SUBMITTAL TO THE BOARD OF SUPERVISORS **COUNTY OF RIVERSIDE. STATE OF CALIFORNIA**



FROM: Department of Mental Health

SUBMITTAL DATE: May 1, 2014

SUBJECT: Approval of the one year Agreement with Telecare Corporation for Psychiatric Health Facility (PHF) & Crisis Stabilization Unit (CSU) Mental Health Services (District: 4) [\$7,117,772 ongoing]. State & Federal

RECOMMENDED MOTION: That the Board of Supervisors:

- 1. Approve the one year Agreement with Telecare Corporation in the amount of \$7,117,772 for the provision of PHF and CSU mental health services.
- 2. Authorize the Chairman of the Board to sign the Agreement with Telecare Corporation;
- 3. Authorize the Director of the Department of Mental Health to administer the terms of the Agreement;
- 4. Authorize the Purchasing Agent, in accordance with Ordinance No. 459 to increase or decrease this Agreement while staying within the Board approved annual aggregate of \$10,308,062 based upon the availability of funding, and to sign amendments that do not change the substantive terms of the Agreement through June 30, 2015.

(Continued on page 2)

JW:MPS

Wengerd, Director Department of Mental Health

								For Fiscal Year	: 14/15
SOURCE OF FUNDS: State 88%, Federal 12%			eral 12%				Budget Adjustment: NO		
NET COUNTY COST	\$	0	\$	0	\$	0	\$	0	Consent Li Poncy El
COST	\$		\$	7,117,772	\$	7,117,772	\$	7,117,772	Consent □ Policy
FINANCIAL DATA	Current Fl	scal Year:	Next	Fiscal Year:	Tot	al Cost:	O	igolng Cost:	POLICY/CONSENT

C.E.O. RECOMMENDATION:

APPROVE

County Executive Office Signature Jennifer L. Sargent

MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Jeffries, seconded by Supervisor Ashley and duly carried, IT WAS ORDERED that the above matter is approved as recommended.

Ayes:

Jeffries, Stone, Benoit and Ashley

Nays:

None

Absent:

Tavaglione

Date:

June 3, 2014

xc: Self HVA Mental Health, Purchasing

Prev. Agn. Ref.: 06/25/13, 3:20

District: 4

Agenda Number:

Kecia Harper-Ihem

Purchasing: Departmental

CIVED COUNTY COUNSE!

Positions Added Change Order

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

FORM 11: Approval of the FY 14/15 Agreement with Telecare Corporation for Psychiatric Health Facility (PHF) & Crisis Stabilization Unit (CSU) Mental Health Services (District 4) [\$7,117,772 ongoing]. State & Federal

DATE: May 1, 2014 **PAGE:** Page 2 of 2

BACKGROUND:

<u>Summary</u>

The Department of Mental Health (DMH) 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. The PHF and CSU will be a licensed inpatient facility designated to provide 72-hour treatment and evaluation services. Telecare will also seek Lanterman-Petris-Short (LPS) designation to provide acute mental health services for individuals involuntarily detained under California Welfare & Institution Code Section 5150. Such services are currently provided at this 12 bed outpatient crisis stabilization unit as well as the 16 bed psychiatric health facility, and there is no other LPS designated facility in the eastern region of Riverside County. Therefore, the DMH is requesting that the Board of Supervisors approve the FY 14/15 Agreement with Telecare Corporation for PHF and CSU mental health services.

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.

Additional Fiscal Information

The psychiatric health facility portion of this Agreement is funded through realignment funds and the outpatient crisis stabilization unit is funded through Mental Health Services Act (MHSA) funds. This Agreement has a termination clause in the event that applicable Federal, State and/or County funds become unavailable for service provision. There are sufficient funds in the department's FY 14/15 budget and no additional County funds are required.

Contract History and Price Reasonableness

On October 31, 2013, DMH issued a formal Request for Proposal (No. MHARC-142) seeking competitive proposals from agencies qualified to provide PHF and CSU services in the desert region. Four proposals were received. After reviewing the proposals and conducting group discussions, the evaluation committee found Telecare Corporation as the most responsive and responsible bidder with the best price to provide these acute mental health services. Telecare Corporation will provide intensive psychiatric treatment and mental health services to DMH clients at an appropriate level of care.

COUNTY OF RIVERSIDE



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 TELECARE CORPORATION, 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 56 and Exhibits A, B, C, and Schedule I attached hereto and incorporated herein, hereinafter referred to as "Agreement."

CONTRACTOR	COUNTY	
By: Touth Reps	By: Left Stone,	La Stone
Faith Richie	Board of Su	
Print Name		JUN 0 3 2014
Date: 5-8-14	Date:	
COUNTY COUNSEL:	A'	TTEST:
Pamela J. Walls	K	ECIA HARRER-IHEM, Clerk
Approved as to form		LA MATAZITHOU
	B	CANALLY COM IN
By: Mayou	C C	// DEPUTY
Deputy County Counsel		

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27 28 **DESCRIPTION OF SERVICES:**

CONTRACTOR agrees to provide services in the form as outlined and described in Exhibit A, Exhibit B, Exhibit C, Schedule I and any other exhibits, attachments or addendums attached hereto and by this reference incorporated herein to this Agreement.

 \mathbf{II}

PERIOD OF PERFORMANCE:

This Agreement shall be effective as of July 1, 2014, and continue in effect through June 30, 2015. The Agreement may thereafter be renewed annually, up to an additional five (5) years, subject to the availability of funds.

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REIMBURSEMENT AND USE OF FUNDS PAYMENT:

A. Reimbursement

In consideration of services provided by CONTRACTOR, COUNTY shall reimburse CONTRACTOR in the amount and manner outlined and described in Exhibit C and Schedule I, attached hereto and by this reference incorporated herein to this Agreement. CONTRACTOR agrees to submit their National Provider Identification (NPI) and other support or required documentation to the COUNTY prior to reimbursement be processed by the COUNTY.

B. Restrictions On Salaries

CONTRACTOR agrees that no part of any federal funds provided under this Agreement shall be used by the CONTRACTOR, or its Subcontractors to pay the salary of an individual at a rate in excess of Level 1 of the Executive Schedule.

Salary schedules may be found at http://www.opm.gov/oca. CONTRACTOR shall be responsible for making sure that their organization is in full compliance with all applicable Federal, State, County or local salary restrictions in conjunction with performing the services herein.

C. Union Organizing

- CONTRACTOR will not assist, promote, or deter union organizing by employees performing work on a state service contract, including a public works contract.
- 2. CONTRACTOR will not, for any business conducted under this Agreement, use any state property to hold meetings with employees or supervisors, if the purpose of such meetings is to assist, promote or deter union organizing unless the state property is equally available to the general public for holding meetings.
- 3. If the CONTRACTOR incurs costs, or makes expenditures to assist, promote, or deter union organizing, CONTRACTOR will maintain records sufficient to show that no reimbursement from state funds has been sought for these costs, and the CONTRACTOR shall provide those records to the County and then to the Attorney General upon request.
- D. Lobbying And Restrictions And Disclosures Certification
 Applicable to federally funded contracts in excess of \$100,000 per Section 1352
 Title 31, USC, Section 1352 and 45 CFR Part 93:

Page 5 of 56

1. Certification and Disclosure Requirements

- a. CONTRACTOR (or recipient) who requests or receives a contract, sub-contract, grant or sub-grant, which is subject to Title 31, USC, Section 1352, and which exceeds \$100,000 at any tier, shall file a certification (in the form set forth in by the COUNTY), consisting of one page, entitled "Certification Regarding Lobbying" that the recipient has not made, and will not make, any payment prohibited by sub-section B of this provision.
- b. CONTRACTOR shall file a disclosure (in the form set forth by the COUNTY, entitled "Standard Form-LLL-Disclosure of Lobbying Activities") if any funds other than federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence any officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or any employee of a Member of Congress in connection with this federal grant.
- c. CONTRACTOR shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.
- d. CONTRACTOR shall file a disclosure form at the end of each calendar quarter in which there occurs any event that requires disclosure or that materially affect the accuracy of the information contained in any disclosure form previously filed by such person under Paragraph 1(a)

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herein. An event that materially affects the accuracy of the information reported includes:

- (i) A cumulative increase \$25,000, or more in the amount paid or expected to be paid for influencing or attempting to influence a covered federal action;
- (ii) A change in the person(s) or individual(s) influencing or attempting to influence a covered federal action;
- (iii) A change in the officer(s), employee(s), or member(s) contacted for the purpose of influencing or attempting to influence a covered federal action;
- (iv) CONTRACTOR who requests or receives from a person referred to in Paragraph 1(a) of this provision a contract, subcontract, grant or sub-grant exceeding \$100,000 at any tier under a contract or grant shall file a certification, and a disclosure form, if required, to the next tier above;
- (v) All disclosure forms (but no certifications) shall be forwarded from tier to tier until received by the entity referred to in Paragraph 1(a) of this provision. The CONTRACTOR shall forward all disclosure forms to the COUNTY in order for the COUNTY to forward to Program/Regional Administrator.

E. Prohibition

Section 1352 of Title 31, U.S.C., provides in part that no Federal appropriated funds may be expended to pay any person influencing or attempting to influence an

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officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with any of the following covered federal actions: the awarding of any federal contract, the making of any federal grant, the making of any federal loan, entering into any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan or cooperative agreement.

F. National Provider Identifier (NPI)

All HIPAA covered healthcare providers must obtain an NPI. Provider's site NPIs must be submitted to the Riverside County Department of Mental Health (RCDMH) Information Services Unit prior to rendering services to clients. Contractors providing Medi-Cal billable services must also submit rendering (individual) provider NPIs to RCDMH Information Services Unit for each staff member providing Medi-Cal billable services. Contractor reimbursement will not be processed unless NPIs are on file with RCDMH 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 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.).

PROGRAM SUPERVISION, MONITORING AND REVIEW:

Pursuant to Welfare & Institutions Code (WIC), Section 5608, 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.

- A. 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 client well-being; and the right to review and monitor CONTRACTOR's facilities, programs, policies, practices, books, records, or procedures during operating hours.
 - In exercising the right to review or monitor CONTRACTOR's administrative, clinical, fiscal, and program components, staff and facility(ies), 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.
 - 2. CONTRACTOR further agrees to authorize the COUNTY, under this Agreement, to have access to all COUNTY consumers, 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.

- B. As it pertains to the COUNTY and Program Monitoring, if at any point during the duration of this Agreement, the COUNTY determines CONTRACTOR is out of compliance with any provision in this Agreement, the COUNTY may request a plan of correction, after providing the CONTRACTOR with written notification and the basis for the finding of noncompliance.
 - 1. Within thirty (30) days of receiving 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 suspend other punitive actions to give the CONTRACTOR the opportunity to come into compliance.
 - 3. If the COUNTY determines CONTRACTOR has failed to implement corrective action, funds may be withheld until compliance is achieved.
 - 4. CONTRACTOR shall cooperate with any such effort by COUNTY including follow-up investigation and interview of witnesses. Failure to cooperate or take corrective action as may be indicated by an investigation could result in termination of this Agreement.
- C. CONTRACTOR agrees that any duly authorized representative of the Federal, the State, COUNTY or local government shall have the right to audit, inspect, excerpt, copy or transcribe any pertinent records and documentation relating to this Agreement or previous year's Agreements.

D. If this Agreement is terminated in accordance with Section XXVII, TERMINATION PROVISIONS, COUNTY may conduct a final audit of the CONTRACTOR. Final reimbursement to CONTRACTOR by COUNTY shall not be made until audit results are known and all accounts are reconciled. 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.

- E. Any audit exception resulting from an audit conducted by any duly authorized representative of the Federal Government, the State or County shall be the responsibility of the CONTRACTOR. Any audit disallowance adjustments may be paid in full upon demand or withheld at the discretion of the DIRECTOR against amounts due under this Agreement or previous year's Agreement(s).
- F. The COUNTY will conduct an Annual Administrative, Fiscal, and Clinical Contract Monitoring. Upon completion of the monitoring, CONTRACTOR will be mailed a report summarizing the results of the site visit. If discrepancies are noted during the Contract Monitoring, a Corrective Plan of Action 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 may result in withholding of payment until the Corrective Plan of Action is received.
- G. Notwithstanding the foregoing, the COUNTY reserves the right, at any time and without a thirty (30) day 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.

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STATUS OF CONTRACTOR:

- A. CONTRACTOR acknowledges that 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. 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 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.
- B. 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.
- C. 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, State and applicable local income taxes and withholdings. COUNTY shall not be required to make any deductions from compensation payable to CONTRACTOR for these purposes.

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- D. 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.
- E. 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.
- F. 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:
 - 1. Articles of Incorporation;
 - 2. Any and all Amendment of Articles;
 - 3. List of Agency's Board of Directors and Advisory Board;
 - 4. A resolution indicating who is empowered to sign all contract documents pertaining to the agency;
 - 5. By-laws and minutes of Board meetings; and
 - 6. All applicable Federal, State and County licenses and certificates.

$\underline{\mathbf{VI}}$

ADMINISTRATIVE CHANGE IN STATUS:

- A. 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.
 - 1. A change in status is defined as, but is not limited to, a name change not amounting to a change of ownership, moving a facility's service location within

the same region, closing a facility with services being offered in another already existing contracted facility, or change in services offered without an increase to the Agreement maximum. Other changes to the Agreement may result in a more formal Agreement amendment. Involuntary changes of status due to disasters should be reported to the COUNTY as soon as possible.

- 2. CONTRACTOR is responsible for providing to the COUNTY, annually, at the beginning of each fiscal year and upon execution of the CONTRACTOR'S Agreement, emergency and/or after hour contact information for the CONTRACTOR'S organization. CONTRACTOR'S emergency and/or after hour contact information shall include, but is not limited to, first and last name of emergency and/or after hour contact, telephone number, cellular phone number, and applicable address(s). CONTRACTOR shall provide this information to the COUNTY at the same time the CONTRACTOR provides the COUNTY with annual insurance renewals and/or changes to insurance coverage.
- 3. CONTRACTOR shall be responsible for updating this information, immediately and in writing, when changes in CONTRACTOR'S emergency and/or after hour contact information occurs during the fiscal year or prior to the end of the fiscal year. Written CONTRACTOR'S updates of this information shall be provided to the COUNTY in accordance with Section XXXI, NOTICES, of this Agreement.
- 4. 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:

- A. CONTRACTOR may not delegate the obligations hereunder, either in whole or in part, without prior written consent of COUNTY; provided, however, obligations undertaken by CONTRACTOR pursuant to this Agreement may be carried out by means of subcontracts, provided such subcontracts are approved in writing by the 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 the DIRECTOR may require.
- B. No subcontract shall terminate or alter the responsibilities of CONTRACTOR to COUNTY pursuant to this Agreement.
- C. 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.
- D. Any change in the corporate or business structure of CONTRACTOR, such as a change in ownership or majority ownership change resulting in a change to the Federal Tax ID, shall be deemed an assignment for purposes of this paragraph.

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VIII

ALTERATION:

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

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LICENSES:

- A. CONTRACTOR warrants and certifies that it has all applicable, appropriate, and necessary licenses, permits, approvals, certifications, waivers, and exemptions necessary to provide the services outlined herein, for its business to operate, and for personnel to provide services hereunder, and as required by all applicable laws and regulations set forth by the Federal, State, County and local governments, and all other appropriate governmental agencies.
- B. CONTRACTOR agrees to maintain these licenses, permits, approvals, certifications, waivers, and exemptions, etc. throughout the term of this Agreement.
- C. 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.

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INDEMNIFICATION:

CONTRACTOR shall indemnify and hold harmless all Agencies, Districts, Special Districts, and Departments of the County of Riverside, their respective directors, officers, Board of Supervisors, employees, agents, elected and appointed officials and representatives from any liability whatsoever, based or asserted upon services of CONTRACTOR, its agents, employees, or subcontractors, arising out of or in anyway relating to this Agreement, for property damage, bodily injury, or death or any other element of damage of any kind or nature resulting from any acts or failure to act or omission on the part of the CONTRACTOR, its directors, officers, agents, employees or subcontractors hereunder, and CONTRACTOR shall defend, at its sole expense, including but not limited to attorney fees, all Agencies, Districts, Special Districts, and Departments of the County of Riverside, their respective directors, officers, Board of Supervisors, employees, agents, elected and appointed officials and representatives in any legal claim or action based upon such alleged acts, failure to act or omissions.

COUNTY shall indemnify Contractor against any claim, demands, or liability arising from damage to property, and injuries to persons, which may arise out of or because of County's performance of its duties under this Agreement, or failure to perform, but only in proportion to and to the extent such claim demands, damages or liability are caused by, or result from the negligent or intentional acts or omissions of County, its officers, agent, or employee.

XI

INSURANCE:

Without limiting or diminishing the CONTRACTOR'S obligation to indemnify or hold harmless the County of Riverside and the State of California, CONTRACTOR shall

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procure and maintain or cause to be maintained, at its sole cost and expense, the following insurance coverage during the term of this Agreement. With respect to the insurance section only, the COUNTY herein refers to the County of Riverside, its Agencies, Districts, Special Districts, and Department, their respective directors, officers, Board of Supervisors, employees, elected or appointed officials, agents, or representatives as Additional Insureds.

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. Policy shall name the COUNTY as Additional Insured. 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. Policy shall name the COUNTY as Additional Insured.

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 \$2,000,000 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

- 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 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 Risk Manager, CONTRACTOR'S carriers shall either; 1) reduce or eliminate such deductibles or self-insured retentions with respect to 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

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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, 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 the Agreement upon which COUNTY may immediately terminate or suspend this Agreement.

XII

LIMITATION OF COUNTY LIABILITY:

Notwithstanding any other provision of this Agreement, the liability of COUNTY shall not exceed the amount of funds appropriated in the support of this Agreement by the California Legislature.

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. Employment

1. Affirmative Action shall be taken to ensure that applicants are employed, and that employees are treated during employment, without regard to their race,

religion, color, sex, national origin, age, sexual preference, or disabilities. Such affirmative action shall include, but not be limited to the following: employment, upgrading, demotion or transfer; recruitment or recruitment advertising; layoff or termination; rate of pay or other forms of compensation; and selection for training, including apprenticeship. There shall be posted in conspicuous places, available to employees and applicants for employment, notices from 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 disabilities.
- 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 worker's 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 contracts involving State funds.

B. Services, Benefits, and Facilities

- CONTRACTOR certifies that CONTRACTOR and any or all of its Subcontractors shall not unlawfully discriminate in the provision of services because of race, color, creed, national origin, sex, age, or physical, sensory, cognitive, or mental disability as provided by state and federal law and in accordance with Title VI of the Civil Rights Act of 1964 [42 USC 2000(d)]; Age Discrimination Act of 1975 (42 USC 6101); Section 504 of the Rehabilitation Act of 1973 (29 USC 794) (as amended); Education Amendments of 1972 (20 USC 1681); Americans with Disabilities Act of 1990 (42 USC 12101); Title 45, CFR, Part 84; provisions of the Fair Employment and Housing Act (Government Code Section 12900 et. Seq.) and regulations promulgated hereunder (Title 2, CCR, Section 7285.0 et seq.); Title 2, Division 3, Article 9.5 of the Government Code commencing with Section 11135; and Chapter 6 of Division 4 of Title 9 of the CCR, commencing with Section 10800.
- 2. For the purpose of this Agreement, discrimination on the basis of race, color, creed, national origin, sex age, or physical, sensory, cognitive, or mental disability includes, but is not limited to, the following: denying an otherwise eligible individual any service or providing benefit which is different, or is provided in a different manner or at a different time, from that provided to others under this Agreement; subjecting any otherwise eligible individual to segregation or separate treatment in any matter related to the receipt of any services; restricting an otherwise eligible individual in any way in the

enjoyment of any advantages or privilege enjoyed by others receiving any services or benefit; and/or treating any individual differently from others in determining whether such individual satisfied any admission, enrollment, eligibility, membership, or other requirement or condition which individuals must meet in order to be provided any service or benefit.

- 3. 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 the 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 California Department of Health Care Services. CONTRACTOR will maintain a written log of complaints for a period of seven (7) years.
- 4. CONTRACTOR will maintain a safe facility in accordance with Title 9, Division 1 of the California Code of Regulations. CONTRACTOR will store and dispense medications in compliance with all applicable State and Federal laws and regulations and COUNTY'S "Medication Guidelines," available from the COUNTY Quality Improvement- Outpatient Division.

- 5. A completed ADA /504 Self-Evaluation (Access to Services) Plan, including a Checklist for Accessibility must be submitted as a part of the application process requirement for contracting.
- 6. CONTRACTORS that relocate must find space that is accessible.

 CONTRACTORS that renovate their existing space must meet accessibility standards in order to maintain funding, certification or licensure.
- 7. CONTRACTORS that are not currently accessible to people with disabilities must have a written and posted referral policy and plan developed in conjunction with the county mental health program administration and consumers must be provided with a copy of this policy.
- 8. Existing facilities must provide a current written ADA/504 (Access to Services) Plan to the County at each renewal, including a current Disability Admission and Referral Policy developed in conjunction with the County Mental Health Administration.

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. No qualified person with a disability shall, on the basis of their disability be excluded from participation, be denied the benefits of, or otherwise be subjected to discrimination under any program, service

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activity or employment opportunity provided by programs licensed or certified under this Agreement.

XVI

REPORTS:

- A. CONTRACTOR shall participate in the COUNTY'S Management Information System (MIS) as required by the Director, or his authorized designee. CONTRACTOR shall report to the program, applicable client and staff related data regarding the CONTRACTOR'S program by the fifth (5th) working day of the following month.
- B. CONTRACTOR shall provide the COUNTY with applicable reporting documentation as specified and/or required by the COUNTY, State Department of Mental Health and Federal guidelines. COUNTY may provide additional instructions on reporting requirements.
- C. 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 will 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

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- 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 applicant's mailing address
 - (iii) Any change of the administrator of the facility. Such notification shall include the new administrator's name, address and qualifications.
- D. 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.
- E. 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.

- F. 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>XVII</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 104-191, enacted August 21, 1996, Title 42 Code of Federal Regulations, Part 2, 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.

XVIII

CONFIDENTIALITY:

CONTRACTOR shall maintain the confidentiality of all client 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 client 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.

- A. The CONTRACTOR shall protect from unauthorized disclosure, confidential client 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 client, clients' legal representative or as permitted by Federal or State law, to anyone other than the COUNTY or State without prior valid authorization from the client or clients' 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, 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 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

If the security breach requires notification under Civil Code section 1789.82, CONTRACTOR agrees to assist the COUNTY in any way, in any action pertaining to such unauthorized disclosure required by applicable, Federal, State and/or County laws and regulations.

F. 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 COUNTY; 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.

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G.	The CONTRACTOR shall implement strong access controls and other security
	safeguards and precautions as noted in the following to restrict logical and physical
	access to confidential, personal (e.g. PHI) or sensitive data to authorized users only.
	The CONTRACTOR shall enforce the following administrative and technical
	password controls on all systems used to process or store confidential, personal, or
	sensitive data:

1. Passwords must not be:

- a. Shared or written down where they are accessible or recognizable by anyone
 else, such as taped to computer screens, stored under keyboards, or visible
 in a work area;
- b. A dictionary word; and
- c. Stored in clear text

2. Passwords must be:

- a. Eight (8) characters or more in length
- b. Changed every 90 days
- c. Changed immediately if revealed or compromised
- d. Composed of characteristics from at least three of the following four groups from the standard keyboard:
 - (i) Upper Case letter (A-Z);
 - (ii) Lower case letters (a-z);
 - (iii) Arabic numerals (0 through 9); and
 - (iv) Non-alphanumeric characters (punctuation symbols)

- 1. Network-based firewall and/or personal firewall;
- 2. Continuously updated anti-virus software; and
- 3. Patch management process including installation of all operating system/software vendor security patches.
- The CONTRACTOR shall utilize a commercial encryption solution that has received FIPS 140 –2 validation to encrypt all confidential, personal, or sensitive data stored on portable electronic media (including, but not limited to, CDs and thumb drives) and on portable computing devices (including, but not limited to, laptop and notebook computers). The CONTRACTOR shall not transmit confidential, personal, or sensitive data via-e-mail or other internet transport protocol unless the data is encrypted by a solution that has been validated by the National Institute of Standards and Technology (NIST) as conforming to the Advanced Encryption Standard (AES) Algorithm or Triple DES.
 - 1. Mitigation of Harmful Effects The CONTRACTOR shall mitigate, to the extent practicable, any harmful effect that is known to CONTRACTOR of a use or disclosure of PHI by CONTRACTOR or its subcontractors in violation of the requirements of these
 - 2. Employee Training and Discipline

Provisions.

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The CONTRACTOR shall train and use reasonable measures to ensure compliance with the requirements of these Provisions by employees who assist in the performance of functions or activities on behalf of COUNTY under this Agreement and use or disclose PHI; and discipline such employees who intentionally violate any of these Provisions, including termination of employment.

3. Disclaimer

COUNTY makes no warranty or representation that compliance by CONTRACTOR with these Provisions, HIPAA or HIPAA regulations will be adequate or satisfactory for CONTRACTOR's own purposes or that any information in CONTRACTOR's possession or control, or transmitted or received by CONTRACTOR, is or will be secure from unauthorized use or disclosure. CONTRACTOR is solely responsible for all decisions made by CONTRACTOR regarding the safeguarding of PHI.

4. Interpretation

The terms and conditions in these Provisions shall be interpreted as broadly as necessary to implement and comply with HIPAA, the HIPAA regulations and applicable State laws. The parties agree that any ambiguity in the terms and conditions of these Provisions shall be resolved in favor of a meaning that complies and is consistent with HIPAA and the HIPAA regulations.

CONTRACTOR shall require all its officers, employees, associates, and agents providing services hereunder to acknowledge, in writing, understanding of and

agreement to comply with all confidentiality provisions as set forth in this Agreement.

J. For the purposes of the above paragraphs, identifying information is considered to be any information that reasonably identifies an individual in their past, present, or future physical or mental condition. This includes, but is not limited to, any combination of the person's first and last name, address, Social Security Number, date of birth, identifying number, symbol, or other identifying particulars assigned to the individual, such as finger or voice print, or photograph.

XIX

RECORDS/INFORMATION AND RECORD RETENTION:

All records shall be available for inspection by the designated auditors of COUNTY, State Department of Justice, State Department of Health Care Services, 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 clients. 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 (3) years after final payment under the Agreement.

A. Medical Records

CONTRACTOR shall adhere to the licensing authority, the State Department of Social Services, the State Department of Health Care Services and Medi-Cal documentation standards, as applicable. CONTRACTOR shall maintain adequate medical records on each individual patient which includes 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.

B. 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. All such records shall be available for inspection by the designated auditors of COUNTY or State at reasonable times during normal business hours.

C. Financial Record Retention

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. Patient/Client Record Retention

Patient/Client records shall be maintained and retained by CONTRACTOR for a minimum of seven (7) years following discharge of the client. Records of minors shall be kept for seven (7) years after such minor has reached the age of eighteen (18) years. Thereafter, the client file is retained for seven (7) years after the client has been discharged from services.

E. Shared Records/Information

CONTRACTOR and COUNTY shall maintain a reciprocal shared record and information policy, which allows for sharing of client records and information between CONTRACTOR and COUNTY. Either COUNTY or CONTRACTOR shall not release these client records or information to a third party without a valid authorization.

F. Client Records

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 the 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. Records Inspection

All records shall be available for inspection by all applicable and designated Federal, State, and COUNTY auditors during normal business hours. Records shall include,

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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 three (3) years pertaining to individuals over the age of eighteen (18) years of age related documentation after final payment under Agreement.

\underline{XX}

STAFFING:

CONTRACTOR shall comply with the staffing expectations as required by state licensing requirements and as may be additionally described in Exhibit A. Such personnel shall be qualified, holding appropriate license(s)/certificate(s) for the services provided in accordance with the WIC Section 5751.2, the requirements set forth in Title 9 of the California Code of Regulations (CCR), the Business and Professions Code, State Department of Health Care Services policy letters, and any amendments thereto. CONTRACTOR shall maintain specific job descriptions/duty statements for each position describing the assigned duties, reporting relationship, and shall provide sufficient detail to serve as the basis for an annual performance evaluation. 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 and experience 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:
 - a. Resume, employment application, proof of current licensure, all applicable employment related certifications, registration;
 - b. List of all applicable trainings during time of employment to present.
- B. During the term of this Agreement, CONTRACTOR with fifteen (15) or more employees will designate a Disability Access Coordinator. The Access Coordinator is responsible for the development and implementation of the program's ADA/ 504 Self-Evaluation Plan and Annual Updates.

- C. CONTRACTOR shall institute and maintain an in-service training program of treatment review and case conferences and/or prevention strategies as appropriate, in which professional and other appropriate personnel shall participate.
- D. 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.
- E. 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.
- F. CONTRACTOR shall follow all 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.

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G.

H. CONTRACTOR shall be responsible for checking, on a quarterly basis, the Office of the Inspector General (OIG) website (http://www.oig.hhs.gov) to validate that none of CONTRACTOR'S staff are on the OIG or Medi-Cal list of excluded individuals to provide direct services to COUNTY clients. CONTRACTOR shall notify, in writing within thirty (30) calendar days, if and when any CONTRACTOR'S personnel are found listed on this site and what action has been taken to remedy the matter.

I.

CONTRACTOR is responsible for ensuring that any of its staff members or personnel in which they employ is licensed or certified to practice, and is in possession of a valid, current license or certificate to practice or to provide mental health or other required services, to COUNTY consumers. CONTRACTORS who receive Medi-Cal funds are required to validate that their staff are not on either the OIG Exclusion List at the website http://exclusions.oig.hhs.gov/search.aspx and the Medi-Cal List of Suspended or Ineligible Providers list at http://www.medi-cal.ca.gov. In addition, CONTRACTORS providing Medi-Cal billable services must have, and provide in writing to COUNTY, pursuant to Section XXXI, NOTICES, of this Agreement, a valid rendering site and/or individual provider NPI and taxonomy code that corresponds with the work they are performing. Any updates or changes must be made by the CONTRACTOR to the National Plan & Provider Enumeration System (NPPES) within thirty (30) days. CONTRACTOR may establish their own procedures to ensure adherence to these requirements.

XXI

CULTURAL COMPENTENCY

CONTRACTOR shall provide services pursuant to this Agreement in a culturally competent manner by recruiting, hiring, maintaining and providing staff who can deliver services in the manner specified to the diverse multicultural 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 disabled.

CONTRACTOR shall document its efforts to provide multi-cultural services in the manner specified. Documentation may include, but is 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, persons with disabilities.

- 1. 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 to be 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 beneficiaries 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 3 a 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.
- h. Client related information translated into the various languages of the diverse populations served.
- 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.
- 3. CONTRACTOR shall make available 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 health medications, and cultural beliefs and practices which may influence the client's mental health condition.
- 4. 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 http://www.rcdmh.org 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

CONTRACTOR agrees to meet with COUNTY'S Cultural Competency
 Program Manager, as needed by the CONTRACTOR and as coordinated by

the COUNTY, to determine and implement cultural competency activities that shall include, but is not limited to, compliance with the cultural competency requirements outlined in Section XXI of this Agreement.

- 6. COUNTY will provide technical assistance to CONTRACTOR in the areas of cultural competency as needed and requested by CONTRACTOR.
- 7. CONTRACTOR will be responsible for participating in cultural competency trainings as required by the COUNTYS Cultural Competency Plan. The following is a partial list of annual cultural competency trainings and topics that may be available through the COUNTY to assist CONTRACTORS with meeting training requirements, though capacity will be limited: Cultural Formulation; Multicultural Knowledge; Cultural Sensitivity; Cultural Awareness; Social/Cultural Diversity; Mental Health Interpreter Training; Training Staff in the use of Mental Health Interpreters; Training in the Use of Interpreters in the Mental Health Setting. In order to attend the COUNTY offered trainings, CONTRACTOR must contact the Cultural Competency Manager at the contact information location in subparagraph 4 of paragraph A. in Section XXI, CULTURAL COMPENTENCY.
- 8. CONTRACTOR will be responsible for reporting back to the COUNTY, annually in writing, all cultural competency related trainings that staff members have taken. The following format is recommended:

Name of Training Event	Description of Training	How long and how often attended	Attendance by Service Function	No. of Attendees and Total	Date of Training	Name of Presenter
Example: Cultural Competence Introduction	Overview of cultural competence issues in mental health treatment settings.	Four hours annually	*Direct Services *Direct Services Contractors *Administration *Interpreters	15 20 4 2	1/21/10	John Doe
				Total: 41		

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CONTRACTOR training information shall be submitted via facsimile to 951-358-4792 to the attention of the COUNTY Cultural Competency Program Manager on or before June 30 of each fiscal year.

9. CONTRACTOR is responsible for notifying the COUNTY Cultural Competency Program Manager in writing if the June 30th deadline can not be met. CONTRACTOR will be responsible for requesting an extension from the COUNTY'S Cultural Competency Program Manager. All requests for extensions must be put in writing and mailed or faxed to the COUNTY'S Cultural Competency Program Manager at the contact information listed herein.

XXII

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 every three (3) years at a minimum and/or every time the Notice of Privacy Practices information is updated and/or changed. 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 every three (3) years upon receipt from client or consumer.

XXIII

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.

XXIV

PATIENTS' RIGHTS:

Patients' rights shall be observed by CONTRACTOR as provided in the Health and Safety Code, Sections 11760 through 1184 and Title 9 and Title 22 of the California Code of Regulations (CCR). 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.

XXV

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.

XXVI

DRUG-FREE WORKPLACE CERTIFICATION:

If State funds are utilized to fund this Agreement as specified in Schedule I, the following Drug-Free Workplace requirements shall apply. 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.

- A. 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 substance abuse in the workplace.
 - 2. The CONTRACTORS policy of maintaining a drug-free workplace.
 - 3. Any available counseling, rehabilitation, and employee assistance programs.
 - 4. Penalties that may be imposed upon employees for substance abuse violations.
- C. Provide as required by Government Code Section 8355 (a) that every employee who works on the proposed 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.

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.

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XXVII

TERMINATION PROVISIONS:

- A. Either party may terminate this Agreement without cause, upon sixty (60) days written notice served upon the other party.
- B. Termination does not release CONTRACTOR from the responsibility of securing Protected Health Information (PHI) data.
- 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 immediately due to a change in status, delegation, assignment or alteration of the Agreement not consented to by COUNTY.
- 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:

1.	Temporarily	withhold	payments	pending	correction	of the	deficiency
			P	P			

- 2. Disallow (that is deny funds) for all or part of the cost or activity not in compliance.
- 3. 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, CONTRACTOR shall:
 - Stop all services under this Agreement on the date, and to the extent specified, in the Notice of Termination;
 - 2. Continue to provide the same level of care as previously required under the terms of this Agreement until the date of termination;
 - 3. 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;
 - 4. If appropriate, assist COUNTY in effecting the transfer of clients in a manner consistent with the best interest of the clients' welfare;
 - 5. 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;

- 6. 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
- 7. 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;
- 8. 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 thirty-two (32) 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 no
	limited to, financials, services, billing, cost report, etc. In such instances of
	settlement and/or litigation, CONTRACTOR will be solely responsible for
	associated costs for their organizations' legal process pertaining to these matters
	including, but not limited to, legal fees, documentation copies, and legal
	representatives.

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.

XXVIII

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, the quality of patient services being rendered, and/or the withholding of CONTRACTOR'S payments due to instances such as material non-compliance or audit disallowances or both, the CONTRACTOR may file a written protest with the appropriate Program/Regional Administrator of the COUNTY. CONTRACTOR shall continue with the responsibilities under this Agreement during any dispute. The Program/Regional Administrator shall respond to the CONTRACTOR in writing within ten (10) working days. If the CONTRACTOR is dissatisfied with the Program/Regional Administrator's response, the

CONTRACTOR may file successive written protests up through the Department of Mental Health's administrative levels of Assistant Director, and (finally) DIRECTOR. Each administrative level shall have twenty (20) working days to respond in writing to the CONTRACTOR. The DIRECTOR will have the final authority to rescind, modify or uphold the finding/decision.

XXIX

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.

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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.

FY 2014/2015

1	<u>XXXI</u>
2	NOTICES:
3	All correspondence and notices required or contemplated by this Agreement shall be
4	delivered to the respective parties at the addresses set forth below and are deemed
5	submitted one day after their deposit in the United States mail, postage prepaid:
7	CONTRACTOR: COUNTY:
8 9 10	TELECARE CORPORATION 1080 MARINA VILLAGE PARKWAY, SUITE # 100, ALAMEDA, CA 94501 ATTENTION: MS. FAITH RICHIE, SENIOR VICE PRESIDENT, DEVELOPMENT RIVERSIDE COUNTY BOARD OF SUPERVISORS 4080 LEMON STREET RIVERSIDE, CA 92501
11 12	
13	<u>INFORMATIONAL COPY TO:</u> RIVERSIDE COUNTY
14	DEPARTMENT OF MENTAL HEALTH P.O. BOX 7549
15 16	RIVERSIDE, CA 92513-7549 ATTENTION: PROGRAM SUPPORT
17	XXXII
18	MEETINGS:
19	As a condition of this Agreement, CONTRACTOR shall agree to attend the mandatory all
20	provider meeting as scheduled by the County Program Administrator/Manager or Designee.
21	Appropriate level of CONTRACTOR'S staff to attend this meeting shall be at Program
23	Director level or above. Critical information and data is disseminated at these meetings and
24	will not be provided at any other time.
25	

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				EXHIBIT A	
				HXHIKILA	4

Telecare Corporation

Psychiatric Health Facility (PHF) and Crisis Stabilization Unit (CSU), Indio, CA
Fiscal Year 2014-2015:

PROVIDER NAME:

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TELECARE CORPORATION

DEPT. ID/PROGRAM:

4100202293/74700/83550/530280

RCDMH MISSION STATEMENT

Riverside County Department of Mental Health (RCDMH – referred to as COUNTY) exists to provide effective, efficient, and culturally competent community-based services that enable severely mentally disabled adults and older adults, substance abusers, and individuals on conservatorship to achieve and maintain their optimal level of healthy personal and social functions.

THE FACILITY

The 32,000 square foot facility is constructed pursuant to Acute Psychiatric Hospital standards. The facility includes: a kitchen; medical records area; Agreement staff offices, storage areas and other support services areas. The facility houses four distinct programs:

- 1. A 24/7 psychiatric crisis stabilization/urgent care that is 5150 designated for involuntary mental health care;
- 2. A 16 bed unit that is 5150 designated for acute inpatient treatment, with its own nurse's station;
- 3. Anka Behavioral Healthcare's 15 bed Crisis Residential Treatment (CRT) unit, a fully contained and totally separate facility not addressed in this Agreement;
- 4. Offices assigned to County Outpatient services, staffed by County employees and fully separate from the services described and paid for under this Agreement.

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SERVICES TO BE PROVIDED BY THE CONTRACTOR:

CONTRACTOR shall operate the facility and be open for business 24 hours per day, 365 days per year.

- CONTRACTOR shall provide the following service programs:
- 1) PSYCHIATRIC HEALTH FACILITY (PHF): This is a 16 bed adult Psychiatric Health Facility with an intensive treatment program licensed by the California Department of Mental Health as an acute inpatient program, and designated by RCDMH as a 5150 facility providing involuntary psychiatric care.
- 2) CRISIS STABILIZATION UNIT (CSU) This Urgent Care service provides less than 24-hour care to consumers of all ages. This service either stabilizes consumers sufficiently to return them to the community; or admits them to an appropriate psychiatric inpatient facility, in less than 24 hours.

Crisis Stabilization – Urgent Care is defined by the State Department of Mental Health Rehabilitation Option Manual as an "immediate face-to-face response lasting less than 24 hours, to or on behalf of an individual exhibiting acute psychiatric symptoms, provided in a 24 hour health facilityas allowable under the facility licensure. The goal is to avoid the need for inpatient services by alleviating problems which, if not treated, present an imminent threat to the individual or other's safety or substantially increase the risk of the individual becoming gravely disabled. Service activities include, but are not limited to assessment, evaluation, collateral contacts, medication support services, crisis intervention, and therapy. "

GENERAL SERVICES

CONTRACTOR is to provide a caring, qualified staff, a pleasing environment and proven treatment programs. Since a single therapeutic approach does not work for everyone, program offerings are based on the needs of the consumers, including group, individual and family counseling, behavior modification, a variety of therapeutic and recreational activities and one to

one staff to consumer interactions. The total therapeutic approach is solidly anchored in a well-supervised milieu. The goal of treatment is to place consumers in a less restrictive level of care at a lower cost as soon as the individual achieves an appropriate stability of psychiatric symptoms.

CONSUMER CARE

The CONTRACTOR agrees to provide quality care of consumers suffering from mental disorders, including meals, services of a dietician, medical care, medication, general nursing, social and psychological services, psychiatric care, recreational and occupational therapy.

MEDICAL CARE

Arrangements for medical care services when medically necessary, including the following:

- Clinical laboratory services- upon admission will include CBC, UA, RPR, SMA-20 PREGNANCY, lipid panel, and DRUG SCREEN. In addition thyroid panels, medication levels and other tests as needed and necessary for psychiatric treatment are expected.
- Radiology services as required for the treatment of the psychiatric condition or at the discretion of the treating physician.
- Physical therapy as required for the diagnosis and/or treatment of the psychiatric condition.
- Medical testing as required for the diagnosis and/or treatment of the psychiatric condition including EKG, EEG AND EMG.
- Speech and Hearing evaluation, as required for the diagnosis/treatment of the psychiatric condition.
- Psychological testing, when ordered by the Psychiatrist. Psychological testing will conducted by a licensed psychologist.

- Individual, group, and family therapy or counseling will be provided by professional and paraprofessionals within their specific scope of practice.
- All medical care will be coordinated with the current outpatient medical care the consumer has been receiving.

MEDICATION SERVICES

Medication services include the medications used by the consumers while in the facility, and medication taken while on leave from the facility.

Medication will be prescribed in accordance with "RCDMH Medication Guidelines". All consumers will receive on-going medication assessment and education provided by an M.D. or licensed nurse.

Consumers discharged from the PHF will be given a two (2) week supply of psychotropic medication(s). Those discharged from the CSU will receive a paper prescription for two (2) weeks as prescribed by the attending psychiatrist. For consumers being discharged from either PHF or CSU and being referred to the Crisis Residential Unit, consumers will be discharged with three days of medication.

Uninsured consumers will be prescribed medication that they can afford to acquire following discharge; the County does not pay for outpatient medication for medically indigent clients. Medi-Cal beneficiaries will be discharged with medication on the Medi-Cal formulary. All other consumers will be discharged on medication listed on the formulary that is covered by their health insurance.

All consumers who are prescribed medication will receive medication education provided by an M.D. or licensed nursing personnel prior to discharge from the facility to the community. Discharge medication may be withheld if the MD feels that discharging the consumer with medication is contraindicated, or unless other discharge medication orders are necessary to comply with requirements of agencies to which consumer are discharged and agreeable to the discharging physician.

1	STAFFING
2	At the minimum, the staffing level shall comply with minimum staffing requirements as defined
3	by the licensing agency, the California Welfare and Institutions code and the California Code.
4	The CONTRACTOR shall increase staffing levels above the minimum requirements, as needed
5	to safely serve the needs of the target population.
6	A comprehensive psychosocial history will be completed by a Qualified Mental Health
7	Professional within their scope of practice.
8	Nursing staff shall be composed of a sufficient number and competence level to ensure a safe
9	and therapeutic milieu. CONTRACTOR shall have the nursing staff capability to serve severely
	disturbed consumers with one to one supervision and 15-minute checks as ordered by the
10	Psychiatrist.
11	Nursing staff shall provide 24-hour supervision of the consumer in such matters as eating,
12	personal hygiene, dressing, consumer behavior, and taking prescribed medication. Nursing staff
13	will orient the consumer to the personnel and environment of the unit.
14	A comprehensive nursing assessment will be completed at admission.
15	Licensed Nursing staff shall be responsible for the administration of medications as prescribed
16	by the physician and documentation of same.
17	CONTRACTOR will maintain contracts with a medical laboratory, pharmacy and a portable x-
18	ray company for service available on a 24-hour basis.
19	Licensed nurses will be specifically trained to administer psychoactive medication through the
	use of medication tests and simulated practicum. Medications may be given either orally or by
20	injection. Medication education will be considered a crucial aspect of medication dispensing.
21	Should the administering nurse question a medication order, or the appropriateness of the
22	medication, or observe any untoward effect of the prescribed medication, the nurse will notify
23	the prescribing physician or the Medical Director immediately, and before further administration
	of the medication

CONTRACTOR's staff will perform the necessary administrative and support services as required under this Agreement, and will be staffed with sufficient personnel to meet required timelines (avoid late data entry, e.g.).

The COUNTY shall approve the weekly staffing pattern at the inception of the contract period and shall meet and confer with CONTRACTOR quarterly thereafter to discuss the continued adequacy of that staffing ratio. The County reserves the right to require a higher staffing ratio or more skilled staff than is required in the state regulations, which will require a reasonable and commensurate increase in the payment under this Agreement.

The CONTRACTOR shall provide the COUNTY with a staff roster and work schedule each month. This will include accounting for the number of hours of MD time spent in providing consumer care, by unit (PHF and CSU), date, and physician name.

PSYCHIATRIC SERVICES

CONTRACTOR shall employ Psychiatrists in sufficient training and number to meet the needs of the PHF and CSU. Assessment to establish medical necessity, psychiatric history, diagnosis and medications are the responsibility of the attending psychiatrist. Collaboration with the Outpatient psychiatrist is expected and will be documented.

LEGAL PROCEEDINGS

CONTRACTOR will provide psychiatric/staff testimony in all legal proceedings required for the institutionalization and treatment under the terms of this Agreement, including Reise hearings, ex-parte hearings, Writs, conservatorships and certifications.

AFTERCARE INSTRUCTIONS

All consumers shall have a written aftercare plan and appointment for outpatient services, as coordinated with the COUNTY. The aftercare instructions shall include the following:

1	1 consumer name,
2	2 admission date,
3	3 discharge date and time,
4	4 DSM IV diagnosis (5 axis), including substance abuse disorders that are evident;
5	5 medications (including quantity provided and explanation of dosage),
6	6 Nurse/M.D. signature,
7	7 follow up appointments and referrals,
8	8 expected course of recovery,
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10	STAFF SUPERVISION AND TRAINING
11	CONTRACTOR shall meet all supervision and training requirements as required by state
12	licensing. In addition, the CONTRACTOR shall provide the staff with on-going relevant training
13	to ensure a high quality of consumer care. At a minimum, staff will receive on-going training on
14	mental health issues, management of assaultive behavior, CPR, first aid and involuntary
15	treatment issues.
16	An orientation of sixteen (16) hours, consisting of an explanation of the goals and objectives of
17	the program, a description of the individual departments, explanation and demonstration of fire,
18	safety, emergency, Patients Rights, confidentiality, and policies and procedures related to
	HIPAA regulations, and infection control requirements and procedures will be provided to every
19	employee. Additional orientation to the Treatment Planning process and documentation
20	requirements will be provided for all licensed and clinical staff members.
21	Additional orientation will be provided for all staff involved with direct consumer care, and will
22	include:
23	• assessment procedures,
24	risk management guidelines and community standards,

- consumer registration and financial assessment procedures,
- treatment interventions,
- management of assaultive behavior,
- denial of patients' rights,
- family engagement,
- discharge planning, information and referral resources, and transfer procedures;
- documentation requirements.

All staff having direct consumer contact will be trained in seclusion and restraint techniques as approved by the County. An annual in-service of four (4) hours will be required of all employees to re-emphasize the goals and objectives of the programs, fire, safety, emergency, Patients Rights and infection control requirements and procedures.

Formal education and training will occur at in-service and continuing education sessions offered by the CONTRACTOR's designee with additional training provided by department heads, physicians and consultants. The CONTRACTOR is responsible for designing and conducting the orientation, reorientation, in-service and continuing education for all staff, students and volunteers.

Formal education and training will occur at in-service and continuing education sessions offered by the Director of Quality Management and Education (DQME) with additional training provided by department heads, physicians and consultants.

A DQME shall possess education and experience appropriate for the duties and consistent with the job description reviewed and approved by the County. The DQME will have primary responsibility to conduct mandatory orientation and annual in-service education to staff including basic nursing and behavioral techniques as well as modifying staff behavior with continuing training and in-service education that may result from quality assurance audits. CONTRACTOR shall provide to the COUNTY a quarterly comprehensive calendar of all training occurring during the period and listing of staff in attendance at each training activity.

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CONTRACTOR shall provide an organizational chart that includes all staffing titles. Staffing titles and names will be provided to the department head level. This organizational chart will accurately reflect the chain of command each month. The facility Administrator has overall responsibility for the facility.

Job descriptions, including minimum qualifications for employment and duties performed for all personnel shall be on file with the administrator. Individual department job descriptions will also be available in each department.

CONTRACTOR shall provide to the COUNTY a monthly staff report reflecting all personnel transactions for the month. This will include new hires, terminations and change of employee status.

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CULTURAL COMPETENCE

CONTRACTOR shall promote implementation of regular cultural awareness programs for both consumers and staff believing that such programs dispel ignorance, shape values and behaviors, and heighten acceptance and sensitivity in responding to cultural and ethnic differences. The facility shall affirmatively seek a bilingual employee compliment and translators will be provided for any non-English speaking consumer. A bilingual/bicultural management staff will

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which addresses treatment and social services. Due to the high incident of monolingual Spanish speaking consumers in the area being served, the CONTRACTOR shall ensure Spanish-speaking staff is present in both the PHF and the CSU at all times.

be sought. There will be a written policy on service to consumers who do not speak English

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The program shall treat adults of any ethnic or ancestral group, race, sex, sexual orientation, religion, or national origin and will provide culturally oriented programming for these groups, as they are present in the facility.

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PATIENT FINANCIAL INFORMATION AND BILLING:

The CONTRACTOR will bill consumers and their health insurance as described in Exhibit C. Financial liability for all services will be explained and consumer/guardian will sign indicating understanding of the charge for care and agreement to payment for services rendered. Additional advisement will be provided during the stay as required by Statute. Consumers are expected to pay for services rendered, and CONTRACTOR will bill consumers who are self-pay, have private insurance, and/or Medicare (with or without Medi-Cal). The COUNTY will bill Medi-Cal for those consumers with Medi-Cal. For consumers who have Medicare and Medi-Cal ("Medi-Medi"), the CONTRACTOR is required to bill Medicare first and acquire a notice of denial of payment from Medicare, and provide that documentation to the COUNTY, so the COUNTY can bill Medi-Cal. The CONTRACTOR will bill consumers for services as directed by the COUNTY, including procedures for writing off bad debt. The CONTRACTOR will not send unpaid bills to collection agencies.

PATIENTS RIGHTS

All consumers shall be advised of their rights upon admission and given a Patients Rights handbook in a language or modality that the consumer understands. This information must be documented in the medical record. Patient's Rights Posters, along with the Patients Rights Advocate's telephone phone number and address, shall be prominently posted on each unit in public view. Upon or prior to admission, the CONTRACTOR shall inform the consumer and/or guardian of their individual rights as well as the rules and regulations of the program. The facility will comply with CAC, Title 9 requirements for emergency restraint and/or seclusion. Restraint and seclusion rooms will be maintained in a state of readiness for possible use at all times.

CONTRACTOR shall maintain a policy of equal access to the treatment and services for all applicants meeting admission criteria.

1	CONTRACTOR shall ensure that all consumers who appear to meet criteria for urgent care
2	assessment will be assessed, and the assessment will be documented
3	CONTRACTOR shall provide access to the Patients Rights program staff to the facility,
4	consumers and medical records to carry out the provisions of the Welfare and Institutions Code,
5	section 5500, for the purposes of monitoring and program review and 5150 and 5250
6	designation.
7	CONTRACTOR shall develop, implement and provide copies of the policies and procedures to
8	the COUNTY for the following areas:
9	Patient's Rights; Seclusion and Restraint; Denial and Restoration of Patients Rights; Reporting
10	of Denial of Patients Rights; ECT; Certification Review Hearing; Informed Consent for
11	Psychotropic Medication; Smoking: Consensual Sex; Advance Directives; Complaints and
12	Release of Information, HIPAA and Confidentiality Compliance.
13	CONTRACTOR agrees to have facility staff receive in-service training in the areas of
14	PATIENTS RIGHTS, including confidentiality at an initial orientation and again in annual re-
15	orientation.
16	CONTRACTOR agrees to provide required reports on all admissions; legal status changes, Reise
17	capacity hearings and certification hearings
18	CONTRACTOR must maintain 5150 and 5250 designation of the PHF unit and 5150
19	designation of the CSU unit as a condition of the Agreement.
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21	MEAL PREPARATION
22	The Food Service Department will provide food of the quality and quantity to meet each
23	consumer's needs in accord with the physician's orders, and to meet recommended daily dietary
24	allowances. These nutritionally complete meals shall be served daily, with no more than a 14-

1	hour span between the last meal of the day and the first meal of the following day. Between-mea
2	feeding shall be provided as required and late evening nourishment shall be offered to all
3	residents unless contraindicated. Consumer food preferences shall be taken into consideration.
4	When religious or cultural restrictions are present, alternative meals will be prepared (e.g. kosher
5	style, vegetarian, etc.) Menus shall be planned with consideration for cultural background and
6	food habits of all consumers. All food groups shall be represented and condiments shall be
7	available at all meals unless contraindicated. Regular and therapeutic diet menus shall be
8	prepared in consultation with a registered dietician. Food shall be served attractively, at
9	appropriate temperature, with appropriate eating utensils in a community environment where
10	nutritive values, flavor and appearance are conserved.
11	For PHF consumers, a current profile card shall be maintained on each consumer, indicating diet
12	orders, likes, dislikes, allergies to food, diagnosis and instructions or guidelines to be followed in
13	the preparation and serving of food for that consumer.
14	A current therapeutic diet manual, approved by the consulting dietician with physician input
	shall be readily available to the attending physician, nursing and dietary staff. It shall be
15	reviewed annually and revised as often as necessary.
16	Menus for regular and therapeutic diets shall be written at least one month in advance and posted
17	in the kitchen and on the units at least one week in advance. Changes shall be noted on the
18	posted menus. Menus shall be varied for the same day of the consecutive weeks and shall be
19	adjusted for seasonal variations.
20	Food service storage, preparation, cooking and cleaning areas and equipment shall comply with
21	Federal, State and local public health and sanitation regulations and the Food Service Director
22	shall be responsible for meeting such regulations.
23	CONTRACTOR shall provide the COUNTY copies of all food services inspection reports as
24	they occur.

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DOCUMENTATION OF SERVICES

CONTRACTOR shall maintain appropriate records documenting all of the services provided to or on behalf of consumers. These records shall conform to the requirements of the licensing authority, the State and the Riverside County Department of Mental Health. Medical records will be stored and secured in a way that meets all regulatory requirements.

QUALITY IMPROVEMENT

The facility will adhere to COUNTY reporting requirements as provided in the COUNTY'S State approved Q.I. plan.

Medication Monitoring

To be completed by the CONTRACTOR

2. Peer Review

To be conducted by the CONTRACTOR for Psychiatrists on quarterly basis and submitted to the COUNTY quarterly.

3. Utilization Review, including Appeal Review:

PHF and CSU - will be conducted by the COUNTY

4. Adverse Incident Reporting

The CONTRACTOR shall comply with CA CC&R Title 9, Section 784.5 and Title 22 Section 77036 related to the reporting of unusual occurrences. Additionally, the CONTRACTOR shall report to the COUNTY any adverse incidents. An adverse incident is any event or situation, which in the mind of a reasonable person, jeopardizes or is reasonably considered to be physically or psychologically harmful to consumers, employees, or visitors. Incident Reports are confidential communications and are, as a result, privileged information and need to be identified as such. Reportable adverse incidents include:

1	a. Physical injury to any consumer or clinic visitor requiring medical attention.
2	b. Suicide or suicide attempts
3	c. Homicide.
4	d. Significant injury caused by physical assault/battery by consumer upon another.
5	e. Significant injury caused by physical assaults on consumers, or visitors.
6	f. Significant injury to consumer while at the program.
7	g. Death of consumer.
8	h. State Licensing Reports
9	i. AWOL incidents
10	j. Major damage to COUNTY property
11	k. CONTRACTOR'S errors that result in failure of the CONTRACTOR to meet legal
12	requirements to maintain a consumer's involuntary detention.
13	In addition to adverse incidents, the CONTRACTOR will report to the Program Monitor high
14	profile incidents that will likely result in inquiries to the Department of Mental Health from the
15	State, other County Agencies (Board of Supervisors, DPSS), the press or other community
16	stakeholders.
17	COUNTY staff shall have access to all clinical records and files as needed. CONTRACTOR
18	adverse incident reports shall be made verbally within one hour of the incident to the COUNTY
19	Program Monitor. The CONTRACTOR shall submit a written report to the COUNTY Program
20	Monitor within 48 Hours. The CONTRACTOR shall notify the COUNTY case manager and
21	conservator of the incident within 24 hours. CONTRACTOR must notify Patients Rights office
22	in cases involving abuse. The CONTRACTOR will provide the COUNTY with a copy of all
23	reports submitted to other agencies including other County departments, licensing agencies and
24	law enforcement within 24 hours of the report.

CONSUMER AND FAMILY EMPOWERMENT AND RECOVERY:

In line with the State and County's focus on consumer empowerment and recovery philosophy, the CONTRACTOR shall provide services consistent with a focus on psychosocial rehabilitation treatment, the role the family plays in assisting the consumer in managing their own treatment, and instilling a sense of hope for improved quality of life outcomes. Consumers and their families will be invited and expected to participate actively in all phases of the consumer's treatment, including treatment team meetings, case conferences and discharge planning.

- 1. Consumer Empowerment and Recovery The philosophy of consumer recovery entails a cooperative relationship between consumer and staff with the treatment program focused on assisting consumers to develop their own choices, goals and outcomes. This differs from treatment goals developed by staff and imposed on consumers. This approach motivates consumers to take responsibility for their lives and leads to improved quality of life outcomes.
- 2. Family Empowerment and Recovery Involvement of family and significant others is a crucial in consumers accomplishing their long and short-term goals. The CONTRACTOR will involve the consumer's family and significant others in the services whenever possible and clinically indicated. All consumers and conservators will be encouraged to sign a release of information for family/significant other/support person contact upon admission. The medical record shall reflect inclusion of family members in the recovery process to the fullest extent possible and appropriate.

PROGRAM MONITORING

The COUNTY will provide an onsite Program Monitor under the direction of the RCDMH Desert Regional Administrator. The Program Monitor will be responsible for monitoring contractual compliance, serving as a liaison between the CONTRACTOR and the COUNTY, providing consultation, education and information to the CONTRACTOR and assisting the CONTRACTOR as directed.

The CONTRACTOR shall grant access to the COUNTY Program Monitor to all areas of the facility, meetings, medical records, information and reports referenced within this Agreement.

COUNTY CASE MANAGEMENT SERVICES:

The COUNTY will assign regional program staff to provide PHF discharge planning, case management, act as the liaison between outpatient services and the CONTRACTOR and to assist the CONTRACTOR with individual consumer needs. Case manager(s) will attend and participate in treatment planning meetings. Issues and concerns identified by COUNTY case managers regarding CONTRACTOR performance will be brought to the Program Monitor for resolution.

COUNTY case managers will determine regional assignment, identify any consumer who is an out of county resident, and will be responsible for determining all consumers' current addresses. CONTRACTOR will be responsible for updating consumer addresses within 24 hours of being notified by COUNTY case manager of a change in consumer address.

CONTRACTOR shall allow COUNTY case managers access to all areas of the facility, the consumers, medical records and relevant meetings and conferences.

ANNUAL CONTRACT MONITORING FOR COMPLIANCE:

The COUNTY shall perform formal Agreement monitoring at least annually. The monitoring will include all clinical, fiscal and administrative components. RCDMH will utilize the "Program

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TELECARE CORPORATION
DESERT REGION - PHF & CSU
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Monitoring Team Manual" (PMT) as a tool to monitor the services provided by the 1 CONTRACTOR. 2 3 DISASTER PREPAREDNESS AND RESPONSE 4 CONTRACTOR shall develop and update contingency plans to continue the delivery of services 5 in the event of a man made or natural disaster. In the event that an emergency is declared within 6 Riverside County as a result of a disaster, the CONTRACTOR agrees to cooperate with the 7 COUNTY in the implementation of the Mental Health Services Disaster Preparedness Plan. 8 The CONTRACTOR will conduct joint disaster and emergency response planning with COUNTY regional staff, and shall invite participation by COUNTY staff who works on site at 9 Oasis MH facility in CONTRACTOR'S fire and disaster drills. At a minimum, CONTRACTOR 10 will insure there is sufficient food and water for both staff and consumers for a minimum of four 11 days. 12 13 **CONFLICT OF INTEREST** 14 CONTRACTOR and its employees shall avoid fiduciary conflict of interest in discharge 15 recommendations. CONTRACTOR and its employees shall avoid fiduciary conflict of interest 16 in admission and discharge recommendations, and will comply with conflict-of-interest oversight as determined by the COUNTY. 17 18 19 INDEPENDENT PROVIDERS All services appropriate for assessment, treatment and proper discharge of the consumer are 20 included under this Agreement. Individual providers who are not employees of the facility may 21 bill fees, as appropriate, to third party payers for services rendered to consumers certified under 22

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this Agreement.

LEASE PAYMENTS

By the last day of each month, payment shall be submitted to the Riverside County Department of Mental Health at 4095 County Circle Drive, Riverside, CA 92503, or another site as designated by the COUNTY.

COUNTY shall provide electronic medical record ("ELMR") terminals, initial training and on-

going consultation in the use of the COUNTY's MIS system. CONTRACTOR shall provide

sufficient number and competency of staff to enter data as instructed, within the timeframes

given. CONTRACTOR will enter data regarding consumer identification, financial status,

demographics, episode openings and closings, and services provided. CONTRACTOR will

ensure data regarding episode opening/closing and services on all consumers is entered within

CONTRACTOR is responsible for accuracy and self-monitoring using ELMR reporting tools.

The COUNTY requires accurate, complete and timely entry of all data as a condition of the

Agreement. CONTRACTOR is responsible for accuracy and self-monitoring using ELMR

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MANAGEMENT INFORMATION SYSTEM

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SERVICES PROVIDED BY COUNTY

twenty-four (24) hours of occurrence.

COUNTY shall provide:

reporting tools.

- 1. Training and orientation regarding COUNTY expectations
- 2. Provide monitoring and evaluation of program operation
- 3. Transportation from COUNTY facilities to CONTRACTOR facility
- 4. Cost of ambulance for medical emergencies; and transfer from CSU to other inpatient facilities.
- 5. Utilization review as described in Quality Improvement section

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OTHER SERVICES PROVIDED BY THE CONTRACTOR

The CONTRACTOR shall provide:

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- Food services for consumers as ordered by CONTRACTOR staff.
- Housekeeping services, including linen and supplies
- Disposal of biohazardous waste.

AGREEMENT OUTCOME MEASURES:

Program outcome measures will exist for each program unit.

CONTRACTOR REPORTING REQUIREMENTS:

The following table outlines the data that is required of the CONTRACTOR, the due dates and the location to which it is to be submitted.

REPORT	FREQUENCY	SUBMIT TO
INVOICING	MONTHLY	Program Monitor
STAFF ROSTER	MONTHLY	Program Monitor
STAFF WORK SCHEDULE (by name,	MONTHLY	Program Monitor
job class, shift, and facility, CSU & PHF)		
MD Hours Worked	MONTHLY	Program Monitor
(including name, start and stop times worked & number of hours worked per day at each facility, PHF and CSU)		
PERSONNEL TRANSACTIONS (Staff hired, terminated and current vacancies).	MONTHLY	Program Monitor
ORGANIZATIONAL CHART	QUARTERLY	Program Monitor

TRAINING CALENDAR &ATTENDANCE SIGN- IN SHEETS	MONTHLY	Program Monitor
FOOD SERVICE INSPECTIONS	MONTHLY	Program Monitor
MEDS MONITORING	QUARTERLY	Program Monitor
PEER REVIEW	QUARTERLY	Program Monitor
EQUIPMENT INVENTORY	QUARTERLY	Program Monitor
ADVERSE INCIDENTS	VERBAL, WITHIN 1 HR. WRITTEN, WITHIN 48 HRS.	Program Monitor
PATIENT ABUSE INCIDENT	VERBAL- WITHIN 1 HR. WRITTEN WITHIN 48 HRS.	Program Monitor and Patients Rights Office
LENGTH OF STAY CSU/PHF	Monthly	Program Monitor
CSU STAYS OVER 24 HOURS	Monthly	Program Monitor
CONSUMER DISPOSITION AT DISCHARGE	Monthly	Program Monitor
INSUFFICENT STAFFING (all staffing requirements)	Within 48 hours, and summarized monthly	Program Monitor
Summary of all drug testing results (CSU).	Monthly	Program Monitor

NOTE: Monthly reports are due no later than the 15th of the succeeding month. Quarterly reports are due no later than the 15th of October, January, April and July.

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PSYCHIATRIC HEALTH FACILITY (PHF)

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TARGET POPULATION

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The consumers referred to the PHF will have received a psychiatric assessment at the CSU. Prior to admission, consumers will have a DSM IV diagnosis eligible for admission to a PHF, and exhibit symptoms and behaviors justifying an admission, in that they pose a danger to self, a danger to others, or are gravely disabled. Admission may be under a legal hold for involuntary inpatient care pursuant to WIC 5000-5350, including 5150, 5250, 5260, Temporary Conservatorship, and Permanent Conservatorship or may be voluntary.

TREATMENT PHILOSOPHY

The PHF will provide short-term inpatient care to consumers suffering from acute mental illness, ameliorating and stabilizing their symptoms to the extent that the consumers can function at a less restrictive level of care.

ADMISSION HOURS AND PROCESS

The PHF shall be available to accept admissions 24 hours per day, 7 days per week.

All admissions shall be screened and referred by the CSU and deemed appropriate for acute inpatient psychiatric care. The CONTRACTOR will determine the acceptance or rejection of a referral for admission within one hour of receiving the referral. Persons eligible for admission are mentally disordered adults who shall have been found by the CSU to be a danger to self, a danger to others or gravely disabled. Admissions require an order for admission by the CONTRACTOR's psychiatrist.

The PHF charge nurse will receive the request to admit. The nurse shall immediately determine if capacity exists to accept the consumer and notify the CSU at the time of the call. The PHF MD may deny admission only when the PHF is at full capacity and no discharge can occur in a timely fashion; or if the consumer is not medically stable for treatment at the PHF level of care. If

unusual circumstances justify the PHF MD to deny admitting a consumer to the PHF, the denial of admission must be communicated at the time of denial by voice mail message to the Program Monitor.

CONSUMER INTAKE, ASSESSMENT AND EVALUATION:

The CONTRACTOR shall provide the following services:

- Upon admission, nursing staff shall complete an admission agreement; complete all admission paperwork; complete the Patients Rights advisement; notify the consumer of their legal status and financial obligation; complete a personal property inventory and appropriately secure the consumer's belongings; , orient the consumer to the rules, regulations, personnel and environment of the unit; notify the family/guardian/conservator of the consumers arrival on the unit, and obtain consumer's signed consent to speak with the family/significant others. All information shall be complete as soon as possible subsequent to admission.
- If applicable, a copy of LPS conservatorship court appointment documents (either public or private) shall be obtained upon admission and conservator consent for treatment and release of information shall be obtained in lieu of consumer consent. At minimum, the facility will receive "permission to admit" and "permission to treat" from the consumer's conservator. An e-mail or verbal authorization from the conservator's office referring to the consumer by name and authorizing admission and treatment will be acceptable up to a maximum of ninety-six (96) hours after which time the hard copy paperwork shall have been received and entered into the patient's chart.
- Within 48 hours, the signed interdisciplinary treatment plan and all assessments including food service and rehabilitation treatment shall be completed and present in the chart.