shall respond to COUNTY contact, including phone calls, letters or other forms of communication, within two (2) business days.

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EXHIBIT B - MENTAL HEALTH

LAWS, REGULATIONS AND POLICIES

Services shall be provided in accordance with policies and procedures as developed by

COUNTY and those Federal and State laws, regulations and policies which are applicable to

the terms of this Agreement, including but not limited to the following:

General Regulations

Government Code Section 8350 et seq. (Drug-Free Workplace Act of 1990)

Government Code 26227 (Contracting with County)

Riverside County Mental Health Plan

Riverside County Mental Health Plan Provider Manual

Adult System of Care

California Welfare and Institutions Code Sections 5689 et seq.

Case Management/Service Regulations

California Code of Regulations, Title 9, Division 1, Chapters 2, 3, 4, 4.5, 9, 11, 12

(Rehabilitative and Developmental Services)

Welfare and Institutions Code 5610 to 5613 (Client Service Information Reporting)

Welfare and Institutions Code 17608.05 (Maintenance of Effort)

42 Code of Federal Regulations 438.608 (Program Integrity Requirements)

California Welfare & Institutions Code Sections 5600.4 and 5699.4 Charges and Billing

(Financial Regulations)

California Welfare and Institutions Code 5651(a)(4), 5664, 5705(b)(3), 5718(c) (Cost

Reporting)

California Welfare and Institutions Code 5704.5 & 5704.6 (Expenditure Requirements)

Government Code 8546.7 (Audits)

1	Uniform Method of Determining Ability to Pay, State Dept. of Mental Health.
2	Centers for Medicare and Medicaid Services Manual
3	Child Abuse Reporting/Child Support
4	California Penal Code Sections 11164 – 11174.4 et seq.
5	Family Code, Section 5200 (Child Support)
6	Children System of Care
7 8	California Welfare and Institutions Code Section 5880 (Children System of Care)
9	Community Care Facilities
10	California Code of Regulations, Title 22, Division 6 (Social Security, Licensing of
11	Community Care Facilities)
12	Community Residential Treatment Program
13	California Welfare & Institutions Code Sections 5150 to 5152, 5600.2 to 5600.9 and 5699 to
14 15	5672 (Community Treatment)
16	California Welfare & Institutions Code Section 5670 et seq.
17	California Code of Regulations, Title 22, Division 6.
18	Confidentiality
19	California Welfare & Institutions Code Section 5328
20	California Welfare & Institutions Code Section 5330 (Monetary Penalties)
21	45 CFR Parts 160 and 164 (Standards for Privacy of Individually Identifiable Health
22 23	Information)
24	Elderly and Dependent Adult Abuse Reporting
25	California Welfare & Institutions Code Sections 15600 et seq.
26	Health Care Facilities
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1	California Code of Regulations, Title 22, Division 5 (Social Security, Licensing and
2	Certification of Health Facilities, Home Health Agencies, Clinics, and Referral Agencies)
3	Homeless Mentally Disabled
4	McKinney-Vento Homeless Assistance Act, Public Law 101-645 (Homeless Services)
5	California Welfare & Institutions Code Section 5680 et seq.
6	Life Support
7 8	California Welfare & Institutions Code Section 4075 to 4078
9	DMH Letter 03-04 (Health Care Facility Rates)
10	DMH Letter 86-01 (Life Support Supplemental Rate)
11	Medication Protocol
12	Riverside County Mental Health "Psychotropic Medication Protocols for Children and
13	Adolescents" Publication
14 15	Riverside County Mental Health "Medication Guidelines" Publication
16	Minors in Health Care Facilities
17	California Welfare & Institutions Code Section 5751.7
18	Negotiated Net Amount and Negotiated Net Agreements
19	California Welfare and Institutions Code Sections 5705 and 5716
20	Non Discrimination
21 22	Americans with Disabilities Act of 1990 (42 U.S.C. Section 12101 et seq.)
23	California Fair Employment and Housing Act, Government Code Section 12900 et seq.
24	California Code of Regulations, Title 2, Section 7285 et seq.
25	Section 504 of the Rehabilitation Act of 1973 (Non-Discrimination)
26	Patients Rights
27	California Welfare & Institutions Code Sections 5325 et seq.
28	California Code of Regulations, Title 22, Section 70707

EXHIBIT C REIMBURSEMENT & PAYMENT

CONTRACTOR NAME: Loma Linda University Behavioral Medicine Center

PROGRAM NAME: ECT Services

A. REIMBURSEMENT:

- 1. In consideration of services provided by CONTRACTOR pursuant to this Agreement, CONTRACTOR shall receive monthly reimbursement based upon the reimbursement type as indicated by an "X" below:
 - X The Negotiated Rate, as approved by the COUNTY, per unit as specified in the Schedule I, multiplied by the actual number of units of service provided, less revenue collected, not to exceed the maximum obligation of the COUNTY for that fiscal year as specified herein.
 - NA One-twelfth (1/12th), on a monthly basis of the overall maximum obligation of the COUNTY as specified herein.
- 2. CONTRACTOR'S Schedule I issued by COUNTY for budget purposes is attached hereto and incorporated herein by this reference.
- 3. The final year-end settlement shall be based upon the final year end settlement type or types as indicated by an "X" below (please mark all that apply), including allowable costs for this Agreement such as administrative cost, indirect cost and operating income and shall not exceed the percentage(s) or amounts(s) as specified in the original Agreement proposal or subsequent negotiations received, made and/or approved by the COUNTY:
 - NA The final year-end settlement for non-Medi-Cal services (only) shall be based upon the actual allowable cost per unit, multiplied by the actual number of units of service, less revenue collected.

- NA The final year-end settlement for Medi-Cal services (only) shall be based on final State approved Medi-Cal units, multiplied by the actual allowable cost per unit of service provided; or the Riverside County Maximum Allowable Rate (RCMAR); or Drug Medi-Cal rate; or customary charges (published rate), whichever is the lowest rate, less revenue collected. In addition, all year-end settlement for Drug Medi-Cal services shall be less a COUNTY administrative fee.
- NA The final year-end settlement for Narcotics Treatment Program (NTP)

 Medi-Cal services (only) shall be based on final State approved Medi-Cal units, multiplied by the Riverside County Drug Medi-Cal rate, or customary charges (published rate), whichever is lower, less revenue collected.
- X The final year-end settlement for Negotiated Rate services (only) shall be based upon the Negotiated Rate, as approved by the COUNTY, multiplied by the actual number of units of service provided and approved by the COUNTY, less revenue collected.
- NA The final year-end settlement for ancillary, start-up or flexible spending categories shall be based on actual allowable cost, less revenue collected.
- 4. The combined final year-end settlement for all services shall not exceed the maximum obligation of the COUNTY as specified herein, and the applicable maximum reimbursement rates promulgated each year by the COUNTY.

B. <u>MAXIMUM OBLIGATION:</u>

COUNTY'S maximum obligation for FY 2014/2015 shall be \$105,600 subject to availability of applicable Federal, State, local and/or COUNTY funds.

C. BUDGET:

Schedule I presents (for budgetary and planning purposes only) the budget details pursuant to this Agreement. Where applicable, Schedule I contains department identification number (Dept. ID), Program Code, billable and non-billable mode(s) and

service function(s), units, expected revenues, maximum obligation and source of funding pursuant to this Agreement.

D. MEDI-CAL (M/C):

- 1. With respect to services provided to Medi-Cal beneficiaries, CONTRACTOR shall comply with applicable Medi-Cal cost containment principles where reimbursement is based on actual allowable cost, or Drug Medi-Cal Rate or customary charges (published rate), whichever rate is lower, as specified in Title 19 of the Social Security Act, Title 22 of the California Code of Regulations and applicable policy letters issued by the State.
- 2. RCMAR is composed of Local Matching Funds and Federal Financial Participation (FFP).

E. REVENUES:

As applicable:

- 1. Pursuant to the provisions of Sections 4025, 5717 and 5718 of the Welfare & Institutions Code, and as further contained in the State Department of Health Care Services Revenue Manual, Section 1, CONTRACTOR shall collect revenues for the provision of the services described pursuant to Exhibit A. Such revenues may include but are not limited to, fees for services, private contributions, grants or other funds. All revenues received by CONTRACTOR shall be reported in their annual Cost Report, and shall be used to offset gross cost.
- 2. CONTRACTOR shall be responsible for checking and confirming Medi-Cal eligibility for its patient(s)/client(s) prior to the patient(s)/client(s) receiving services(s) and prior to services being billed in order to ensure proper billing of Medi-Cal eligible services for all applicable patient(s)/clients(s).
- 3. Patient/client eligibility for reimbursement from Medi-Cal, Private Insurance, Medicare, or other third party benefits shall be determined by the CONTRACTOR at all times for billing or service purposes. CONTRACTOR shall pursue payment from all potential sources in sequential order, with Medi-Cal as payor of last resort.

- 4. CONTRACTOR is to attempt to collect first from Medicare (if site is Medicare certified and if CONTRACTOR staff is enrolled in Medicare program), then insurance and then first party. In addition, CONTRACTOR is responsible for adhering to and complying with all applicable Federal, State and local Medical and Medicare laws and regulations as it relates to providing services to Medi-Cal and Medicare beneficiaries.
- 5. If a client has both Medicare or Insurance and Medi-Cal coverage, a copy of the Medicare or Insurance Explanation of Benefits (EOB) must be provided to the COUNTY within thirty (30) days of receipt of the EOB date.
- 6. CONTRACTOR is obligated to collect from the client any Medicare coinsurance and/or deductible if the site is Medicare certified or if provider site is in the process of becoming Medicare certified or if the provider is enrolled in Medicare. CONTRACTOR is required to clear any Medi-Cal Share of Cost amount(s) with the State. CONTRACTOR is obligated to attempt to collect the cleared Share of Cost amount(s) from the client. CONTRACTOR must notify the COUNTY in writing of cleared Medi-Cal Share of Cost(s) within seventy two (72) hours (excluding holidays) of the CONTRACTOR'S received notification from the State. Patients/clients with share of cost Medi-Cal shall be charged their monthly Medi-Cal share of cost in lieu of their annual liability. Medicare clients will be responsible for any co-insurance and/or deductible for services rendered at Medicare certified sites.
- If and when applicable, all other clients will be subject to an annual sliding fee schedule by CONTRACTOR for services rendered, based on the patient's/client's ability to pay, not to exceed the CONTRACTOR'S actual charges for the services provided. In accordance with the State Department of Health Care Services Revenue Manual, CONTRACTOR shall not be penalized for non-collection of revenues provided that reasonable and diligent attempts are made by the CONTRACTOR to collect these revenues. Past due patient/client accounts may not be referred to private collection agencies. No patient/client shall be denied services due to inability to pay.

- 8. If and where applicable, CONTRACTOR shall submit to COUNTY, with signed Agreement, a copy of CONTRACTOR'S customary charges (published rates).
- 9. If CONTRACTOR charges the client any additional fees (i.e. Co-Pays) above and beyond the contracted Schedule I rate, the CONTRACTOR must notify the COUNTY within each fiscal year Agreement period of performance.
- 10. CONTRACTOR must notify the COUNTY if CONTRACTOR raises client fees. Notification must be made within ten (10) days following any fee increase.

F. REALLOCATION OF FUNDS:

- 1. No funds allocated for any mode and service function as designated in Schedule I may be reallocated to another mode and service function unless prior written consent and approval is received from COUNTY Program Administrator/Manager and confirmed by the Fiscal Supervisor prior to either the end of the <u>Agreement Period of Performance</u> or the end of the fiscal year (June 30th). Approval shall not exceed the maximum obligation.
- 2. In addition, CONTRACTOR may not, under any circumstances and without prior written consent and approval being received from COUNTY Program Administrator/Manager and confirmed by the Fiscal Supervisor, reallocate funds between mode and service functions as designated in the Schedule I that are defined as non-billable by the COUNTY, State or Federal governments from or to mode and service functions that are defined as billable by the COUNTY, State or Federal governments.
- 3. If this Agreement includes more than one Exhibit C and/or more than one Schedule I, shifting of funds from one Exhibit C to another and/or from one Schedule I to another is also prohibited without prior written consent and approval being received from COUNTY Program Administrator/Manager and confirmed by the Fiscal Supervisor prior to the end of either the Agreement Period of Performance or fiscal year.

G. <u>RECOGNITION OF FINANCIAL SUPPORT:</u>

If, when and/or where applicable, CONTRACTOR'S stationery/letterhead shall indicate that funding for the program is provided in whole or in part by the COUNTY of Riverside Department of Mental Health.

H. PAYMENT:

- 1. Monthly reimbursements may be withheld at the discretion of the Director or its designee due to material Agreement non-compliance, including audit disallowances, invoice(s), or Agreement overpayment, and/or adjustments or disallowances resulting from the COUNTY Contract Monitoring Team Review (CMT), COUNTY Program Monitoring, Federal or State Audit, and/or the Cost Report Reconciliation/Settlement process.
- 2. In addition, if the COUNTY determines that there is any portion (or all) of the CONTRACTOR invoice(s) that cannot be substantiated, verified or proven to be valid in any way for any fiscal year, then the COUNTY reserves the right to disallow and/or withhold current and/or future payments from CONTRACTOR until valid, substantial proof of any and/or all items billed for is received, verified and approved by the COUNTY.
- 3. In addition to the annual CMT, Program Monitoring, and Cost Report Reconciliation/Settlement processes, the COUNTY reserves the right to periodic system service reviews and subsequent deletes and denial monitoring for this Agreement throughout the fiscal year in order to minimize and prevent COUNTY and CONTRACTOR loss and/or inaccurate billing and/or reports. The COUNTY, at its discretion, may withhold and/or offset invoices and/or monthly reimbursements to CONTRACTOR, at any time without prior notification to CONTRACTOR, for service deletes and denials that may occur in association with this Agreement. COUNTY shall notify CONTRACTOR of any such instances of services deletes and denials and subsequent withholds and/or reductions to CONTRACTOR invoices or monthly reimbursements.
- 4. Notwithstanding the provisions of Paragraph H-1 and H-2 above, CONTRACTOR shall be paid in arrears based upon either the actual units of service provided.

5. Unless otherwise notified by the COUNTY, CONTRACTOR invoicing will be paid by the COUNTY thirty (30) calendar days after the date the invoice is received.

I. <u>COST REPORT</u>:

- 1. For each fiscal year, or portion thereof, that this Agreement is in effect, CONTRACTOR shall provide to COUNTY two (2) copies, per each Program Code, an annual Cost Report with an accompanying financial statement and applicable supporting documentation to reconcile to the Cost Report within one of the length of times as follows and as indicated below by an "X":
 - NA Thirty (30) calendar days following the end of each fiscal year (June 30th), or the expiration or termination of the Agreement, whichever occurs first.
 - NA Forty-five (45) calendar days following the end of each fiscal year (June 30th), or the expiration or termination of the Agreement, whichever occurs first.
 - X Seventy-Five (75) calendar days following the end of each fiscal year (June 30th), or the expiration or termination of the Agreement, whichever occurs first.
- 2. The Cost Report shall detail the actual cost of services provided. The Cost Report shall be provided in the format and on forms provided by the COUNTY.
- CONTRACTOR shall follow all applicable Federal, State and local regulations and guidelines to formulate proper cost reports, including but not limited to OMB-circular A-122, OMB-circular A-87, etc.
- 4. It is mandatory that the CONTRACTOR send one representative to the cost report training annually that is held by COUNTY that covers the preparation of the year-end Cost Report. The COUNTY will notify CONTRACTOR of the date(s) and time(s) of the training. Attendance at the training is mandatory annually in order to ensure that the Cost Reports are completed appropriately. Failure to attend this training will result in delay of any reimbursements to the CONTRACTOR.

- 5. CONTRACTOR will be notified in writing by COUNTY, if the Cost Report has not been received within the specified length of time as indicated in Section I, paragraph 1 above. Future monthly reimbursements will be withheld if the Cost Report contains errors that are not corrected within ten (10) calendar days of written or verbal notification from the COUNTY. Failure to meet any pre-approved deadlines and/or extension will immediately result in the withholding of future monthly reimbursements.
- 6. The Cost Report shall serve as the basis for year-end settlement to CONTRACTOR including a reconciliation and adjustment of all payments made to CONTRACTOR and all revenue received by CONTRACTOR. Any payments made in excess of Cost Report settlement shall be repaid upon demand, or will be deducted from the next payment to CONTRACTOR.
- 7. All current and/or future payments to CONTRACTOR will be withheld by the COUNTY until all final, current and prior year Cost Report(s) have been reconciled, settled and signed by CONTRACTOR, and received and approved by the COUNTY.
- 8. CONTRACTOR shall report Actual Costs separately, if deemed applicable and as per CONTRACTOR Schedule I, to provide Agreement Client Ancillary Services, Prescriptions, Health Maintenance Costs, and Flexible funding costs under this Agreement on the annual cost report. Where deemed applicable, Actual Costs for Indirect Administrative Expenses shall not exceed the percentage of cost as submitted in the CONTRACT Request for Proposal or Cost Proposal(s).

J. <u>BANKRUPTCY:</u>

Within five (5) calendar days of filing for bankruptcy, CONTRACTOR shall notify COUNTY'S Department of Mental Health's Fiscal Services Unit, in writing by certified letter with a courtesy copy to the Department of Mental Health's Program Support Unit. The CONTRACTOR shall submit a properly prepared Cost Report in accordance with requirements and deadlines set forth in Section I before final payment is made.

K. <u>AUDITS</u>:

- 1. CONTRACTOR agrees that any duly authorized representative of the Federal Government, the State or COUNTY shall have the right to audit, inspect, excerpt, copy or transcribe any pertinent records and documentation relating to this Agreement or previous Agreements in previous years.
- 2. If this Agreement is terminated in accordance with Section XXX, TERMINATION PROVISIONS, the COUNTY, Federal and/or State governments may conduct a final audit of the CONTRACTOR. Final reimbursement to CONTRACTOR by COUNTY shall not be made until all audit results are known and all accounts are reconciled. If applicable, revenue collected by CONTRACTOR during this period for services provided under the terms of this Agreement will be regarded as revenue received and deducted as such from the final reimbursement claim.
- 3. Any audit exception resulting from an audit conducted by any duly authorized representative of the Federal Government, the State or COUNTY shall be the sole responsibility of the CONTRACTOR. Any audit disallowance adjustments shall be paid in full upon demand or withheld at the discretion of the Director of Mental Health against amounts due under this Agreement or Agreement(s) in subsequent years.
- 4. The COUNTY will conduct Program Monitoring Review and/or Contract Monitoring Team Review (CMT). Upon completion of monitoring, CONTRACTOR will be mailed a report summarizing the results of the site visit. If and when necessary, a corrective Action Plan will be submitted by CONTRACTOR within thirty (30) calendar days of receipt of the report. CONTRACTOR'S failure to respond within thirty (30) calendar days will result in withholding of payment until the corrective plan of action is received. CONTRACTOR'S response shall identify time frames for implementing the corrective action. Failure to provide adequate response or documentation for this or subsequent year's Agreements may result in Agreement payment withholding and/or a disallowance to be paid in full upon demand.

Rev. 14/15 MS/JB

FY 2014/15 SCHEDULE I MENTAL HEALTH

CONTRACTOR NAME: Loma Linda University Behavioral Medicine Center

PROGRAM NAME: MANAGED CARE MONTHLY REIMBURSMENT: NEGOTIATED RATE YEAR END SETTLEMENT: NEGOTIATED RATE

PROCEDURE CODES:	90870		
UNIT MEASUREMENT:	TREATMENTS	TREATMENTS	
NUMBER OF UNITS:	96	0	
COST PER UNIT:	\$1,100.00	\$0.00	
GROSS COST:	\$105,600	\$0	\$105,600
经验的 加强企业的关系的关键并加强更加设置。	Property against Sections of the second	A SECURITY OF THE PROPERTY OF THE PARTY OF T	boscate perpendicular
LESS REVENUES COLLECTED BY CONTRACTORS:			
A. PATIENT FEES	\$0	\$0	\$0
B. OTHER	\$0	\$0	\$0
TOTAL CONTRACTOR REVENUES	\$0	\$0	\$0
MAXIMUM OBLIGATION	\$105,600	\$0	\$105,600
SOURCES OF FUNDING FOR MAXIMUM OBLIGATION:			
A: MEDI/CAL FFP	\$52,800	\$0	\$52,800
B: FEDERAL FUNDS	\$0	\$0	\$0
C: REALIGNMENT FUNDS	\$0	\$0	\$0
D: STATE FUNDS	\$52,800	\$0	\$52,800
E: COUNTY FUNDS	\$0	\$0	\$0
F: OTHER:	\$0	\$0	\$0
TOTAL (ALL FUNDING SOURCES)	\$105,600	\$0	\$105,600

FUNDING SOURCES DOCUMENT:	-		
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ADMIN SVCS ANALYST SIGNATURE: (CN'OUS	Date:	4-10-1

FISCAL SERVICES SIGNATURE:

Date: 4/14/2014

Jeanette Bates Date: 4-10-14 PREPARED BY: