COUNTY OF LOS ANGELES

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DEPARTMENT OF MENTAL HEALTH

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Reply To: (213) 738-4601
FAX No.: (213) 386-1297

November 24, 2004

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, CA 90012

Dear Supervisors:

APPROVAL TO RENEW 27 MENTAL HEALTH SERVICES CONTRACT ALLOWABLE RATE FEE-FOR-SERVICES MEDI-CAL PSYCHIATRIC INPATIENT HOSPITAL SERVICES AGREEMENTS FOR FISCAL YEARS 2004-2005, 2005-2006, AND 2006-2007 AND APPROVAL OF REQUEST FOR APPROPRIATION ADJUSTMENT FOR FISCAL YEAR 2004-2005 (ALL SUPERVISORIAL DISTRICTS) (4 VOTES)

IT IS RECOMMENDED THAT YOUR BOARD:

1. Approve the Mental Health Services Contract Allowable Rate Fee-For-Services (FFS) Medi-Cal Psychiatric Inpatient Hospital Services Agreement format, substantially similar to Attachment I.

2. Delegate authority to the Director of Mental Health or his designee to execute the renewal of 27 Mental Health Services Contract Allowable Rate FFS Medi-Cal Psychiatric Inpatient Hospital Services Agreements upon Board approval, in accordance with the listing in Attachment II. These agreements specify contract allowable rates per day for acute psychiatric inpatient hospital services and administrative day services, and are funded by approximately 50 percent Mental Health Managed Care State Allocation, and approximately 50 percent Federal Financial Participation (FFP) Medi-Cal revenues. The term of each Agreement will be effective January 1, 2005 through June 30, 2005 including two (2) automatic one-year renewal periods.

3. Delegate authority to the Director of Mental Health or his designee to execute future new agreements, substantially similar in format to Attachment I, with qualified FFS

Medi-Cal psychiatric certified inpatient hospitals who conform to all applicable Los Angeles County (LAC) DMH policies and procedures for FFS Medi-Cal Acute Inpatient Hospital Services.

4. Delegate authority to the Director of Mental Health or his designee to prepare, sign, and execute amendments to the agreements provided that: 1) the contract allowable rates under each Agreement for each fiscal year shall not exceed an increase of 20 percent; 2) any such increase shall be used to provide additional services or to reflect program and/or policy changes; 3) the Board of Supervisors has appropriated sufficient funds for all changes; 4) approval of County Counsel and the Chief Administrative Officer (CAO) or their designee is obtained prior to any such Amendment; 5) the parties may, by written Amendment, mutually agree to reduce programs or services without reference to the 20 percent limitation; and 6) the Director of Mental Health shall notify the Board of Supervisors of Agreement changes in writing within 30 days after execution of each Amendment.

5. Approve the Request for Appropriation Adjustment (Attachment III) in the amount of $8,000,000, fully funded by the Mental Health Managed Care State allocation, $4,000,000, and FFP Medi-Cal revenue, $4,000,000. The increase in appropriation will provide spending authority for FFS contract providers in FY 2004-2005.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTIONS

Board approval is required for the renewal of these 27 Mental Health Services Contract Allowable Rate FFS Medi-Cal Psychiatric Inpatient Hospital Services Agreements, as these agreements will expire December 31, 2004. Board approval is also required for delegation of authority to the Director of Mental Health or his designee to execute these agreements and future new agreements and amendments with FFS Medi-Cal psychiatric inpatient hospitals.

The renewal of these 27 FFS Medi-Cal agreements will allow for uninterrupted, medically necessary acute psychiatric inpatient hospital services and administrative day services to severely mentally ill clients who reside throughout the Los Angeles County (LAC).

Implementation of Strategic Plan Goals

The recommended Board actions are consistent with the principles of the Countywide Strategic Plan Organizational Goal No. 3, “Organizational Effectiveness.” Qualified FFS

Medi-Cal psychiatric hospitals will provide twenty-four hour acute psychiatric inpatient hospital services and administrative day services to Medi-Cal beneficiaries.

FISCAL IMPACT/FINANCING

There is no increase in net County cost.

These agreements do not contain a maximum contract amount but specify contract allowable rates per day for acute psychiatric inpatient hospital services and administrative day services. All services provided are subject to the Treatment Authorization Request review process prior to authorization of payment.

All clients served by the FFS Medi-Cal psychiatric inpatient hospitals are Medi-Cal beneficiaries. The projected expenditure for FFS Consolidation is $88,765,000 for FY 2004-2005, which exceeds the budgeted amount of $81,209,000 by $7,556,000. The appropriation adjustment in the amount of $8,000,000 will provide the spending authority for the FFS contract providers annual expenditures. This appropriation adjustment is fully funded by the Mental Health Managed Care State allocation, $4,000,000, and FFP Medi-Cal revenue, $4,000,000.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

Chapter 633 (AB 757) of statutes of 1994 authorizes the transfer of State funding for FFS Medi-Cal psychiatric inpatient hospital services from the State Department of Health Services to the State Department of Mental Health. On December 20, 1994, your Board approved LAC's participation in FFS Medi-Cal psychiatric inpatient hospital services consolidation and the transfer of SGF Medi-Cal match dollars to the County for payment of services and administration of the program.

The Mental Health Services Contract Allowable Rate FFS Medi-Cal Psychiatric Inpatient Hospital Services Agreements are with 27 Medi-Cal certified hospitals that provide acute psychiatric inpatient services and administrative day services to the residents of LAC. Furthermore, the contractor will not utilize or otherwise arrange for mobile 5150 assessment personnel or processes outside the confines of the Contractor's facility without the written consent of DMH's Director or his designee.

Attachment I is the FFS Medi-Cal Agreement format, which has been updated to reflect new or revised mandated provisions required in all County contracts. Attachment II specifies the Contractors, services to be provided, Supervisorial Districts of service providers, terms, and contract allowable rates for these agreements. Attachment IV is

the Los Angeles County Community Business Enterprise (LAC/CBE) Program, Firm/Organizational Information form.

Clinical and administrative staff of DMH are assigned to supervise and administer these agreements, evaluate programs to ensure that quality services are being provided to clients, and ensure that Agreement provisions and departmental policies are being followed.

The Mental Health Services Contract Allowable Rate FFS Medi-Cal Psychiatric Inpatient Hospital Services Agreement format has been approved as to form by County Counsel. The CAO and DMH's Fiscal and Program Administrations have reviewed the proposed actions.

CONTRACTING PROCESS

Board approval will authorize DMH to renew 27 agreements with existing FFS Medi-Cal Contractors as listed in Attachment II.

Upon Board approval, the Director of Mental Health or his designee will have delegated authority to execute a Mental Health Services Contract Allowable Rate FFS Medi-Cal Psychiatric Inpatient Hospital Services Agreement with 27 qualified FFS Medi-Cal psychiatric inpatient hospitals, as listed in Attachment II, and other qualified FFS Medi-Cal psychiatric certified inpatient hospitals who conform to all applicable LAC-DMH policies and procedures for FFS Medi-Cal Acute Inpatient Hospital services.

IMPACT ON CURRENT SERVICES

The renewal of these 27 agreements will allow for uninterrupted, medically necessary acute psychiatric inpatient hospital services and administrative day services to severely mentally ill clients who reside throughout the LAC.

CONCLUSION

The Department of Mental Health will need one (1) copy of the adopted Board's action. It is requested that the Executive Officer of the Board notifies the Department of Mental Health's Contracts Development and Administration Division at (213) 738-4684 when this document is available.

Respectfully submitted,

Marvin J. Southard, D.S.W.
Director of Mental Health

MJS:MY:RK:LQ

Attachments (4)

c: Chief Administrative Officer
County Counsel
Chairperson, Mental Health Commission

FFS BD LTR 2003–11/19/2004 3:32 PM

CONTRACTOR

_____ _____
Contract Number

_____ _____
Provider Number(s)

_____ _____
Reference Number

Business Address:

_____

_____

Supervisorial District(s) _____

MENTAL HEALTH SERVICES AGREEMENT
CONTRACT ALLOWABLE RATE - FEE FOR SERVICES
MEDI-CAL PSYCHIATRIC INPATIENT HOSPITAL SERVICES

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K: S_____ U_____
PO: A_____ C_____ D_____ H_____ M_____

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MENTAL HEALTH SERVICES AGREEMENT
CONTRACT ALLOWABLE RATE - FEE FOR SERVICES
MEDI-CAL PSYCHIATRIC/INPATIENT HOSPITAL SERVICES

THIS AGREEMENT is made and entered into this _____ day of _____, 200____, by and between the County of Los Angeles (hereafter "County"), and _____

_____

_____

(hereafter "Contractor")

Business Address:

_____

_____

_____

WHEREAS, County desires to provide to those persons in Los Angeles County who qualify therefor certain mental health services contemplated and authorized by the California Welfare and Institutions Code Section 5775 et seq., Joint Committee on Accreditation of Health Care Organizations (JCAHCO) accreditation standards; and

WHEREAS, Contractor is equipped, staffed, and prepared to provide these services as described in this Agreement; and

WHEREAS, pursuant to California Welfare and Institutions Code Section 5775 et seq., County is authorized to contract with various providers of Psychiatric Inpatient Hospital Services for Medi-Cal beneficiaries that seek reimbursement for such services under the Medi-Cal Local Mental Health Plan (LMHP) program; and

WHEREAS, Contractor recognizes that this Agreement is formed under California Welfare and Institutions Code Section 5775 et seq. and State of California regulations adopted pursuant thereto which authorize County to contract for the provision of Psychiatric Inpatient Hospital Services to Medi-Cal beneficiaries eligible for such services under the Medi-Cal Fee-For-Service program in accordance with the terms and conditions negotiated by County; and

WHEREAS, these services shall be provided by Contractor in accordance with all applicable Federal, State, the Local Mental Heath Plan (LMHP) and local laws, ordinances, rules, regulations, manuals, guidelines, and directives, which may include, but are not necessarily limited to, the following: California Welfare and Institutions Code Section 5775 et seq., including, but not limited to, Sections 5776, 5777, 5778 and 5780; Medi-Cal Act, California Welfare and Institutions Code Section 14000 et seq.; California Welfare and Institutions Code Sections 14680, 14681, 14682, 14683, and 14684; California Government Code Sections 26227 and 53703; Title XIX of the Social Security Act, 42 United States Code Section 1396 et seq.; California Penal Code Section 11164 et seq.; California Code of Regulations Titles 9 and 22; Medi-Cal Psychiatric Inpatient Hospital Services Consolidation

Emergency and permanent Regulations issued by State Department of Mental Health; Los Angeles County Department of Mental Health's Contract Manual for Mental Health Services Agreement - Contract Allowable Rate Fee For Services Psychiatric/Inpatient Hospital Services Format; policies and procedures including specific procedures relating to contract compliance for Treatment Authorization Request approvals developed by County; State's Medicaid Plan; policies and procedures issued by State Department of Mental Health; policies and procedures issued by State Department of Health Services; and policies and procedures issued by the LMHP; and

WHEREAS, this Agreement is authorized by California Welfare and Institutions Code Section 5775 et seq., California Government Code Sections 23004, 26227 and 53703, and otherwise.

NOW, THEREFORE, Contractor and County agree as follows:

PREAMBLE

For nearly a decade, the County has collaborated with its community partners to enhance the capacity of the health and human services system to improve the lives of children and families. These efforts require, as a fundamental expectation, that the County's contracting partners share the County and community's commitment to provide health and human services that support achievement of the County's vision, goals, values, and adopted outcomes. Key to these efforts is the integration of service delivery systems and the adoption of the Customer Service and Satisfaction Standards.

The County of Los Angeles' Vision is to improve the quality of life in the County by providing responsive, efficient, and high quality public services that promote the self-sufficiency, well-being and prosperity of individuals, families, business and communities. This philosophy of teamwork and collaboration is anchored in the shared values of:

- Responsiveness
- Professionalism
- Accountability
- Compassion
- Integrity
- Commitment
- A Can – Do Attitude
- Respect for Diversity

These shared values are encompassed in the County Strategic Plan's eight goals: 1) Service Excellence; 2) Workforce Excellence; 3) Organizational Effectiveness; 4) Fiscal Responsibility; 5) Children's and Families' Well-Being; 6) Community Services; 7) Health and Mental Health; and 8) Public Safety. Improving the well-being of children and families requires coordination, collaboration, and integration of services across functional and jurisdictional boundaries, by and between County departments/agencies, and community and contracting partners.

The basic conditions that represent the well-being we seek for all children and families in Los Angeles County are delineated in the following five outcomes, adopted by the Board of Supervisors in January 1993.

- Good Health;
- Economic Well-Being;
- Safety and Survival;

- Emotional and Social Well-Being; and
- Education and Workforce Readiness.

Recognizing no single strategy – in isolation – can achieve the County's outcomes of well – being for children and families, consensus has emerged among County and community leaders that making substantial improvements in integrating the County's health and human services system is necessary to significantly move toward achieving these outcomes. The County has also established the following values and goals for guiding this effort to integrate the health and human services delivery system:

- ✓ Families are treated with respect in every encounter they have with the health, educational, and social service systems.
- ✓ Families can easily access a broad range of services to address their needs, build on their strengths, and achieve their goals.
- ✓ There is no "wrong door": wherever a family enters the system is the right place.
- ✓ Families receive services tailored to their unique situations and needs.
- ✓ Service providers and advocates involve families in the process of determining service plans, and proactively provide families with coordinated and comprehensive information, services and resources.
- ✓ The County service system is flexible, able to respond to service demands for both the Countywide population and specific population groups.
- ✓ The County service system acts to strengthen communities, recognizing that just as individuals live in families, families live in communities.
- ✓ In supporting families and communities, County agencies work seamlessly with public and private service providers, community-based organizations, and other community partners.
- ✓ County agencies and their partners work together seamlessly to demonstrate substantial progress towards making the system more strength-based, family-focused, culturally competent, accessible, user-friendly, responsive, cohesive, efficient, professional, and accountable.
- ✓ County agencies and their partners focus on administrative and operational enhancements to optimize the sharing of information, resources, and best practices while also protecting the privacy rights of families.
- ✓ County agencies and their partners pursue multi-disciplinary service delivery, a single service plan, staff development opportunities, infrastructure enhancements, customer service and satisfaction evaluation, and revenue maximization.
- ✓ County agencies and their partners create incentives to reinforce the direction toward service integration and seamless service delivery system.
- ✓ The County human service system embraces a commitment to the disciplined pursuit of

results accountability across systems. Specifically, any strategy designed to improve the County human services system for children and families should ultimately be judged by whether it helps achieve the County's five outcomes for children and families; good health, safety and survival, economic well-being, social and emotional well-being, and education and workforce readiness.

The County, its clients, contracting partners, and the community are working together to develop practical ways to make County services more accessible, customer friendly, better integrated, and outcome-focused. Several departments have identified shared themes in their strategic plans for achieving these goals including: making an effort to become more consumer/client-focused; valuing community partnerships and collaborations; emphasizing values and integrity; and using a strengths-based and multi-disciplinary team approach. County departments are also working to provide the Board of Supervisors and the community with a better understanding of how resources are being utilized, how well services are being provided, and what are the results of the services: is anyone better off?

The County of Los Angeles health and human service departments and their partners are working together to achieve the following ***Customer Service And Satisfaction Standards*** in support of improving outcomes for children and families.

Personal Service Delivery

The service delivery team – staff and volunteers – will treat customers and each other with courtesy, dignity, and respect.

- Introduce themselves by name
- Listen carefully and patiently to customers
- Be responsive to cultural and linguistic needs
- Explain procedures clearly
- Build on the strengths of families and communities

Service Access

Service providers will work proactively to facilitate customer access to services.

- Provide services as promptly as possible
- Provide clear directions and service information
- Outreach to the community and promote available services
- Involve families in service plan development
- Follow-up to ensure appropriate delivery of services

Service Environment

Service providers will deliver services in a clean, safe, and welcoming environment, which supports the effective delivery of services.

- Ensure a safe environment
- Ensure a professional atmosphere
- Display vision, mission, and values statements
- Provide a clean and comfortable waiting area
- Ensure privacy
- Post compliant and appeals procedures

The basis for all County health and human services contracts is the provision of the highest level of quality services that support improved outcomes for children and families. The County and its contracting partners must work together and share a commitment to achieve a common vision, goals, outcomes, and standards for providing services.

1. DEFINITIONS: The following terms, as used in this Agreement, shall have the following meanings:

A. "Acute Psychiatric Inpatient Hospital Services" means those services as described in Service Exhibit A (PSYCHIATRIC INPATIENT HOSPITAL SERVICES).

B. "Administrative Day Services" means those services as described in Service Exhibit A (PSYCHIATRIC INPATIENT HOSPITAL SERVICES).

C. "Beneficiary" means any patient/client who is certified as eligible for Medi-Cal pursuant to CCR Title 22, Section 51001, and may include any patient/client who is eligible for Medi-Cal and who is enrolled in a prepaid health plan or other fee for services psychiatric/inpatient hospital services health system which contracts with State approved local physical health care Medi-Cal Managed Care Plans pursuant to applicable law. Beneficiary shall also include any patient/client whose Medi-Cal eligibility was determined after the rendition of inpatient services. Any patient/client who is eligible for Medi-Cal, who is also eligible for Medicare hospital benefits under Title XVIII of the Social Security Act, 42 United States Code Section 1395 et seq., and who has not exhausted those benefits, shall not be considered a Beneficiary. Any patient/client receiving skilled nursing facility services or long-term care services shall not be considered a Beneficiary for the purpose of this contract/agreement.

D. "CCR" means the California Code of Regulations.

E. "Contract Manual" means DMH's Contract Manual for Mental Health Services Agreement - Contract Allowable Rate Fee For Services Psychiatric/Inpatient Hospital Services Format.

F. "Day(s)" means calendar day(s) unless otherwise specified.

G. "Director" means County's Director of Mental Health or Director's authorized designee.

H. "DMH" means County's Department of Mental Health.

I. "FFP" means Federal Financial Participation for Fee-For-Service Medi-Cal services as authorized by Title XIX of the Social Security Act, 42 United States Code Section 1396 et seq.

J. "Fiscal Intermediary" means the person or entity which has contracted with State to perform fiscal intermediary services related to this Agreement.

K. "Fiscal Year" means County's Fiscal Year which commences July 1 and ends the following June 30.

L. "IS" means DMH's Integrated System.

M. "Contract Allowable Rate" ("CAR") means the gross rate of reimbursement for Contractor's delivery of a day of service of Acute Psychiatric Inpatient Hospital Services or Administrative Day Services, as set forth in Paragraph 5 of this Agreement, and shall be the amount of reimbursement which is allowed under this Agreement for a delivery of a day of said services. The Contract Allowable Rates do not include the cost of physician services and psychologist services rendered to Beneficiaries or the cost of transportation services for providing Acute Psychiatric Inpatient Hospital Services or Administrative Day Services.

N. "Psychiatric Inpatient Hospital Services" means the following mental health services when rendered to a Beneficiary in accordance with this Agreement: (1) Acute Psychiatric Inpatient Hospital Services; and (2) Administrative Day Services. Psychiatric Inpatient Hospital Services shall be provided in either a licensed acute psychiatric hospital or a distinct acute psychiatric part of a licensed general acute care hospital. Psychiatric Inpatient Hospital Services provided in an acute psychiatric hospital which is larger than sixteen beds shall be reimbursed only for Beneficiaries age 20 or younger or 65 and older.

O. "SDHS" means State's Department of Health Services.

P. "SDMH" means State's Department of Mental Health.

Q. "State" means the State of California.

R. "Title XIX" means Title XIX of the Social Security Act, 42 United States Code Section 1396 et seq.

S. "WIC" means the California Welfare and Institutions Code.

T. "Healthy Families" ("HF") means the federally subsidized health insurance program administered by the State of California for the provision of comprehensive health services (including medical, dental and vision care) to children ages birth through 19th birthday from low income families.

U. "Healthy Families Procedures Manual" ("HF Procedures Manual") means DMH's Healthy Families Procedures Manual for providers. The HF Procedure Manual contains the formal requirements, policies and procedures governing Healthy Families and is incorporated into this Agreement by reference. Contractor hereby acknowledges receipt of the HF Procedures Manual upon execution of this Agreement.

V. "Member" or Title XXI Healthy Families Program Member ("HFPM") means an enrollee in any Healthy Families Health Plan through Healthy Families.

/

2. TERM:

A. Initial Period: The Initial Period of this Agreement shall commence on January 1, 2005 and shall continue in full force and effect through June 30, 2005.

B. Automatic Renewal Period(s): After the initial period this Agreement shall be automatically renewed without further action by the parties hereto unless either party desires to terminate this Agreement at the end of the Initial Period and gives written notice to the other party not less than thirty (30) days prior to the end of the initial period.

(1) First Automatic Renewal Period: If this Agreement is automatically renewed, the First Automatic Renewal Period shall commence on July 1, 2005 and shall continue in full force and effect through June 30, 2006.

(2) Second Automatic Renewal Period: If this Agreement is automatically renewed, the Second Automatic Renewal Period shall commence on July 1, 2006 and shall continue in full force and effect through June 30, 2007.

C. Six Months Notification of Agreement Expiration: Contractor shall notify County when this Agreement is within six (6) months of expiration. Contractor shall send such notice to those persons and addresses which are set forth in Paragraph 58 (NOTICES).

D. Termination:

(1) This Agreement may be terminated by either party at any time without cause by giving at least thirty days prior written notice to the other party.

(2) This Agreement may be terminated by County immediately:

(a) If County determines that:

i. Any Federal, State, and/or County funds are not available for this Agreement or any portion thereof; or

ii. Contractor has failed to comply with any of the provisions of Paragraphs 16 (NONDISCRIMINATION IN SERVICES), 17 (NONDISCRIMINATION IN EMPLOYMENT), 19 (INDEMNIFICATION AND INSURANCE), 20 (WARRANTY AGAINST CONTINGENT FEES), 26 (DELEGATION AND ASSIGNMENT), 27 (SUBCONTRACTING), and/or 45 (CERTIFICATION OF DRUG-FREE WORK PLACE); or

(b) In accordance with Paragraphs 32 (TERMINATION FOR INSOLVENCY), 33 (TERMINATION FOR DEFAULT), 34 (TERMINATION FOR IMPROPER CONSIDERATION), and/or 47 (COUNTY LOBBYISTS).

(3) This Agreement shall terminate as of June 30 of the last Fiscal Year for which funds for this Agreement were appropriated by County as provided in Paragraph 6 (COUNTY'S OBLIGATION FOR CURRENT AND FUTURE FISCAL YEARS).

(4) In the event that this Agreement is terminated, then:

(a) Contractor and County shall comply with the Termination Subsection of the Term Section of Contract Manual; and

(b) If Contractor terminates this Agreement, all costs related to all transfers of Beneficiaries receiving services shall not be a charge of this Agreement nor reimbursable in any way hereunder.

(5) Any termination of this Agreement by County shall be approved by County's Board of Supervisors.

3. ADMINISTRATION: Director shall have the authority to administer this Agreement on behalf of County. Contractor shall designate in writing a Single Point of Contact (SPC) who shall function as liaison with County regarding Contractor's performance hereunder.

Contractors shall not maintain, utilize, or otherwise arrange for mobile 5150 assessment personnel or processes outside the confines of the Contractor's facility without the written consent of the Director, or his designee.

4. DESCRIPTION OF SERVICES:

A. General:

(1) Contractor shall provide Psychiatric Inpatient Hospital Services to any Beneficiary in need of such services as authorized by this Agreement and shall assume total liability and responsibility for the provision of all Psychiatric Inpatient Hospital Services rendered to any such Beneficiary, either directly or through subcontractors as permitted under this Agreement.

Contractor shall provide Psychiatric Inpatient Hospital Services in the form as described in Service Exhibit A (PSYCHIATRIC INPATIENT HOSPITAL SERVICES), the Program Description of Contract Package for this Agreement as approved in writing by Director, including any addenda thereto as approved in writing by Director, and otherwise in this Agreement.

Contractor shall accept as payment in full for these Psychiatric Inpatient Hospital Services the payment from Fiscal Intermediary as provided in Paragraph 5 (FINANCIAL PROVISIONS).

(2) Contractor shall, at its own expense, provide and maintain all facilities and professional, allied and supportive paramedical personnel necessary and appropriate to provide all Psychiatric Inpatient Hospital Services.

(3) Contractor shall, at its own expense, provide and maintain all organizational and administrative capabilities to carry out all its obligations and responsibilities under this Agreement and all applicable statutes and regulations pertaining to Medi-Cal providers.

B. Licensure And Certification As Conditions Precedent To Contractor's Eligibility For Reimbursement:

(1) Contractor hereby represents and warrants that it is currently, and for the term of this Agreement shall remain, licensed as a general acute care hospital or acute psychiatric hospital in accordance with California Health and Safety Code Section 1250 et seq. and CCR Title 9 Chapter 11 Subchapter 1810.217, 1810.219.

(2) Contractor hereby represents and warrants that it is currently, and for the term

of this Agreement shall remain, certified as a Medi-Cal provider under Title XIX.

(3) Contractor agrees that compliance with its obligations to remain licensed as a general acute care hospital or acute psychiatric hospital as provided in this Subparagraph B and certified as a Medi-Cal provider under Title XIX as provided in this Subparagraph B, shall be express conditions precedent to Contractor's eligibility for reimbursement under this Agreement.

C. Utilization Controls As Conditions Precedent To Contractor's Eligibility For Reimbursement: As express conditions precedent to Contractor's eligibility for reimbursement under this Agreement, Contractor shall adhere to all utilization controls and obtain prior authorization, if applicable, for services in accordance with the Medi-Cal Psychiatric Inpatient Hospital Services Consolidation Emergency Regulations issued by SDMH, LMHP, and this Agreement.

D. Quality Of Care As Condition Precedent To Contractor's Eligibility For Reimbursement: As an express condition precedent to Contractor's eligibility for reimbursement under this Agreement and regardless of whether services are rendered directly or through subcontractors as permitted under this Agreement, Contractor shall:

(1) Assure that any and all Beneficiaries receive care as required by the Medi-Cal Psychiatric Inpatient Hospital Services Consolidation Emergency Regulations issued by SDMH and this Agreement.

(2) Take such action as required by Contractor's medical staff bylaws against any medical staff members who violate those bylaws,

(3) Provide Psychiatric Inpatient Hospital Services to Beneficiaries in the same manner and at the same level as Contractor provides to all other patients/clients to whom Contractor renders similar services.

(4) Not discriminate against any Beneficiary in any manner whatsoever, including, but not limited to, admission practices, placement in special or separate wings or rooms, and provision of special or separate meals.

E. Assumption Of Financial Risk By Contractor: Notwithstanding any other provision of this Agreement, regardless of whether services are rendered directly or through subcontractors as permitted under this Agreement, Contractor shall bear the total financial risk for the cost of all Psychiatric Inpatient Hospital Services rendered to each Beneficiary covered by this Agreement. As used in this Subparagraph E, the term "risk" means that Contractor shall accept as payment in full for any and all Psychiatric Inpatient Hospital Services the payments made by Fiscal Intermediary pursuant to this Agreement. Such acceptance shall be made regardless of whether the cost of such services and related administrative expenses shall have exceeded reimbursement under this Agreement. The term "risk" also includes, but is not limited to, the cost for all Psychiatric Inpatient Hospital Services for all illness or injury which may result from or is contributed to by any catastrophe or disaster which occurs subsequent to the effective date of this Agreement, including, but not limited to, acts of God,

war or the public enemy.

F. Service Location(s): Except as authorized by County pursuant to Paragraph 27 (SUBCONTRACTING), Contractor shall provide all Psychiatric Inpatient Hospital Services under this Agreement only at the following Contractor facility(ies): _____

_____

_____.

Contractor shall obtain the prior written consent of Director at least seventy days before terminating services at any such location(s) and/or before commencing such services at any other location(s).

5. FINANCIAL PROVISIONS:

A. Contract Allowable Rates (CAR): This is a CAR agreement. Fiscal Intermediary shall reimburse Contractor during the term of this Agreement for Psychiatric Inpatient Hospital Services provided to Beneficiaries in accordance with WIC Section 5775 et seq., the Medi-Cal Psychiatric Inpatient Hospital Services Consolidation Emergency Regulations issued by SDMH, and this Agreement. Reimbursement for Psychiatric Inpatient Hospital Services shall be at the applicable CAR for Acute Psychiatric Inpatient Hospital Services and Administrative Day Services as mutually agreed upon between Contractor and County and shown in this Subparagraph A less any available third party coverage and/or Medi-Cal Share Of Cost as determined pursuant to Subparagraph B (Billing Procedures As Conditions Precedent To Contractor's Eligibility For Reimbursement).

Psychiatric Inpatient Hospital Services shall be provided in either a licensed acute psychiatric hospital or a distinct acute psychiatric part of a licensed general acute care hospital. Psychiatric Inpatient Hospital Services provided in an acute psychiatric hospital which is larger than sixteen beds shall be reimbursed only for Beneficiaries age 20 or younger or 65 and older.

During the term of this Agreement, the CAR for Acute Psychiatric Inpatient Hospital Services shall be:

(1) FOUR HUNDRED SEVENTY-FIVE DOLLARS ($475) per day of service for each Medi-Cal Beneficiary during the Period of this Agreement as described in Paragraph 1 (TERM).

The CAR shall cover all services, including, but not limited to, medical ancillaries provided by Contractor to deliver a day of service of Acute Psychiatric Inpatient Hospital Services. Notwithstanding the foregoing, the CAR shall not include the cost of physician services and psychologist services rendered to Beneficiaries, nor shall it include the cost of transportation services incurred in providing Acute Psychiatric Inpatient Hospital Services. The cost of physician services, psychologist services, and transportation services shall not be reimbursed by the CAR.

During the term of this Agreement, the Contract Allowable Rate for Administrative Day Services shall be:

(2) TWO HUNDRED NINETY-SIX AND 03/100 DOLLARS ($296.03) per day of

service for each Beneficiary during the Initial Period of this Agreement as described in Paragraph 1 (TERM).

The CAR shall cover all services, including, but not limited to, medical ancillaries provided by Contractor to deliver a day of service of Administrative Day Services. Notwithstanding the foregoing, the CAR shall not include the cost of physician services and psychologist services rendered to Beneficiaries, nor shall it include the cost of transportation services incurred in providing Administrative Day Services. The cost of physician services, psychologist services, and transportation services shall not be reimbursed by the CAR.

Each Fiscal Year or portion thereof of the term of this Agreement, reimbursement for Psychiatric Inpatient Hospital Services shall be made on the basis of: (1) approximately fifty percent FFP funds which are paid by Fiscal Intermediary to Contractor pursuant to this Agreement; and (2) approximately fifty percent match from funds which are allocated by State for County specifically for Psychiatric Inpatient Hospital Services, which are paid by Fiscal Intermediary to Contractor pursuant to this Agreement, and which qualify as eligible FFP matching funds.

Notwithstanding any other provision of this Agreement, Contractor shall be entitled to reimbursement from Fiscal Intermediary for Psychiatric Inpatient Hospital Services only: (1) if there is a Treatment Authorization Request for the particular Acute Psychiatric Inpatient Hospital Services or Administrative Day Services which has been submitted by Contractor to County as required by this Agreement and approved by County; (2) if the particular Acute Psychiatric Inpatient Hospital Services or Administrative Day Services provided pursuant to the County-approved Treatment Authorization Request are consistent with the County-approved Treatment Authorization Request and are appropriate for clinical reimbursement as determined by Director; (3) to the extent that funds allocated by State for County specifically for Psychiatric Inpatient Hospital Services are available as eligible FFP matching funds; and (4) for all Los Angeles County Regional Center beneficiaries, the County, acting as the Local Mental Health Plan, shall only be responsible for authorizing a maximum reimbursement for four (4) administrative days.

B. Billing Procedures As Conditions Precedent To Contractor's Eligibility For Reimbursement:

As an express condition precedent to Contractor's eligibility for reimbursement under this Agreement, Contractor shall determine:

(1) Whether the Psychiatric Inpatient Hospital Services for which claim is made are covered, in whole or in part, under any other State or Federal medical care program or under any other contractual or legal entitlement, including, but not limited to, any private group indemnification or insurance program or workers' compensation, and (2) whether the Beneficiaries for whom claim is made are responsible for any/all Medi-Cal Share Of Cost for the particular Psychiatric Inpatient Hospital Services. Notwithstanding any other provision of this Agreement, to the extent that any such third

party coverage and/or Medi-Cal Share Of Cost is available, Contractor's reimbursement shall be reduced.

(2) As a further express condition precedent to Contractor's eligibility for reimbursement under this Agreement, Contractor shall submit claims on the prescribed form and with the appropriate allowable psychiatric accommodation codes to Fiscal Intermediary for reimbursement for all Psychiatric Inpatient Hospital Services rendered to Beneficiaries, either directly or through subcontractors as permitted under this Agreement, in accordance with all applicable requirements.

(3) Contractor shall claim a day of service of Acute Psychiatric Inpatient Hospital Services or Administrative Day Services for each Beneficiary who occupies an inpatient psychiatric bed at 12:00 midnight in Contractor's facility(ies), based on the particular services provided at that time. Contractor shall claim a day of service for the Beneficiary for the day of admission and not the day of discharge; however, a day of service may be claimed if the Beneficiary is admitted and discharged during the same day, provided that such admission and discharge is not within twenty-four hours of a prior discharge.

C. Government Funding Restrictions: This Agreement shall be subject to any restrictions, limitations, or conditions imposed by State, including, but not limited to, those contained in State's Budget Act, which may in any way affect the provisions or funding of this Agreement. This Agreement shall also be subject to any additional restrictions, limitations, or conditions imposed by the Federal government which may in any way affect the provisions or funding of this Agreement.

D. Recovery Of Overpayments: When an audit or review performed by County, State and/or Federal governments or by any other authorized agency discloses that Contractor has been overpaid under this Agreement, then the overpayment shall be due by Contractor to County.

For Federal audit exceptions, Federal audit appeal processes shall be followed. County recovery of Federal overpayment shall be made in accordance with all applicable Federal laws, regulations, manuals, guidelines, and directives.

For State, County and other authorized agency audit and/or review exceptions, County shall recover the payment from Contractor within sixty days of the date of the applicable audit report or other determination of overpayment, provided that if State recovers the overpayment from County before the end of such sixty days, then County shall immediately recover the overpayment from Contractor. Within ten days after written notification by County to Contractor of any overpayment due by Contractor to County, Contractor shall notify County as to which of the following two payment options Contractor requests be used as the method by which the overpayment shall be recovered by County. Any overpayment shall be: (1) paid in one cash payment by Contractor to County or (2) paid by cash payment(s) by Contractor to County over a period not to exceed such sixty days. If Contractor does not so notify County within such ten days or if Contractor fails to make payment of any overpayment to County as required, then the total amount of the overpayment, as determined by

Director, shall be immediately due and payable.

E. Contractor Appeal Procedures: Contractor may appeal the processing or payment of any of its claims for Psychiatric Inpatient Hospital Services or the denial of any request for reimbursement of Psychiatric Inpatient Hospital Services in accordance with the Medi-Cal Psychiatric Inpatient Hospital Services Consolidation Emergency Regulations issued by SDMH.

F. County Audit Settlements: If, at any time during the term of this Agreement or at any time after the expiration or termination of this Agreement, authorized representatives of County conduct an audit or review regarding the Psychiatric Inpatient Hospital Services provided hereunder and if such audit or review finds that the dollar liability of County and/or Federal governments for such services is less than the payments made by Fiscal Intermediary to Contractor, then the difference shall be due by Contractor to County. Within thirty days after written notification by County to Contractor of any such difference due by Contractor to County, Contractor shall pay County by one cash payment.

G. Interest Charges on Delinquent Payments: If Contractor, without good cause as determined in the sole judgment of Director, fails to pay County any amount due to County under this Agreement within sixty days after the due date, as determined by Director, then Director, in Director's sole discretion and after written notice to Contractor, may assess interest charges at a rate equal to County's Pool Rate, as determined by County's Auditor-Controller, per day on the delinquent amount due commencing on the sixty-first day after the due date. The interest charges shall be paid by Contractor to County by cash payment upon demand.

H. For Healthy Families Providers Only:

(1) Healthy Families Reimbursement:

(a) Title XXI Healthy Families funds shall be paid to Contractor only for State approved claims for Title XXI Healthy Families services and only to the extent that 1) the Contractor has compiled with Federal and State Laws, regulation, manuals, guidelines, and directives, 2) eligible FFP matching funds are available under this Agreement, and only after County has received FFP payment from the State.

(b) Reimbursement to the Contractor for services to Serious Emotionally Disturbed (SED) Healthy Families Program Member (HFPM) will be existing rates for existing mental health services under this Agreement.

(2) Healthy Families Suspension of Payments: At the sole discretion of Director, payments to Contractor under this Agreement shall be suspended if Director determines that Contractor is in default under any of the provisions of this Agreement, of if the State fails to make prompt payment as determined by Director on County's claims to State.

I. No payment for Services Provided following Expiration/Termination of Contract: Contractor shall have no claim against County for payment of any money or reimbursement, of any

kind whatsoever, for any service provided by Contractor after the expiration or other termination of this Contract. Should Contractor receive any such payment, it shall immediately notify County and shall immediately repay all such funds to County. Payment by County for services rendered after expiration/termination of this Contract shall not constitute a waiver of County's right to recover such payment from Contractor. This provision shall survive the expiration or other termination of this Contract.

6. COUNTY'S OBLIGATION FOR CURRENT AND FUTURE FISCAL YEARS: Notwithstanding any other provision of this Agreement, this Agreement shall not be effective and binding upon the parties unless and until County's Board of Supervisors appropriates funds for purposes hereof in County's Budget for County's current Fiscal Year. Further, County shall not be obligated for Contractor's performance hereunder or by any provision of this Agreement during any of County's future Fiscal Years unless and until County's Board of Supervisors appropriates funds for purposes hereof in County's Budget for each such future Fiscal Year. In the event that funds are not appropriated for this Agreement, then this Agreement shall terminate as of June 30 of the last Fiscal Year for which funds were appropriated.

7. STAFFING: Contractor shall operate throughout the term of this Agreement with staff, including, but not limited to, professional staff, as required by WIC and CCR. Such staff shall be qualified and shall possess all appropriate licenses in accordance with WIC Sections 5778 and all other applicable requirements of the California Business and Professions Code, WIC, CCR and State Policy Letters.

8. STAFF TRAINING AND SUPERVISION: Contractor shall institute and maintain an in-service training program of treatment review and case conferences in which all its professional, para-professional, intern, student and clinical volunteer personnel shall participate. Contractor shall institute and maintain appropriate supervision of all persons providing services under this Agreement with particular emphasis on the supervision of para-professionals, interns, students, and clinical volunteers. Contractor shall be responsible for the training of all appropriate staff on State and County policies and procedures as well as on any other matters that County may reasonably require.

9. PROGRAM SUPERVISION, MONITORING AND REVIEW: Director shall have the right to monitor and specify the kind, quality, appropriateness, timeliness, amount of services, and the criteria for determining the persons to be served. Authorized County, State and/or Federal representatives shall have the right to review and monitor Contractor's facilities, programs, and procedures at any reasonable time.

10. COUNTY'S QUALITY ASSURANCE PLAN: The County or its agent will evaluate Contractor's performance under this Agreement on not less than an annual basis. Such evaluation will include assessing Contractor's compliance with all contract terms and performance standards. Contractor deficiencies which County determines are severe or continuing and that may place performance of the

Agreement in jeopardy if not corrected will be reported to the Board of Supervisors. The report will include improvement/corrective action measures taken by the County and Contractor. If improvement does not occur consistent with the corrective action measures, County may terminate this Agreement or impose other penalties as specified in this Agreement.

11. REPORTS AND AUDITS:

A. Records:

(1) General:

(a) Contractor shall maintain books, records, documents and other evidence as well as accounting procedures and practices sufficient to reflect properly all direct and indirect costs of whatever nature claimed to have been incurred in the performance of this Agreement.

(b) Contractor shall maintain all the information described in Subparagraph (a) in accordance with the Federal Health Care Financing Administration's Health Insurance Manual Volume 15 (HIM 15) and generally accepted accounting principles.

(c) Contractor shall maintain medical records required by CCR Title 22, Sections 70747 through 70751, and other records relating to a Beneficiary's eligibility for services, the services rendered, the Beneficiary to whom the services were rendered, the date(s) of service, the medical necessity of the services, and the quality of the care provided. Records shall be maintained in accordance with CCR Title 22, Section 51476.

(d) In addition to the requirements in this Paragraph 11, Contractor shall comply with any additional record requirements described in the Service Exhibit(s) and shall adequately document the delivery of all services described in this Agreement.

(2) Beneficiary Records: Contractor shall maintain treatment and other records of all services in accordance with all applicable County, State and Federal requirements on each individual Beneficiary which shall include, but not be limited to, Beneficiary identification number, IS Beneficiary face sheet, all data elements required by the IS, consent for treatment form, initial evaluation form, treatment plan, progress notes and discharge summary.

All such records shall be maintained by Contractor for a minimum period of seven years following discharge of the Beneficiary or termination of services (except that the records of unemancipated minors shall be kept at least one year after such minor has reached the age of eighteen years and in any case not less than seven years), or until any litigation, claim, negotiation, County, State and/or Federal audit, and/or other action involving the records, is fully resolved, whichever is later. During such retention period, all such records shall be made available during County's normal business hours to authorized representatives of County, State, and/or Federal governments for purposes of inspection, program review, and/or audit. In the event any records are located outside Los Angeles County, Contractor shall pay County for all travel, per diem, and other costs incurred by County for any inspection or audit at such other location.

(3) Financial Records: Contractor shall prepare and maintain, on a current basis, accurate and complete financial records of its activities and operations relating to this Agreement in accordance with generally accepted accounting principles and all guidelines, standards, and procedures which may be provided by County to Contractor. Minimum standards for accounting principles are set forth in County's Auditor-Controller's Contract Accounting and Administration Handbook which shall be furnished to Contractor by County upon request.

The entries in all financial records must be readily traceable to applicable source documentation (e.g., remittance invoices, vendor invoices, employee timecards signed by employee and countersigned by supervisor in ink, subsidiary ledgers and journals, appointment logs, patient ledger cards, etc.). Any apportionment of costs shall be made in accordance with the requirements of the Federal Health Care Financing Administration's Health Insurance Manual Volume 15 (HIM 15) and other guidelines, standards, and procedures which may be provided by County to Contractor.

All such records shall be maintained by Contractor for a minimum period of seven years following the expiration or termination of the Agreement, or until any litigation, claim, negotiation, County, State and/or Federal audit, and/or other action involving the records, is fully resolved, whichever is later. During such retention period, all such records shall be made available during County's normal business hours to authorized representatives of County, State, and/or Federal governments for purposes of inspection, program review, and/or audit. In the event any records are located outside Los Angeles County, Contractor shall pay County for all travel, per diem, and other costs incurred by County for any inspection or audit at such other location.

(4) Preservation of Records: If, following termination of this Agreement, Contractor's facility(ies) is (are) closed or if majority ownership of Contractor changes, then within seventy-two hours thereafter, Director of SDMH and Director shall be notified thereof by Contractor in writing of all arrangements made by Contractor for preservation of all the Beneficiary, financial. and other records referred to in this Paragraph **11.**

B. Audits:

(1) Contractor shall provide County, State and/or Federal governments, and their authorized representatives, access to and the right to examine, audit, excerpt, copy, or transcribe, any pertinent transaction, activity, time cards, or any other records or information relating to this Agreement.

(2) County, State and/or Federal governments may, in their sole discretion, perform periodic fiscal and/or program review(s) of Contractor's records that relate to this Agreement, and if the results of any fiscal and/or program review requires a corrective plan of action, Contractor shall submit such a plan no later than thirty days after receiving the findings of the fiscal and/or program review.

(3) County, State and/or Federal governments may conduct onsite reviews and audits during normal working hours with at least 72-hour notice, except that unannounced onsite

reviews and requests for information may be made in those exceptional situations where arrangement of an appointment is not possible or is inappropriate to the nature of the intended visit.

(4) Audit Reports: In the event that any audit of any or all aspects of this Agreement is conducted of Contractor by any Federal or State auditor, or by any auditor or accountant employed by Contractor or otherwise, then Contractor shall file a copy of such audit report(s) with DMH's Contracts Development and Administration Division within thirty days of Contractor's receipt thereof, unless otherwise provided by applicable Federal or State law or under this Agreement.

(5) Federal Access To Records: If, and to the extent that, Section 1861(v)(1)(I) of the Social Security Act (42 United States Code Section 1395x(v)(1)(I)) is applicable, Contractor agrees that for a period of five years following the furnishing of services under this Agreement, Contractor shall maintain and make available, upon written request, to the Secretary of the United States Department of Health and Human Services or the Controller General of the United States, or to any of their duly authorized representatives, the contracts, books, documents and records of Contractor which are necessary to verify the nature and extent of the cost of services hereunder. Furthermore, if Contractor carries out any of the services provided hereunder through any subcontract with a value or cost of TEN THOUSAND DOLLARS ($10,000) or more over a twelve month period with a related organization (as that term is defined under Federal law), Contractor agrees that each such subcontract shall provide for such access to the subcontract, books, documents and records of the subcontractor.

12. REPORTS:

A. General: Contract shall make reports as required by Director or by State regarding Contractor's activities and operations as they relate to Contractor's performance of this Agreement. In no event may County require such reports unless it has provided Contractor with at least thirty days' prior written notification. County shall provide Contractor with a written explanation of the procedures for reporting the required information.

B. Integrated System (IS):

(1) Contractor shall participate in IS as required by Director. Contractor shall report to County, all program, Beneficiary, staff, and other data and information about Contractor's services, within the specified time periods as required by Department's Integrated Systems Procedure Manual, the IS Reports Reference Guide, FFS Inpatient Provider Reference Manual and Updates, and any other County requirements.

(2) Notwithstanding any other provision of this Agreement, only those days of service of Acute Psychiatric Inpatient Hospital Services and Administrative Day Services, as set forth on County-approved Treatment Authorization Requests and properly entered into the IS, shall be counted as reimbursable services. Contractor shall ensure that all data reported in the IS is accurate and complete. Contractor has responsibility to review all provider reports and to report any discrepancies to County IS representatives. Admission data must be entered by Contractor into the IS

within 24 hours of the time of admission.

(3) After the close of the monthly IS reporting period, no data and information relating to services for that month may be added without the written approval of Director.

(4) There may be good cause reasons that prevent Contractor from entering into IS all data and information documenting days of service of Acute Psychiatric Inpatient Hospital Services and Administrative Day Services before the close of a particular month. If, after the close of the monthly IS reporting period, Contractor desires to enter any data and information documenting services for a particular month, then Contractor shall submit a request in writing setting forth the good cause reasons which prevented Contractor from timely entering such particular data and information into IS. Director may, at his sole discretion, approve in writing Contractor's request to enter the data and information into IS. Notwithstanding any other provision of this Agreement, the only services which shall be considered legitimate and reimbursable shall be those services as entered by Contractor into IS.

(5) Contractor shall train its staff in the operation, procedures, policies, and all related use, of IS as required by County.

13. CONFIDENTIALITY: Contractor shall maintain the confidentiality of all records and information, including, but not limited to, claims, County records, Beneficiary records and information, and IS records and reports, in accordance with WIC Sections 5328 through 5330, inclusive, and 14100.2, Title 45, Code of Federal Regulations Section 205.50, and all other applicable County, State, and Federal laws, ordinances, rules, regulations, manuals, guidelines, and directives, relating to confidentiality. Contractor shall require all its officers, employees, and agents providing services hereunder to acknowledge, in writing, understanding of, and agreement to fully comply with, all such confidentiality provisions. Contractor shall indemnify and hold harmless County, its officers, employees, and agents, from and against any and all loss, damage, liability, and expense arising from any disclosure of such records and information by Contractor, its officers, employees, or agents.

14. BENEFICIARIES' RIGHTS: Contractor shall comply with all applicable patients' rights provisions, including, but not limited to, WIC Section 5325 et seq., CCR Title 9, Section 850 et seq., and CCR Title 22, including, but not limited to, Section 70707. Contractor shall also comply with all patients' rights policies provided by County. Contractor shall post in a conspicuous place a written policy on patients' rights in accordance with WIC Section 5325 and CCR Title 22, Section 70707.

SDMH, County Patients' Rights Advocates and/or other DMH staff designated by Director, and any other authorized agencies shall be given access by Contractor to Beneficiaries, Beneficiaries' records, and Contractor's personnel in order to investigate any complaints by Beneficiaries and/or to monitor Contractor's compliance with all applicable statutes, regulations, manuals and policies.

15. REPORTING OF BENEFICIARY ABUSE AND RELATED PERSONNEL REQUIREMENTS:

A. Elders And Dependent Adults Abuse: Contractor, and all persons employed or subcontracted by Contractor, shall comply with WIC Section 15630 et seq. and shall report all known

or suspected instances of physical abuse of elders and dependent adults under the care of Contractor either to an appropriate County adult protective services agency or to a local law enforcement agency, as mandated by these code sections. Contractor, and all persons employed or subcontracted by Contractor, shall make the report on such abuse, and shall submit all required information, in accordance with WIC Sections 15630, 15633 and 15633.5.

B. Minor Children Abuse: Contractor, and all persons employed or subcontracted by Contractor, shall comply with California Penal Code (hereafter "PC") Section 11164 et seq. and shall report all known or suspected instances of child abuse to an appropriate child protective agency, as mandated by these code sections. Contractor, and all persons employed or subcontracted by Contractor, shall make the report on such abuse, and shall submit all required information, in accordance with PC Sections 11166 and 11167.

C. Contractor Staff:

(1) Contractor shall assure that any person who enters into employment as a care custodian of elders, dependent adults or minor children, or who enters into employment as a health or other practitioner, prior to commencing employment, and as a prerequisite to that employment, shall sign a statement on a form provided by Contractor in accordance with the above code sections to the effect that such person has knowledge of, and will comply with, these code sections.

(2) Although clerical and other non-treatment staff are not required to report suspected cases of abuse, they should consult with mandated reporters upon suspecting any abuse.

(3) For the safety and welfare of elders, dependent adults, and minor children, Contractor, and any/all Sub-Contractors, shall, to the maximum extent permitted by law, perform adequate background and fingerprint checks, ascertain arrest and conviction records for all current and prospective employees and shall not employ or continue to employ any person convicted of any crime involving any harm or inappropriate behavior to elders, dependent adults, or minor children.

(4) Contractor shall not employ or continue to employ, or shall take other appropriate action to fully protect all persons receiving services under this Agreement concerning, any person whom Contractor knows, or reasonably suspects, has committed any acts which are inimical to the health, morals, welfare, or safety of elders, dependent adults or minor children, or which otherwise make it inappropriate for such person to be employed by Contractor.

16. NONDISCRIMINATION IN SERVICES:

A. Contractor shall not discriminate in the provision of services hereunder because of race, religion, national origin, ancestry, sex, age, marital status, or physical or mental handicap, in accordance with requirements of Federal and State law. For the purpose of this Paragraph 16, discrimination in the provision of services may include, but is not limited to, the following: denying any person any service or benefit or the availability of a facility; providing any service or benefit to any person which is different, or is provided in a different manner or at a different time, from that

provided to others; subjecting any person to segregation or separate treatment in any matter related to the receipt of any service; restricting any person in any way in the enjoyment of any advantage or privilege enjoyed by others receiving any service or benefit; and treating any person differently from others in determining admission, enrollment quota, eligibility, membership, or any other requirement or condition which persons must meet in order to be provided any service or benefit. Contractor shall take affirmative action to ensure that intended beneficiaries of this Agreement are provided services without regard to race, religion, national origin, ancestry, sex, age, marital status, or physical or mental handicap. Contractor shall also establish and maintain written complaint procedures in accordance with the Nondiscrimination In Services Section of Contract Manual.

B. Contractor shall have admission policies which shall be in writing and available to the public. Contractor shall not employ discriminatory practices in the admission of any person, assignment of accommodations, or otherwise.

17. NONDISCRIMINATION IN EMPLOYMENT:

A. Contractor certifies and agrees that all persons employed by it, its affiliates, subsidiaries, or holding companies are and will be treated equally by it without regard to, or because of, race, religion, national origin, ancestry, sex, age, marital status, physical handicap, or political affiliation, and in compliance with all applicable Federal and State anti-discrimination laws and regulations.

B. Contractor shall take affirmative action to ensure that qualified applicants are employed, and that employees are treated during employment, without regard to race, religion, national origin, ancestry, sex, age, marital status, physical handicap, or political affiliation. Such action shall include, but is not limited to, the following: employment, upgrading, demotion, transfer, recruitment or recruitment advertising, layoff or termination, rates of pay or other forms of compensation, and selection for training, including apprenticeship.

C. Contractor shall deal with its subcontractors, bidders, or vendors without regard to or because of race, religion, ancestry, national origin, sex, age, marital status, physical handicap, or political affiliation.

D. Contractor shall allow County representatives access to its employment records during regular business hours to verify compliance with the provisions of this Paragraph 17 when so requested by Director.

E. If County finds that any of the above provisions has been violated, the same shall constitute a material breach of this Agreement upon which County may immediately terminate or suspend this Agreement. While County reserves the right to determine independently that the anti-discrimination provisions of this Agreement have been violated, in addition, a determination by the California Fair Employment Practices Commission or the Federal Equal Employment Opportunity Commission that Contractor has violated State or Federal anti-discrimination laws or regulations shall

constitute a finding by County that Contractor has violated the anti-discrimination provisions of this Agreement.

F. In the event that Contractor violates any of the anti-discrimination provisions of this Paragraph 17, County shall be entitled, at its option, to the sum of FIVE HUNDRED DOLLARS ($500) pursuant to California Civil Code Section 1671 as liquidated damages in lieu of terminating or suspending this Agreement.

18. FAIR LABOR STANDARDS: Contractor shall comply with all applicable provisions of the Federal Fair Labor Standards Act, and shall indemnify, defend, and hold harmless County, its officers, employees, and agents, from any and all liability, including, but not limited to, wages, overtime pay, liquidated damages, penalties, court costs, and attorneys' fees arising under any wage and hour law, including, but not limited to, the Federal Fair Labor Standards Act, for services performed by Contractor's employees for which County may be found jointly or solely liable.

19. INDEMNIFICATION AND INSURANCE:

A. Indemnification: Contractor shall indemnify, defend and hold harmless County, and its Special Districts, elected and appointed officers, employees, and agents from and against any and all liability, including but not limited to demands, claims, actions, fees, costs, and expenses (including attorney and expert witness fees), arising from or connected with Contractor's acts and/or omissions arising from and/or relating to this Agreement.

B. General Insurance Requirements: Without limiting Contractor's indemnification of County and during the term of this Agreement, Contractor shall provide and maintain, and shall require all of its subcontractors to maintain, the following programs of insurance specified in this Agreement. Such insurance shall be primary to and not contributing with any other insurance or self-insurance programs maintained by County, and such coverage shall be provided and maintained at Contractor's own expense.

1) Evidence of Insurance: Certificate(s) or other evidence of coverage satisfactory to County shall be delivered to *Department of Mental Health, 550 South Vermont Avenue, Contracts Development and Administration Division, 5th Floor, Los Angeles, CA 90020,* prior to commencing services under this Agreement. Such certificates or other evidence shall:

(a) Specifically identify this Agreement.

(b) Clearly evidence all coverages required in this Agreement.

(c) Contain the express condition that County is to be given written notice by mail at least thirty (30) days in advance of cancellation for all policies evidenced on the certificate of insurance.

(d) Include copies of the additional insured endorsement to the commercial general liability policy, adding the County of Los Angeles, its Special Districts, its officials, officers, and employees as insured for all activities arising from this Agreement.

(e) Identify any deductibles or self-insured retentions for County's approval. The County retains the right to require Contractor to reduce or eliminate such deductibles or self-insured retentions as they apply to County, or, require Contractor to provide a bond guaranteeing payment of all such retained losses and related costs, including, but not limited to, expenses or fees, or both, related to investigations, claims administrations, and legal defense. Such bond shall be executed by a corporate surety licensed to transact business in the State of California.

2) Insurer Financial Ratings: Insurance is to be provided by an insurance company acceptable to the County with an A.M. Best rating of not less that A:VII, unless otherwise approved by County.

3) Failure to Maintain Coverage: Failure by Contractor to maintain the required insurance, or to provide evidence of insurance coverage acceptable to County, shall constitute a material breach of the contract upon which County may immediately terminate or suspend this Agreement. County, at its sole option, may obtain damages from Contractor resulting from said breach. Alternatively, County may purchase such required insurance coverage, and without further notice to Contractor, County may deduct from sums due to Contractor any premium costs advanced by County for such insurance.

4) Notification of Incidents, Claims or Suits: Contractor shall report to County:

a) Any accident or incident relating to services performed under this Agreement which involves injury or property damage which may result in the filing of a claim or lawsuit against Contractor and/or County. Such report shall be made in writing within 24 hours of occurrence.

b) Any third party claim or lawsuit filed against Contractor arising from or related to services performed by Contractor under this Agreement.

c) Any injury to a Contractor employee which occurs on County property. This report shall be submitted on a County "Non-employee Injury Report" to the County contract manager.

d) Any loss, disappearance, destruction, misuse, or theft of any kind whatsoever of County property, monies or securities entrusted to Contractor under the terms of this Agreement.

5) Compensation for County Costs: In the event that Contractor fails to comply with any of the indemnification or insurance requirements of this Agreement, and such failure to comply results in any costs to County, Contractor shall pay full compensation for all costs incurred by County.

6) Insurance Coverage Requirements for Subcontractors: Contractor shall ensure any and all sub-contractors performing services under this Agreement meet the insurance requirements of this Agreement by either:

a) Contractor providing evidence of insurance covering the activities of

sub-contractor, or

b) Contractor providing evidence submitted by sub-contractors evidencing that sub-contractors maintain the required insurance coverage. County retains the right to obtain copies of evidence of sub-contractor insurance coverage at any time.

C. Insurance Coverage Requirements:

1) General Liability: Insurance (written on ISO policy form CG 00 01 or its equivalent) with limits of not less than the following:

General Aggregate:	Two Million Dollars ($2,000,000)
Products/Completed Operation Aggregate:	One Million Dollars ($1,000,000)
Personal and Advertising Injury:	One Million Dollars ($1,000,000)
Each Occurrence:	One Million Dollars ($1,000,000)

2) Automobile Liability: Insurance (written on ISO policy form CA 00 01 or its equivalent) with a limit of liability of not less that One Million Dollars ($1,000,000) for each accident. Such insurance shall include coverage for all "owned", "hired" and "non-owned" vehicles, or coverage for "any auto".

3) Workers' Compensation and Employers' Liability: Insurance providing workers compensation benefits, as required by the Labor Code of the State of California or by any other state, and for which Contractor is responsible. If Contractor's employees will be engaged in maritime employment, coverage shall provide workers compensation benefits as required by the U.S. Longshore and Harbor Workers' Compensation Act, Jones Act or any other Federal law for which Contractor is responsible. In all cases, the above insurance also shall include Employers' Liability coverage with limits of not less that the following:

Each Accident:	One Million Dollars ($1,000,000)
Disease – policy limit:	One Million Dollars ($1,000,000)
Disease – each employee:	One Million Dollars ($1,000,000)

4) Professional Liability: Insurance covering liability arising from any error, omission, negligent or wrongful act of the Contractor, its officers or employees with limits of not less that One Million Dollars ($1,000,000) per occurrence and Three Million ($3,000,000) aggregate. The coverage also shall provide an extended two-year reporting period commencing upon termination or cancellation of this Agreement.

20. 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, in its sole discretion, deduct from the Agreement price or consideration, or otherwise recover, the full

amount of such commission, percentage, brokerage, or contingent fee.

21. CONFLICT OF INTEREST:

A. No County employee whose position in County enables such employee to influence the award or administration of this Agreement or any competing agreement, and no spouse or economic dependent of such employee, shall be employed in any capacity by Contractor or have any direct or indirect financial interest in this Agreement. No officer or employee of Contractor who may financially benefit from the provision of services hereunder shall in any way participate in County's approval, or ongoing evaluation, of such services, or in any way attempt to unlawfully influence County's approval or ongoing evaluation of such services.

B. Contractor shall comply with all conflict of interest laws, ordinances and regulations now in effect or hereafter to be enacted during the term of this Agreement. Contractor warrants that it is not now aware of any facts which create a conflict of interest. If Contractor hereafter becomes aware of any facts which might reasonably be expected to create a conflict of interest, it shall immediately make full written disclosure of such facts to County. Full written disclosure shall include, without limitation, identification of all persons implicated and complete description of all relevant circumstances.

22. UNLAWFUL SOLICITATION: Contractor shall require all of its employees to acknowledge, in writing, understanding of and agreement to comply with the provisions of Article 9 of Chapter 4 of Division 3 (commencing with Section 6150) of California Business and Professions Code (i.e., State Bar Act provisions regarding unlawful solicitation as a runner or capper for attorneys) and shall take positive and affirmative steps in its performance hereunder to insure that there is no violation of such provisions by its employees. Contractor shall utilize the attorney referral service of all those bar associations within the County of Los Angeles that have such a service.

23. INDEPENDENT STATUS OF CONTRACTOR:

A. This Agreement is by and between 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. The employees and agents of one party shall not be, or be construed to be, the employees or agents of the other party for any purpose whatsoever.

B. Contractor shall be solely liable and responsible for providing to, or on behalf of, all persons performing work pursuant to this Agreement all compensation and benefits. County shall have no liability or responsibility for the payment of any salaries, wages, unemployment benefits, disability benefits, Federal, State, or local taxes, or other compensation, benefits, or taxes for any personnel provided by or on behalf of Contractor.

C. Contractor understands and agrees that all persons performing services pursuant to this Agreement are, for purposes of workers' compensation liability, the sole employees of Contractor and

not employees of County. Contractor shall be solely liable and responsible for furnishing any and all workers' compensation benefits to any person as a result of any injuries arising from or connected with any services performed by or on behalf of Contractor pursuant to this Agreement.

D. Contractor shall obtain and maintain on file an executed Contractor Employee Acknowledgment of Employer (Service Exhibit B) for each of its employees performing any services under this Agreement. Such Acknowledgments shall be executed by each such employee on or immediately after the commencement date of this Agreement but in no event later than the date such employee first performs services under this Agreement.

24. CONSIDERATION OF HIRING COUNTY EMPLOYEES TARGETED FOR LAYOFF OR FORMER COUNTY EMPLOYEES ON A REEMPLOYMENT LIST: Should Contractor require additional or replacement personnel after the effective date of this Agreement to perform the services set forth herein, Contractor shall give first consideration for such employment openings to qualified permanent County employees who are targeted for layoff or qualified former County employees who are on a reemployment list during the term of this Agreement.

25. CONSIDERATION FOR HIRING GREATER AVENUES FOR INDEPENDENCE (GAIN) PARTICIPANTS: Should Contractor require additional or replacement personnel after the effective date of this Agreement, Contractor shall give consideration for any such employment openings to participants in the County's Department of Public Social Services' Greater Avenues for Independence (GAIN) Program who meet Contractor's minimum qualifications for the open position. The County will refer GAIN participants by job category to the contractor.

26. DELEGATION AND ASSIGNMENT: Contractor shall not delegate its duties or assign its rights under this Agreement, or both, either in whole or in part, without the prior written consent of County, and any prohibited delegation or assignment shall be null and void. Any payments by County to any delegatee or assignee on any claim under this Agreement, in consequence of any such consent, shall be subject to set off, recoupment, or other reduction for any claim which Contractor may have against County.

27. SUBCONTRACTING:

A. No performance of this Agreement, or any portion thereof, shall be subcontracted by Contractor without the prior written consent of County as provided in this Paragraph 27. Any attempt by Contractor to subcontract any performance, obligation, or responsibility under this Agreement, without the prior written consent of County, shall be null and void and shall constitute a material breach of this Agreement. Notwithstanding any other provision of this Agreement, in event of any such breach by Contractor, this Agreement may be terminated forthwith by County. Notwithstanding any other provision of this Agreement, the parties do not in any way intend that any person or entity shall acquire any rights as a third party beneficiary of this Agreement.

B. If Contractor desires to subcontract any portion of its performance, obligations, or

responsibilities under this Agreement, Contractor shall make a written request to County, for written request to County for written approval to enter into the particular subcontract. Contractor's request to County shall include:

(1) The reasons for the particular subcontract.

(2) A detailed description of the services to be provided by the subcontract.

(3) Identification of the proposed subcontractor and an explanation of why and how the proposed subcontractor was selected, including the degree of competition involved.

(4) A description of the proposed subcontract amount and manner of compensation, together with Contractor's cost or price analysis thereof.

(5) A copy of the proposed subcontract which shall contain the following provision:

"This contract is a subcontract under the terms of the prime contract with the County of Los Angeles and shall be subject to all of the provisions of such prime contract."

(6) A copy of the proposed subcontract, if in excess of $10,000 and utilizes State Funds, shall also contain the following provision:

"The contracting parties shall be subject to the examination and audit of the Auditor General for a period of three years after the final payment under contract (Government Code, Section 8546.7)."

The Contractor will also be subject to the examination and audit of the State Auditor General for a period of three years after final payment under contract (Government Code, Section 8546.7)

(7) Any other information and/or certifications requested by County.

C. County shall review Contractor's request to subcontract and shall determine, in its sole discretion, whether or not to consent to such request on a case-by-case basis.

D. Contractor shall indemnify and hold harmless County, its officers, employees, and agents, from and against any and all liability, damages, costs, and expenses, including, but not limited to, defense costs and legal fees, arising from or related to Contractor's use of any subcontractor, including any officers, employees, or agents of any subcontractor, in the same manner as required for Contractor, its officers, employees, and agents, under this Agreement.

E. Notwithstanding any County consent to any subcontracting, Contractor shall remain fully liable and responsible for any and all performance required of it under this Agreement, and no subcontract shall bind or purport to bind County. Further, County approval of any subcontract shall not be construed to limit in any way any Contractor's performance, obligations, or responsibilities, to County, nor shall such approval limit in any way any of County's rights or remedies contained in this Agreement. Additionally, County approval of any subcontract shall not be construed in any way to constitute the determination of the allowability or appropriateness of any cost or payment under this

Agreement.

F. In the event that County consents to any subcontracting, such consents shall be subject to County's right to give prior and continuing approval of any and all subcontractor personnel providing services under such subcontract. Contractor shall assure that any subcontractor personnel not approved by County shall be immediately removed from the provision of any services under the particular subcontract or that action is taken as requested by County. County shall not be liable or responsible in any way to Contractor, to any subcontractor, or to any officers, employees, or agents of Contractor or any subcontractor, for any liability, damages, costs or expenses arising from or related to County's exercise of such right.

G. In the event that County consents to any subcontracting, such consent shall be subject to County's right to terminate, in whole or in part, any subcontract at any time upon written notice to Contractor when such action is deemed by County to be in its best interest. County shall not be liable or responsible in any way to Contractor, to any subcontractor, or to any officers, employees, or agents of Contractor or any subcontractor, for any liability, damages, costs, or expenses arising from or related to County's exercise of such right.

H. In the event that County consents to any subcontracting, each and all of the provisions of this Agreement and any amendment thereto shall extend to, be binding upon, and inure to the benefit of, the successors or administrators of the respective parties.

I. In the event that County consents to any subcontracting, such consent shall apply to each particular subcontract only and shall not be, or be construed to be, a waiver of this Paragraph 27 or a blanket consent to any further subcontracting.

J. In the event that County consents to any subcontracting, Contractor shall be solely liable and responsible for any and all payments and/or other compensation to all subcontractors and their officers, employees, and agents. County shall have no liability or responsibility whatsoever for any payment/and or other compensation for any subcontractors or their officers, employees, and agents.

K. Contractor shall deliver to the Chief of DMH's Contracts Development and Administration Division a fully executed copy of each subcontract entered into by Contractor pursuant to this Paragraph 27, on or immediately after the effective date of the subcontract but in on event later than the date any services are performed under the subcontract.

L In the event that County consents to any subcontracting, Contractor shall obtain and maintain on file an executed Subcontractor Employee Acknowledgement of Employer, in the form as contained in Contractor's Contract Package for the Agreement, for each of the subcontractor's employees performing services under the subcontract. Such Acknowledgements shall be delivered to the Chief of DMH's Contracts Development and Administration Division on or immediately after the commencement date of the particular subcontract but in no event later that the date such employee first performs any services under the subcontract.

M. County shall have no liability or responsibility whatsoever for any payment or other compensation for any subcontractor or its officers, employees, and agents.

N. Director is hereby authorized to act for and on behalf of County pursuant to this Paragraph 27, including, but not limited to, consenting to any subcontracting.

28. GOVERNING LAW, JURISDICTION AND VENUE: This Agreement shall be governed by, and construed in accordance with, the laws of the State of California. Contractor agrees and consents to the exclusive jurisdiction of the courts of the State of California for all purposes regarding this Agreement and further agrees and consents that venue of any action brought hereunder shall be exclusively in the County of Los Angeles, California. Further, this Agreement shall be governed by, and construed in accordance with, all laws, regulations, and contractual obligations of County under agreement with the State.

29. COMPLIANCE WITH APPLICABLE LAW:

A. Contractor shall comply with all Federal, including, but not limited to, Title XIX of the Social Security Act, State and local laws, ordinances, rules, regulations, manuals, guidelines, Americans with Disabilities Act (ADA) standards, and directives applicable to its performance hereunder. Further, all provisions required thereby to be included in this Agreement are hereby incorporated herein by reference.

B. Contractor shall maintain in effect an active compliance program in accordance with the Department of Health and Human Services, Office of the Inspector General, Publication of the OIG Compliance Program Guide for Hospitals (1998), and Center for Medi-Care/Medi-Caid Services (CMS) guidelines for hospitals.

C. Contractor shall indemnify and hold harmless County from and against any and all liability, damages, costs or expenses, including, but not limited, defense costs and attorneys' fees, arising from or related to any violation on the part of Contractor, its officers, employees, or agents, or any such Federal, State or local laws, ordinances, rules, regulations, manuals, guidelines, ADA standards or directives.

30. THIRD PARTY BENEFICIARIES: Notwithstanding any other provision of this Agreement, the parties do not in any way intend that any person or entity shall acquire any rights as a third party beneficiary of this Agreement.

31. LICENSES, PERMITS, REGISTRATIONS, ACCREDITATIONS, AND CERTIFICATIONS: In addition to the requirements Subparagraph B (Licensure And Certification As Conditions Precedent To Contractor's Eligibility For Reimbursement) of Paragraph 4 (DESCRIPTION OF SERVICES), Contractor shall obtain and maintain in effect during the term of this Agreement, all licenses, permits, registrations, accreditations, and certifications as required by all Federal, State, and local laws, ordinances, rules, regulations, manuals, guidelines, and directives, which are applicable to Contractor's facility(ies) and services under this Agreement. Contractor shall further ensure that all of its officers, employees, and

agents, who perform services hereunder, shall obtain and maintain in effect during the term of this Agreement all licenses, permits, registrations, accreditations, and certifications which are applicable to their performance hereunder. A copy of each license, permit, registration, accreditation, and certification as required by all applicable Federal, State, and local laws, ordinances, rules, regulations, manuals, guidelines and directives shall be provided, in duplicate, to DMH's Contracts Development and Administration Division.

32. TERMINATION FOR INSOLVENCY:

A. County may terminate this Agreement immediately in the event of the occurrence of any of the following:

(1) Insolvency of Contractor. Contractor shall be deemed to be insolvent if it has ceased to pay its debts for at least sixty days in the ordinary course of business or cannot pay its debts as they become due, whether or not a petition has been filed under the Federal Bankruptcy Code and whether or not Contractor is insolvent within the meaning of the Federal Bankruptcy Code.

(2) The filing of a voluntary or involuntary petition regarding Contractor under the Federal Bankruptcy Code.

(3) The appointment of a Receiver or Trustee for Contractor.

(4) The execution by Contractor of a general assignment for the benefit of creditors.

B. The rights and remedies of County provided in this Paragraph 32 shall not be exclusive and are in addition to any other rights and remedies provided by law or under this Agreement.

33. TERMINATION FOR DEFAULT:

A. County may, by written notice of default to Contractor, terminate this Agreement immediately in any one of the following circumstances:

(1) If, as determined in the sole judgment of County, Contractor fails to perform any services within the times specified in this Agreement or any extension thereof as County may authorize in writing; or

(2) If, as determined in the sole judgment of County, Contractor fails to perform and/or comply with any of the other provisions of this Agreement, or so fails to make progress as to endanger performance of this Agreement in accordance with its terms, and in either of these two circumstances, does not cure such failure within a period of five days (or such longer period as County may authorize in writing) after receipt of notice from County specifying such failure.

B. The rights and remedies of County provided in this Paragraph 33 shall not be exclusive and are in addition to any other rights and remedies provided by law or under this Agreement.

34. TERMINATION FOR IMPROPER CONSIDERATION: County may, by written notice to

Contractor, immediately terminate the right of Contractor to proceed under this Agreement if it is found that consideration, in any form, was offered or given by Contractor, either directly or through an intermediary, to any County officer, employee or agent with the intent of securing the Agreement or securing favorable treatment with respect to the award, amendment or extension of the Agreement or the making of any determinations with respect to the Contractor's performance pursuant to the Agreement. In the event of such termination, County shall be entitled to pursue the same remedies against Contractor as it could pursue in the event of default by the Contractor.

Contractor shall immediately report any attempt by a County officer or employee to solicit such improper consideration. The report shall be made either to the County manager charged with the supervision of the employee or to the County Auditor-Controller's Employee Fraud Hotline at (213) 974-0914 or (800) 544-6861.

Among other items, such improper consideration may take the form of cash. discounts, service, the provision of travel or entertainment, or tangible gifts.

35. SEVERABILITY: If any provision of this Agreement or the application thereof to any person or circumstance is held invalid, the remainder of this Agreement and the application of such provision to other persons or circumstances shall not be affected thereby.

36. CAPTIONS AND PARAGRAPH HEADINGS: Captions and paragraph headings used in this Agreement are for convenience only and are not a part of this Agreement and shall not be used in construing this Agreement.

37. ALTERATION OF TERMS: No addition to, or alteration of, the terms of the body of this Agreement or the Service Exhibit(s) hereto, whether by written or oral understanding of the parties, their officers, employees or agents, shall be valid and effective unless made in the form of a written amendment to this Agreement which is formally approved and executed by the parties in the same manner as this Agreement.

38. ENTIRE AGREEMENT: The body of this Agreement; Service Exhibit(s) A, B and C, attached hereto and incorporated herein by reference; Contract Manual, including any amendments thereto as approved in writing by Director, which are hereby incorporated herein by reference but not attached; and Contract Package for this Agreement, as approved in writing by Director, including any addenda thereto as approved in writing by Director, which are hereby incorporated herein by reference but not attached; shall constitute the complete and exclusive statement of understanding between the parties which supersedes all previous agreements, written or oral, and all other communications between the parties relating to the subject matter of this Agreement. In the event of any conflict or inconsistency in the definition or interpretation of any word, responsibility, or schedule, or the contents or description of any service or other work, or otherwise, between the body of this Agreement and the other referenced documents, or between such other documents, such conflict or inconsistency shall be resolved by giving precedence first to the body of this Agreement and then to such other documents according to

the following priority:

1. Service Exhibit A.
2. Service Exhibits B and C.
3. Contract Manual.
4. Contract Package.

39. WAIVER: No waiver by County of any breach of any provision of this Agreement shall constitute a waiver of any other breach of such provision. Failure of County to enforce at any time, or from time to time, any provision of this Agreement shall not be construed as a waiver thereof. The rights and remedies set forth in this Paragraph 39 shall not be exclusive and are in addition to any other rights and remedies provided by law or under this Agreement.

40. BENEFICIARY ELIGIBILITY: This Agreement is not intended to change the determination of Medi-Cal eligibility for any Beneficiary in any way. However, in the event that the California Legislature or United States Congress enacts a statute which redefines Medi-Cal eligibility so as to affect the provision of Psychiatric Inpatient Hospital Services under this Agreement, then the new definition shall apply to this Agreement.

41. EMPLOYMENT ELIGIBILITY VERIFICATION: Contractor warrants that it fully complies with all Federal statutes and regulations regarding employment of aliens and others and that all its employees performing services hereunder meet the citizenship or alien status requirements set forth in Federal statutes and regulations. Contractor shall obtain, from all covered employees performing services hereunder, all verification and other documentation of employment eligibility status required by Federal statutes and regulations as they currently exist and as they may be hereafter amended. Contractor shall retain all such documentation for the period prescribed by law. Contractor shall indemnify, defend, and hold harmless County, its officers and employees from and against any employer sanctions and any other liability which may be assessed against Contractor or County in connection with any alleged violation of any Federal statutes or regulations pertaining to the eligibility for employment of persons performing services under this Agreement.

42. PUBLIC ANNOUNCEMENTS AND LITERATURE: In public announcements and literature distributed by Contractor for the purpose of apprising patients/clients and the general public of the nature of its Psychiatric Inpatient Hospital Services, Contractor shall clearly indicate that such services which it renders pursuant to this Agreement are provided under authorization of the County of Los Angeles.

43. AUTHORIZATION WARRANTY: Contractor represents and warrants that the person executing this Agreement for Contractor is an authorized agent who has actual authority to bind Contractor to each and every term, condition, and obligation of this Agreement and that all requirements of Contractor have been fulfilled to provide such actual authority.

44. RESTRICTIONS ON LOBBYING: If any Federal funds are to be used to pay for any of

Contractor's services under this Agreement, Contractor shall fully comply with all certification and disclosure requirements prescribed by Section 319 of Public Law 101-121 (31 United States Code Section 1352) and any implementing regulations, and shall ensure that each of its subcontractors receiving funds under this Agreement also fully complies with all such certification and disclosure requirements.

45. CERTIFICATION OF DRUG-FREE WORK PLACE: Contractor certifies and agrees that Contractor and its employees shall comply with DMH's policy of maintaining a drug-free work place. Contractor and its employees shall not manufacture, distribute, dispense, possess, or use any controlled substances as defined in 21 United States Code Section 812, including, but not limited to, marijuana, heroin, cocaine, and amphetamines, at any of Contractor's facilities or work sites or County's facilities or work sites. If Contractor or any of its employees is convicted of or pleads nolo contendere to any criminal drug statute violation occurring at any such facility or work site, then Contractor, within five days thereafter, shall notify Director in writing.

46. MAINTENANCE STANDARDS FOR SERVICE DELIVERY SITES: Contractor shall assure that all locations where services are provided under this Agreement are operated at all times in accordance with all County community standards with regard to property maintenance and repair, graffiti abatement, refuse removal, fire safety, landscaping, and in full compliance with all applicable local laws, ordinances, and regulations relating to the property. County's periodic monitoring visits to Contractors' facility(ies) shall include a review of compliance with this Paragraph 46.

47. COUNTY LOBBYISTS: Contractor and each County lobbyist or County lobbying firm as defined in Los Angeles County Code Section 2.160.010, retained by Contractor, shall fully comply with County's Lobbyist Ordinance, Los Angeles County Code Chapter 2.160. Failure on the part of Contractor or any County lobbyist or County lobbying firm retained by Contractor to fully comply with County's Lobbyist Ordinance shall constitute a material breach of this Agreement upon which County may immediately terminate or suspend this Agreement.

48. CHILD SUPPORT COMPLIANCE PROGRAM:

A. Contractor's Warranty of Adherence to County's Child Support Compliance Program: Contractor acknowledges that County has established a goal of ensuring that all individuals who benefit financially from County through a contract are in compliance with their court-ordered child, family, and spousal support obligations in order to mitigate the economic burden otherwise imposed upon County and its taxpayers.

As required by County's Child Support Compliance Program (County Code Chapter 2.200) and without limiting Contractor's duty under this Agreement to comply with all applicable provisions of law, Contractor warrants that it is now in compliance and shall during the term of this Agreement maintain in compliance with employment and wage reporting requirements as required by the Federal Social Security Act (42 USC Section 653a) and California Unemployment Insurance Code

Section 1088.5, and shall implement all lawfully served Wage and Earnings Withholdings Orders or CSSD Notices of Wage and Earnings Assignment for Child, Family, or Spousal Support, pursuant to Code of Civil Procedure Section 706.031 and Family Code Section 5246(b).

B. Termination for Breach of Warranty to Maintain Compliance with County's Child Support Compliance Program: Failure of Contractor to maintain compliance with the requirements set forth in Subparagraph A (Contractor's Warranty of Adherence to County's Child Support Compliance Program) shall constitute default under this Agreement. Without limiting the rights and remedies available to County under any other provision of this Agreement, failure of Contractor to cure such default within 90 calendar days of written notice shall be grounds upon which County may terminate this Agreement pursuant to Paragraph 33 (TERMINATION FOR DEFAULT) and pursue debarment of Contractor, pursuant to County Code Chapter 2.202.

49. NOTICE TO EMPLOYEES REGARDING THE FEDERAL EARNED INCOME CREDIT: Contractor shall notify its employees, and shall require each subcontractor to notify its employees, that they may be eligible for the federal Earned Income Credit under the federal income tax laws. Such notice shall be provided in accordance with the requirements set forth in Internal Revenue Service Notice 1015.

50. USE OF RECYCLED-CONTENT PAPER PRODUCTS: Consistent with the Board of Supervisors' policy to reduce the amount of solid waste deposited at the County landfills, the Contractor agrees to use recycled-content paper to the maximum extent possible on the Project.

51. CONTRACTOR RESPONSIBILITY AND DEBARMENT: The following requirements set forth in the County's Non-Responsibility and Debarment Ordinance (Title 2, Chapter 2.202 of the County Code) are effective for this Agreement, except to the extent applicable State and/or Federal laws are inconsistent with the terms of the Ordinance.

A. A responsible Contractor is a Contractor who has demonstrated the attribute of trustworthiness, as well as quality, fitness, capacity and experience to satisfactorily perform the contract. It is the County's policy to conduct business only with responsible contractors.

B. The Contractor is hereby notified that, in accordance with Chapter 2.202 of the County Code, if the County acquires information concerning the performance of the Contractor on this or other Agreements which indicates that the Contractor is not responsible, the County, may, in addition to other remedies provided in the Agreement, debar the Contractor from bidding or proposing on, or being awarded, and/or performing work on County Agreements for a specified period of time not to exceed 3 years, and terminate any or all existing Agreements the Contractor may have with the County.

C. The County may debar a Contractor if the Board of Supervisors finds, in its discretion, that the Contractor has done any of the following: (1) violated a term of an Agreement with the County or a nonprofit corporation created by the County, (2) committed an act or omission which negatively reflects on the Contractor's quality, fitness or capacity to perform a contract with the County, any other public entity, or a nonprofit corporation created by the County, or engaged in a pattern or practice

which negatively reflects on same, (3) committed an act or offense which indicates a lack of business integrity or business honesty, or (4) made or submitted a false claim against the County or any other public entity.

D. If there is evidence that the Contractor may be subject to debarment, the Department will notify the Contractor in writing of the evidence which is the basis for the proposed debarment and will advise the Contractor of the scheduled date for a debarment hearing before the Contractor Hearing Board.

E. The Contractor Hearing Board will conduct a hearing where evidence on the proposed debarment is presented. The Contractor and/or the Contractor's representative shall be given an opportunity to submit evidence at the hearing. After the hearing, the Contractor Hearing Board shall prepare a tentative proposed decision, which shall contain a recommendation regarding whether the Contractor should be debarred, and, if so, the appropriate length of time of the debarment. The Contractor and the Department shall be provided an opportunity to object to the tentative proposed decision prior to its presentation to the Board of Supervisors.

F. After consideration of any objections, or if no objections are submitted, a record of the hearing, the proposed decision any other recommendation of the Contractor Hearing Board shall be presented to the Board of Supervisors. The Board of Supervisors shall have the right to modify, deny or adopt the proposed decision and recommendation of the Hearing Board.

G. These terms shall also apply to subcontractors of County Contractors.

52. CONTRACTOR'S EXCLUSION FROM PARTICIPATION IN A FEDERALLY FUNDED PROGRAM: Contractor hereby warrants that neither it nor any of its staff members is restricted or excluded from providing services under any health care program funded by the Federal government, directly or indirectly, in whole or in part, and that Contractor will notify the Director within 30 calendar days in writing of: (1) any event that would require Contractor or a staff member's mandatory exclusion from participation in a Federally funded health care program; and (2) any exclusionary action taken by any agency of the Federal government against Contractor or one or more staff members barring it or the staff members from participation in a Federally funded health program, whether such bar is direct or indirect, or whether such bar is in whole or in part.

There are a variety of different reasons why an individual or entity may be excluded from participating in a Federally funded health care program. Sometimes, the exclusion is mandatory and in other cases the Office of Inspector General (OIG) has the discretion not to exclude.

The mandatory bases for exclusion include: (1) felony convictions for program related crimes, including fraud or false claims, or for offenses related to the dispensing or use of controlled substances, or (2) convictions related to patient abuse.

Permissive exclusions may be based on: (1) conviction of a misdemeanor related to fraud or financial misconduct involving a government program; (2) obstructing an investigation; (3) failing to

provide access to documents or premises as required by federal health care program officials; (4) conviction of a misdemeanor related to controlled substances; (5) failing to disclose information about the entity itself, its subcontractors or its significant business transactions; (6) loss of a state license to practice a health care profession; (7) default on a student loan given in connection with education in a health profession; (8) charging excessive amounts to a Federally funded health care program or furnishing services of poor quality or which are substantially in excess of the needs of the patients; (9) paying a kickback or submitting a false or fraudulent claim. Persons controlling or managing excluded entities who knew of the conduct leading to the exclusion can themselves be excluded, and entities which are owned and controlled by excluded individuals can also be excluded.

Contractor shall indemnify and hold County harmless against any and all loss or damage County may suffer arising from any Federal exclusion of Contractor or its staff members from such participation in a Federally funded health care program. Contractor shall provide the certification set forth in Attachment VI as part of its obligation under this Paragraph 52.

Failure by Contractor to meet the requirements of this Paragraph 52 shall constitute a material breach of contract upon which County may immediately terminate or suspend this Agreement.

53. CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION – LOWER TIER COVERED TRANSACTIONS (45 C.F.R. PART 76): The Contractor hereby acknowledges that the County is prohibited from contracting with and making sub-awards to parties that are suspended, debarred, ineligible, or excluded or whose principals are suspended, debarred, ineligible, or excluded from securing federally funded contracts. By executing this Agreement, Contractor certifies that neither it nor any of its owners, officers, partners, directors or other principals is currently suspended, debarred, ineligible, or excluded from securing federally funded contracts. Further by executing this Agreement, Contractor certifies that, to its knowledge, none of its subcontractors, at any tier, or any owner, officer, partner, director or other principal of any subcontractor is currently suspended, debarred, ineligible, or excluded from securing federally funded contracts. Contractor shall immediately notify County in writing, during the term of this Agreement, should it or any of its subcontractors or any principals of either be suspended, debarred, ineligible, or excluded from securing federally funded contracts. Failure of Contractor to comply with this provision shall constitute a material breach of this Agreement upon which the County may immediately terminate or suspend this Agreement.

54. HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT:

A. The parties acknowledge the existence of the Health Insurance Portability and Accountability Act of 1996 and its implementing regulations ('HIPAA'). Contractor understands and agrees that it is a *'Covered Entity'* under HIPAA and, as such, has obligations with respect to the confidentiality, privacy and security of patients' medical information, and must take certain steps to preserve the confidentiality of this information, both internally and externally, including the training of

staff and the establishment of proper procedures for the release of such information, including the use of appropriate consents and authorizations specified under HIPAA.

B. The parties acknowledge their separate and independent obligations with respect to HIPAA, and that such obligations relate to *transactions and code sets, privacy, and security*. Contractor understands and agrees that it is separately and independently responsible for compliance with HIPAA in all these areas and that County has not undertaken any responsibility for compliance on Contractor's behalf. Contractor has not relied, and will not in any way rely, on County for legal advice or other representations with respect to Contractor's obligations under HIPAA, but will independently seek its own counsel and take the necessary measures to comply with the law and its implementing regulations.

C. Contractor and County understand and agree that each is independently responsible for HIPAA compliance and agree to take all necessary and reasonable actions to comply with the requirements of the HIPAA Law and implementing regulations related to Transactions and Code Sets, Privacy, and Security. Each party further agrees to indemnify and hold harmless the other party (including their officers, employees, and agents), for its failure to comply with HIPAA.

55. COMPLIANCE WITH JURY SERVICE PROGRAM:

A. Jury Service Program: This Agreement is subject to the provisions of the County's ordinance entitled Contractor Employee Jury Service ("Jury Service Program") as codified in Sections 2.203.010 through 2.203.090 of the Los Angeles County Code.

B. Written Employee Jury Service Policy:

(1) Unless Contractor has demonstrated to the County's satisfaction either that Contractor is not a "Contractor" as defined under the Jury Service Program (Section 2.203.020 of the County Code) or that Contractor qualifies for an exception to the Jury Service Program (Section 2.203.070 of the County Code), Contractor shall have and adhere to a written policy that provides that its Employees shall receive from the Contractor, on an annual basis, no less than five days of regular pay for actual jury service. The policy may provide that Employees deposit any fees received for such jury service with the Contractor or that the Contractor deduct from the Employee's regular pay the fees received for jury service.

(2) For purposes of this Section, "Contractor" means a person, partnership, corporation or other entity which has an Agreement with the County or a subcontract with a County Contractor and has received or will receive an aggregate sum of $50,000 or more in any 12-month period under one or more County Agreements or subcontracts. "Employee" means any California resident who is a full-time employee of Contractor. "Full-time" means 40 hours or more worked per week or a lesser number of hours if: 1) the lesser number is a recognized industry standard as determined by the County, or 2) Contractor has a long-standing practice that defines the lesser number of hours as full-time. Full-time employees providing short-term, temporary services of 90 days or less

within a 12-month period are not considered full-time for purposes of the Jury Service Program. If Contractor uses any subcontractor to perform services for the County under the Agreement, the subcontractor shall also be subject to the provisions of this Section. The provisions of this Section shall be inserted into any such subcontract Agreement and a copy of the Jury Service Program shall be attached to the Agreement. If Contractor uses any subcontractor to perform services for the County under the Agreement, the subcontractor shall also be subject to the provisions of this Section. The provisions of this Section shall be inserted into any such subcontract Agreement and a copy of the Jury Service Program shall be attached to the Agreement.

(3) If Contractor is not required to comply with the Jury Service Program when the Agreement commences, Contractor shall have a continuing obligation to review the applicability of its "exception status" from the Jury Service Program, and Contractor shall immediately notify County if Contractor at any time either comes within the Jury Service Program's definition of "Contractor" or if Contractor no longer qualifies for an exception to the Program. In either event, Contractor shall immediately implement a written policy consistent with the Jury Service Program. The County may also require, at any time during the Agreement and at its sole discretion, that Contractor demonstrate to the County's satisfaction that Contractor either continues to remain outside of the Jury Service Program's definition of "Contractor" and/or that Contractor continues to qualify for an exception to the Program.

(4) Contractor's violation of this section of the Agreement may constitute a material breach of the Agreement. In the event of such material breach, County may, in its sole discretion, terminate the Agreement and/or bar Contractor from the award of future County Agreements for a period of time consistent with the seriousness of the breach."

56. NOTICE TO EMPLOYEES REGARDING THE SAFELY SURRENDERED BABY LAW: The Contractor shall notify and provide to its employees, and shall require each subcontractor to notify and provide to its employees, a fact sheet regarding the Safely Surrendered Baby Law, its implementation in Los Angeles County, and where and how to safely surrender a baby. The fact sheet is set forth in Attachment VII of this Agreement and is also available on the Internet at www.babysafela.org for printing purposes.

57. CONTRACTOR'S ACKNOWLEDGEMENT OF COUNTY'S COMMITMENT TO THE SAFELY SURRENDERED BABY LAW: The Contractor acknowledges that the County places a high priority on the implementation of the Safely Surrendered Baby Law. The Contractor understands that it is the County's policy to encourage all County Contractors to voluntarily post the County's "Safely Surrendered Baby Law" poster in a prominent position at the Contractor's place of business. The Contractor will also encourage its subcontractors, if any, to post this poster in a prominent position in the subcontractor's place of business. The County's Department of Children and Family Services will supply the Contractor with the poster to be used.

58. NOTICES: All notices or demands required or permitted to be given under this Agreement shall be in writing and shall be hand delivered with signed receipt or mailed by first class, registered or certified mail, postage pre-paid, addressed to the parties at the following addresses and to the attention of the persons named. Director shall have the authority to execute all notices or demands which are required or permitted by County under this Agreement. Addresses and persons to be notified may be changed by either party by giving ten (10) days prior written notice thereof to the other party.

For the County, please use the following contact information:

County of Los Angeles – Department of Mental Health
Contracts Development and Administration Division
550 South Vermont Avenue, 5th Floor
Los Angeles, CA 90020
Attention: Chief of Contracts

For the Contractor, please use the following contact information:

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IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Agreement to be subscribed by County's Director of Mental Health or his designee, and Contractor has caused this Agreement to be subscribed in its behalf by its duly authorized officer, the day, month, and year first above written.

COUNTY OF LOS ANGELES

By _____
MARVIN J. SOUTHARD. D.S.W.
Director of Mental Health

_____
CONTRACTOR

By _____

Name _____

Title _____
(AFFIX CORPORATE SEAL HERE)

APPROVED AS TO FORM
OFFICE OF THE COUNTY COUNSEL

APPROVED AS TO CONTRACT
ADMINISTRATION:

DEPARTMENT OF MENTAL HEALTH

By _____
Chief, Contracts Development and
Administration Division

EM:FFS Contract Format
Revised 11/17/2004 9:40 AM

SERVICE EXHIBIT A
PSYCHIATRIC INPATIENT HOSPITAL SERVICES
(MODE OF SERVICE 05)

1. STATEMENT OF WORK:

The quality improvement efforts of the Medi-Cal system, as operated by the Los Angeles County Department of Mental Health (DMH), designated by the State Department of Mental Health (SDMH) as the Local Mental Health Plan (LMHP), includes ensuring comprehensive quality services for Medi-Cal plan beneficiaries. DMH contracts for acute Inpatient Hospital Services, Administrative Day Services provided by Lanterman-Petris-Short (LPS) designated hospitals to detain, evaluate and provide treatment to patients pursuant to Welfare and Institutions Code (WIC) Section 5150. The purpose of this agreement is to contract with qualified providers of acute Psychiatric Inpatient Hospital Services, Administrative Day Services provided by hospitals with LPS designation to detain, evaluate and provide treatment to patients pursuant to Welfare and Institutions Code (WIC) Section 5150.

2. GENERAL: Psychiatric Inpatient Hospital Services include Acute Psychiatric Inpatient Hospital Services and Administrative Day Services. Each Contractor facility that renders Psychiatric Inpatient Hospital Services shall: (1) be either a licensed acute psychiatric hospital or a distinct acute psychiatric part of a licensed general acute care hospital, (2) be secure, (3) meet all CCR Titles 9 and 22 staffing standards for inpatient services, (4) provide a twenty-four hour psychiatric treatment program and (5) be eligible, as determined by DMH, as a facility to detain and treat patients under WIC Section 5150.

LPS designation is authorized by state law through the Local Mental Health Director (Director). This designation allows facilities to evaluate and treat persons involuntarily detained under the Lanterman-Petris-Short (LPS) Act. This designation will be granted to those facilities, who fully comply with the criteria and process requirements set forth in the "Los Angeles County Department of Mental Health LPS Designation Guidelines and Process For Facilities Within Los Angeles County" Third Edition effective September 2004.

Psychiatric Inpatient Hospital Services shall not include any services related to alcohol or substance abuse and these services shall not be reimbursable under this Agreement, except where the services related to alcohol or substance abuse are incidental to a primary diagnosis of mental illness. Where alcohol and substance abuse, and mental illness, are dually diagnosed, Psychiatric Inpatient Hospital Services may be reimbursed under this Agreement only if the primary diagnosis is mental illness.

Notwithstanding any other provision of this Agreement, except as specifically approved in writing by the Director or his designee, Contractor shall assure that at no time: (1) shall any child or adolescent under the age of 18 years receive any Psychiatric Inpatient Hospital Services in a ward or

unit designated for adults receiving Psychiatric Inpatient Hospital Services and (2) shall any adult receive any Psychiatric Inpatient Hospital Services in a ward or unit designated for children or adolescents under the age of 18 years receiving Psychiatric Inpatient Hospital Services.

Psychiatric Inpatient Hospital Services are generally described in the Medi-Cal Psychiatric Inpatient Hospital Services Consolidation Emergency Regulations issued by SDMH.

3. PERSONS TO BE SERVED:

A. Contractor shall provide Acute Psychiatric Inpatient Hospital Services to those Beneficiaries: (1) who are in need of Acute Psychiatric Inpatient Hospital Services, (2) who have the characteristics described in the Contract Package and any addenda thereto, as approved in writing by the Director, or his designee, (3) for whom County is responsible for determining eligibility for Medi-Cal in accordance with CCR Title 22, and (4) who are referred to Contractor by practitioners in the community or admitted with the consent of the Director or his designee.

B. Contractor shall provide Administrative Day Services to those Beneficiaries: (1) who have been provided Acute Psychiatric Inpatient Hospital Services and are ready for non-acute psychiatric services, (2) who have the characteristics described in the Contract Package and any addenda thereto, as approved in writing by the Director or his designee, (3) for whom County is responsible for determining eligibility for Medi-Cal in accordance with CCR Title 22, and (4) who are referred to Contractor by practitioners in the community or admitted with the consent of the Director or his designee .

C. The duration of any Beneficiary's Acute Psychiatric Inpatient Hospital Services hereunder shall not exceed the lesser of: (1) those days necessary to ensure that the Beneficiary is not a danger to self or others or gravely disabled due to a mental disability or (2) those days when it is unsafe or inappropriate to treat the Beneficiary at a non-acute level of care, or (3) those days authorized by the Director or his designee. The duration of any Beneficiary's Administrative Day Services hereunder shall not exceed those days necessary to obtain non-acute psychiatric services at a lower level of care appropriate to the Beneficiary's need.

4. HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA):

In accordance with the Health Insurance Portability and Accountability Act (HIPAA), Contractor(s) shall have effective systems and procedures fully implemented to ensure the confidentiality, security, integrity, and accessibility of patient health information, including a plan for the storage and protection of filed medical records to protect against any/all unauthorized access, intrusion and damage.

5. PERSONNEL/STAFFING: The minimum ratio of full-time professional personnel/staff to resident patients shall at all times be in conformance with all relevant laws, regulations, rules and

DMH policies and procedures.

In addition, the facility must determine staffing requirements based on assessment of patient needs, as per CCR Sections 71213 and 71215. Contractor(s) shall, upon request, make available for review to the Director or his designee documentation of the methodology used in making staffing determinations.

6. PSYCHIATRIC EMERGENCY RESPONSE: Contractors shall not maintain, utilize, or otherwise arrange for mobile 5150 assessment personnel or processes outside the confines of the Contractor's facility without the written consent of the Director, or his designee.

7. TEMPORARY ABSENCES OF BENEFICIARIES FROM CONTRACTOR'S FACILITY(IES):

Contractor may be reimbursed for temporary absences of Beneficiaries from Contractor's facility(ies) where: (1) the Beneficiaries are expected to return to Contractor's facility(ies) and (2) the temporary absences are therapeutically indicated and approved in writing by the Director or his designee. Reimbursement for temporary absences shall be claimed by Contractor at the Contract Allowable Rate for Administrative Day Services.

The purpose and plan of each temporary absence, including, but not limited to, specified leave and return dates, shall be incorporated in progress notes in the Beneficiary's case record.

8. EMERGENCY MEDICAL TREATMENT: Beneficiaries who are provided services hereunder and who require emergency medical care for physical illness or accident shall be transported to an appropriate medical facility. The cost of such transportation as well as the cost of any emergency medical care shall not be a charge to, nor reimbursable under, this Agreement. Contractor shall establish and post written procedures describing appropriate action to be taken in the event of a medical emergency. Contractor shall also post and maintain a disaster and mass casualty plan of action in accordance with CCR Title 22, Section 80023. Such plan and procedures shall be submitted to DMH's Contracts Development and Administration Division at least ten days prior to the commencement of services under this Agreement.

9. NOTICE OF ACTION: Pursuant to the SDMH regulations, Contractor shall give a Beneficiary, and the individual(s) responsible for the Beneficiary, a written notice of action in a manner and form as required by SDMH, whenever reimbursement for an admission and/or services is denied, and/or whenever continued stay services are reduced or terminated by County (mental health plan) while the Beneficiary remains in Contractor facility(ies). To confirm such notices have been provided to the Beneficiary and the individual(s) responsible for the Beneficiary, Contractor shall submit a copy of such notices to the Director or his designee no later than three (3) working days following notice to the Contractor of any denial of reimbursement, reduction or termination of services.

10. STATE FAIR HEARING: Contractor shall comply with the procedures and requirements for State's Fair hearing process as described in CCR Title 22, Section(s) 50951 and 50953 and shall be in accordance with DMH's Quality Management Plan.

11. NOTIFICATION OF DEATH: Contractor shall immediately notify the Director or his designee, upon becoming aware of the death of any Beneficiary provided services hereunder. Notice shall be made by Contractor immediately by telephone and in writing upon learning of such a death. The verbal and written notice shall include the name of the deceased, the deceased's Integrated System (IS) identification number, the date of death, a summary of the circumstances thereof, and the name(s) of all Contractor's staff with knowledge of the circumstances.

12. QUALITY ASSURANCE AND IMPROVEMENT: Contractor shall comply with all applicable provisions of WIC, CCR, Code of Federal Regulations, SDHS policies and procedures, SDMH policies and procedures, and DMH quality improvement and assurance policies and procedures, to establish and maintain a complete and integrated quality improvement system. Contractor shall comply with LMHP's quality assurance efforts and specified procedures regarding hospitalization of Assertive Community Treatment (ACT) AB 2034 and Intensive Service Recipients (ISRs) (those clients with six (6) or more acute psychiatric hospitalizations in a twelve (12) month period) intended to ensure quality of care for plan beneficiaries. Specifically Contractor shall make every reasonable effort to contact the Single Fixed Point of Responsibility (SFPR) prior to admission but no later than 24 hours after admission to coordinate treatment and discharge planning. In conformance with these provisions, Contractor shall establish: (1) a utilization review process; (2) an interdisciplinary peer review of the quality of Beneficiary care; and (3) monitoring of medication regimens of Beneficiaries. Medication monitoring shall be conducted in accordance with County policy. A copy of Contractor's quality improvement system plan shall be available to DMH's Quality and Outcome Bureau for review and written approval prior to Contractor's submission of any claims for services hereunder.

13. BENEFICIARY EVALUATION OF CONTRACTOR'S SERVICES: Contractor shall provide a written questionnaire to certain Beneficiaries at the time of admission in accordance with DMH policies and procedures. The questionnaire shall be approved by SDHS and offer the Beneficiary the opportunity to evaluate the care given. The questionnaire shall be collected at the time of discharge and maintained in Contractor's file for at least four years and shall be made available to authorized agents of County, State and/or Federal governments.

14. CONTRACTOR'S OBLIGATION TO ATTEND/PARTICIPATE IN MEETINGS:

Contractor's appropriately qualified clinical staff shall regularly attend and participate in the all discharge planning meetings/activities involving the Los Angeles County Departments of Children and Family Services, Mental Health, Probation, and other meetings DMH determines relevant to the provision of services.

Contractor(s) staff, representing the facility and specifically the Acute Inpatient Psychiatric program, will work collaboratively with Geographic/Service Area Managers to develop a partnership for the purpose of improving continuity and quality of care for Beneficiaries. Such collaboration shall include attendance at Service Area Impact Unit meetings.

Contractor shall provide weekly meetings for hospitalized Beneficiaries to discuss the treatment plan, interventions, progress toward goals, and suggested modifications of same. To ensure coordination of care, Contractor shall include the SFPR for intensive case management clients (e.g. ACT ISRs, and AB 2034) in weekly treatment planning meetings.

15. NOTIFICATION OF EVALUATION AND/OR ADMISSION:

Contractor(s) shall request information from, and must involve, mental health care entities providing services to the Beneficiary in order to support continuity of care.

If the Beneficiary is receiving care from DMH, Contractor's evaluating professional staff must first attempt to obtain information regarding treatment from the DMH designated SFPR as indicated in the DMH IS, or from the Beneficiary, or significant other. If such information cannot be obtained from the IS Client Identification Screen, Beneficiary, or significant other, then the evaluating professional staff must contact 1-800-854-7771 to request information regarding the DMH designated SFPR.

Contractor shall notify and coordinate care with the SFPR regarding all Medi-Cal acute psychiatric inpatient admissions in conformance with DMH policies and procedures relative to admission, inpatient care planning, discharge and follow-up related to the status of the client as identified on the IS Client Identification Screen. Failure to notify the SFPR may result in negative consequences. For clients identified as ISR, the Contractor shall participate in Service Area planning meetings (e.g. Impact Unit meetings) to coordinate and improve the coordination of care for this population. If the Beneficiary has been pre-assigned to a specific hospital, contractor will transfer the Beneficiary as directed by the SFPR, unless transfer is deemed to seriously compromise the safety of Beneficiary or the community.

Contractor will notify Office of the Public Guardian of the admission of any Beneficiaries who are publicly conserved. In the event Beneficiaries are not publicly conserved, Contractor shall, as deemed necessary by the contractor, evaluate clients regarding their need for conservatorship and will be obligated to pursue conservatorship for qualifying individuals. Contractor shall notify Office of the Public Guardian in a timely manner of any Beneficiaries with a need to be conserved (e.g., on the 10th day of a 14 day hold Contractor will have responsibility for transporting inpatients to and from conservatorship hearings.

16. PROGRAM ELEMENTS FOR ACUTE PSYCHIATRIC INPATIENT HOSPITAL SERVICES:

Contractor shall provide Acute Psychiatric Inpatient Hospital Services to Beneficiaries in accordance with Contractor's Contract Package and any addenda thereto, as approved in writing by the Director, for the term of this Agreement.

Acute Psychiatric Inpatient Hospital Services consist of twenty-four hour intensive service in a facility, which is a licensed acute psychiatric hospital or a distinct acute psychiatric part of a licensed general acute care hospital, that provides psychiatric treatment with the specific intent to ameliorate the symptoms of danger to self, others, or the inability to provide for food, clothing and

shelter due to a mental disability as determined by qualified mental health professional staff of the facility. Acute Psychiatric Inpatient Hospital Services shall include, but are not limited to:

A. Twenty-four (24) hour a day, seven day a week mental health admission, evaluation, referral, and treatment services, and all necessary mental health treatment and care required for the entire period the individual is in the facility. (WIC 5152);

B. Services provided in conformance to all provisions in the Welfare and Institutions Code Division 5, and accompanying regulations, and Department policies regarding treatment, evaluations, patients' rights, and due process;

C. Safe and clean living environment with adequate lighting, clean toilet and bathing facilities, hot and cold water, toiletries, and a change of laundered bedding;

D. Three balanced and complete meals each day;

E. Twenty-four hour supervision of all Beneficiaries by properly trained personnel. Such supervision shall include, but is not limited to, personal assistance in such matters as eating, personal hygiene, dressing and undressing, and taking of prescribed medications;

F. Physical examination and medical history within twenty-four hours of admission;

G. Laboratory services when medically indicated;

H. X-Rays;

I. Electrocardiograms (EKG) and electroencephalograms (EEG);

J. Medication supervision and/or maintenance program;

K. Support to psychiatric treatment services, including, but not limited to, daily patient review;

L. Support to psychological services;

M. Social work services;

N. Nursing services;

O. Recreational therapy services;

P. Occupational therapy services;

Q. Electroconvulsive therapy services when appropriate in accordance with WIC Section 5326.7 et seq.;

R. Ongoing self-monitoring and analysis of numbers of seclusion and restraint episodes involving the staff on the unit(s) so the staff are apprised of the results of the ongoing monitoring Compliance with all Seclusion and Restraints statutes and regulations.

S. Recommendation for further treatment, conservatorship, or referral to other existing programs, as appropriate (i.e., day care, outpatient, etc.), relative to Beneficiary needs; (The form that will be used to convey this aftercare plan will be the DMH form titled, AFTERCARE/DISCHARGE PLAN AND RECOMMENDATIONS).

S. Honoring the preference of the Beneficiary and/or the parent of a minor, conservator, or legal guardian for the type and location of the desired treatment facility if administratively feasible and clinically appropriate.

U. Substantial consideration of the proximity of the designated facility to the patient's own community, family and support system. Alternatives to taking a patient to a more distant facility should be considered and documented on the off-site assessment form.

V. Contractor shall as required by the SDMH, provide upon admission the Therapeutic Behavioral Services (TBS) notice, and the general Early Periodic Screening Diagnosis and Treatment (EPDST) informational notice, both prepared by the SDMH pertaining to all children qualified as Medi-Cal beneficiaries under the age of 21, admitted with an emergency psychiatric condition to the beneficiary's representative and/or adult responsible for the child at the same time such notices are provided to the child being treated by the Contractor and document in the patient record that these notifications have been made.

W. Aftercare/discharge plan and procedures:

1) Contractor(s) shall ensure that Beneficiaries have a discharge plan. The DMH FFS liaison and SFPR will participate in the development of the discharge plan. Reasonable efforts shall be made to ensure that all beneficiaries have appropriate housing or residence upon discharge. This plan will include a specific appointment or time at which Beneficiaries are expected to appear at an outpatient site. If the patient has a conservator, either a private conservator or the Public Guardian as temporary conservator or permanent conservator, the hospital must involve the conservator in the discharge process, give prior notice before discharge and obtain, or document efforts to obtain, the conservator's approval prior to discharge.

2) Contractor shall maintain a comprehensive and current referral source list, including all relevant treatment resources in the beneficiary's area.

3) If the Beneficiary requires continuous care and treatment, Contractor(s) shall ensure that, upon discharge, Beneficiaries receive appropriate referrals to community agencies and suitable placement, as evidenced by documentation in the Discharge and Aftercare Plan stipulating the following:

a.) Beneficiaries will only be placed in licensed facilities;

b.) Contractor(s) shall implement and administer procedures for ensuring that all referrals to community placements, for continued care and treatment are to clean, safe and

supervised environments; and

c.) Contractor(s) serving older adults will adhere to the following recommendations developed by the DMH Office of the Medical Director: "Parameters for the Initial Psychiatric Assessment of Older Adults in Emergency Rooms and on Inpatient Units" and "Parameters for Discharge Planning for Older Adults.

X. Subsequent to discharge of a Medi-Cal beneficiary, submission of a formal written aftercare plan to the LMHP's system of care, appropriate area DMH program agency responsible for coordinating care for the Medi-Cal beneficiary being discharged. A copy of the aftercare plan shall be attached to the Provider's completed Treatment Authorization Request (TAR) form which is submitted to the LMHP upon discharge of the beneficiary from the Provider's facility.

Y. Submission of a formal written aftercare plan to the Director, or his designee, at the time of discharge of the beneficiary.

Z. Maintenance of a daily attendance log and appropriate documentation of each day of service provided hereunder in accordance with State regulatory (Title 9, Chapter 11) medical necessity reimbursement requirements.

17. PROGRAM ELEMENTS FOR ADMINISTRATIVE DAY SERVICES: Contractor shall provide Administrative Day Services to Beneficiaries in accordance with Contractor's Contract Package and any addenda thereto, as approved in writing by the Director, for the term of this Agreement.

Administrative Day Services consist of twenty-four hour service for a room in a facility, which is a licensed acute psychiatric hospital or a distinct acute psychiatric part of a licensed general acute care hospital, with less than full psychiatric treatment being provided where the Beneficiary is ready for a lower level of psychiatric services. Administrative Day Services are the services necessary to provide room and board after all attempts at providing non-acute psychiatric services have been exhausted and shall apply to a Beneficiary awaiting such non-acute psychiatric services. The facility shall implement and document an active placement effort on behalf of each Beneficiary each day, excluding Saturdays, Sundays, and County-observed holidays, until such time as the Beneficiary is successfully placed or no longer requires additional treatment.

Administrative Day Services shall include, but are not limited to:

A. Safe and clean living environment with adequate lighting, toilet and bathing facilities, hot and cold water, toiletries, and a change of laundered bedding;

B. Three balanced and complete meals each day;

C. Twenty-four hour supervision of all Beneficiaries by properly trained personnel. Such supervision shall include, but is not limited to, personal assistance in such matters as eating, personal hygiene, dressing and undressing, and taking of prescribed

medications;

D. Social work services;

E. Nursing services;

F. Recommendation for further treatment, conservatorship, or referral to other existing programs, as appropriate (i.e., day care, outpatient, etc.), relative to Beneficiary needs;

G. Subsequent to discharge of a Medi-Cal beneficiary, submission of a formal written aftercare plan to the LMHP's DMH System of Care program agency DMH is responsible for coordinating care for the Medi-Cal beneficiary being discharged. A copy of the aftercare plan shall be attached to the Provider's completed Treatment Authorization Request (TAR) form that is submitted to the LMHP upon discharge of the beneficiary from the Provider's facility.

H. Submission of a formal written aftercare plan to the Director or his designee, at the time of discharge of the Beneficiary.

I. Maintenance of a daily attendance log and appropriate documentation for each day of service provided hereunder in accordance with State regulatory (Title 9, Chapter 11) medical necessity reimbursement requirements.

J. Compliance with the LMHP's quality assurance efforts intended to ensure quality of care for plan beneficiaries.

CONTRACTOR EMPLOYEE
ACKNOWLEDGEMENT OF EMPLOYER

I understand that _____, is my sole employer for purposes of this employment.

I rely exclusively upon_____, for payment of all salary and any and all other benefits payable to me or on my behalf during the period of this employment.

I understand and agree that I am not an employee of Los Angeles County for any purpose whatsoever and that I do not have and will not acquire any rights or benefits of any kind from the County of Los Angeles during the period of this employment.

I understand and agree that I do not have an will not acquire any rights or benefits pursuant to any contract between my employer, _____, and the County of Los Angeles.

ACKNOWLEDGED AND RECEIVED:

NAME: _____

DATE: _____

NAME: _____
Print

When completed, this form must be maintained on file by CONTRACTOR in accordance with all applicable County, State and Federal requirements and made available for inspection and/or audit by authorized representatives of County, State, and/or Federal governments.

SUBCONTRACT(S)

Contractor's request to County shall include:

1. The reasons for the particular subcontract.

2. A detailed description of the services to be provided by the subcontract.

3. Identification of the proposed subcontractor and an explanation of why and how the proposed subcontractor was selected, including the degree of competition involved.

4. A description of the proposed subcontract amount and manner of compensation, together with Contractor's cost or price analysis thereof.

5. A copy of the proposed subcontract which shall contain the following provision: "This contract is a subcontract under the terms of the prime contract with the County of Los Angeles and shall be subject to all of the provisions of such prime contract."

6. Any other information and/or certifications requested by County.

Contractor shall remain responsible for any and all performance required of it under this Agreement.

Contractor shall indemnify and hold harmless County, its officers, employees, and agents from and against any and all liability, damages, costs, and expenses, including, but not limited to, defense costs and legal fees, arising from or related to Contractor's use of any subcontractor, including any officers, employees, or agents of any subcontractor, in the same manner as required for contractor, its officers, employees and agents, under this Agreement.

This list in no way limits the terms and conditions as set forth in Paragraph 27 (SUBCONTRACTING).

NOTE: Contractor must have prior written approval from County in order to enter a particular subcontract and all requests must be in writing.

SUBCONTRACTOR EMPLOYEE ACKNOWLEDGEMENT OF EMPLOYER

I understand that _____, is my sole employer for purposes of this employment.

I rely exclusively upon_____, for payment of all salary and any and all other benefits payable to me or on my behalf during the period of this employment.

I understand and agree that I am not an employee of Los Angeles County for any purpose whatsoever and that I do not have an will not acquire any rights or benefits of any kind from the County of Los Angeles during the period of this employment.

I understand and agree that I do not have and will not acquire any rights or benefits pursuant to any subcontract between my employer, _____, and any person or entity which has a prime contract with the County of Los Angeles.

ACKNOWLEDGED AND RECEIVED:

NAME: _____

DATE: _____

NAME: _____
Print

When completed, this form must be maintained on file by CONTRACTOR in accordance with all applicable County, State and Federal requirements and made available for inspection and/or audit by authorized representatives of County, State, and/or Federal governments.

ATTESTATION REGARDING FEDERALLY FUNDED PROGRAMS

In accordance with the DMH Mental Health Services Contract Allowable Rate Fee-For Services Medi-Cal Psychiatric Inpatient Hospital Services Agreement's Paragraph 52 (CONTRACTOR'S EXCLUSION FROM PARTICIPATION IN A FEDERALLY FUNDED PROGRAM):

I, the undersigned certify that I am not presently excluded from participation in federally funded health care programs, nor is there an investigation presently pending or recently concluded of me which is likely to result in my exclusion from any federally funded health care program, nor am I otherwise likely to be found by a federal or state agency to be ineligible to provide goods or services under the federally funded health care programs.

I further certify as the official responsible for the administration of _____ _____, (hereafter "Contractor") that all of its officers, employees, agents and/or sub-contractors are not presently excluded from participation in any federally funded health care programs, nor is there an investigation presently pending or recently concluded of any such officers, employees, agents and/or sub-contractors which is likely to result in an exclusion from any federally funded health care program, nor are any of its officers, employees, agents and/or sub-contractors otherwise likely to be found by a federal or state agency to be ineligible to provide goods or services under the federally funded health care programs.

I understand and certify that I will notify DMH within thirty (30) calendar days, in writing of:

- Any event that would require Contractor or any of its officers, employees, agents and/or sub-contractors exclusion or suspension under federally funded health care programs, or
- Any suspension or exclusionary action taken by an agency of the federal or state government against Contractor, or one or more of its officers, employees, agents and/or sub-contractors, barring it or its officers, employees, agents and/or sub-contractors from providing goods or services for which federally funded healthcare program payment may be made.

Name of authorized official _____
Please print name

Signature of authorized official _____ Date _____

Attestation

No shame.
No blame.
No names.

Newborns can be safely given up at any Los Angeles County hospital emergency room or fire station.

In Los Angeles County:
1-877-BABY SAFE
1-877-222-9723
www.babysafela.org

State of California
Gray Davis, Governor

Health and Human Services Agency
Grantland Johnson, Secretary

Department of Social Services
Rita Saenz, Director

Los Angeles County Board of Supervisors
Gloria Molina, Supervisor, First District
Yvonne Brathwaite Burke, Supervisor, Second District
Zev Yaroslavsky, Supervisor, Third District
Don Knabe, Supervisor, Fourth District
Michael D. Antonovich, Supervisor, Fifth District

This initiative is also supported by First 5 LA and INFO LINE of Los Angeles.

What is the Safely Surrendered Baby Law?

California's Safely Surrendered Baby Law allows parents to give up their baby confidentially. As long as the baby has not been abused or neglected, parents may give up their newborn without fear of arrest or prosecution.

How does it work?

A distressed parent who is unable or unwilling to care for a baby can legally, confidentially and safely give up a baby within three days of birth. The baby must be handed to an employee at a Los Angeles County emergency room or fire station. As long as the child shows no signs of abuse or neglect, no name or other information is required. In case the parent changes his or her mind at a later date and wants the baby back, workers will use bracelets to help connect them to each other. One bracelet will be placed on the baby, and a matching bracelet will be given to the parent.

What if a parent wants the baby back?

Parents who change their minds can begin the process of reclaiming their newborns within 14 days. These parents should call the Los Angeles County Department of Children and Family Services at 1-800-540-4000.

Can only a parent bring in the baby?

In most cases, a parent will bring in the baby. The law allows other people to bring in the baby if they have legal custody.

Does the parent have to call before bringing in the baby?

No. A parent can bring in a baby anytime, 24 hours a day, 7 days a week so long as the parent gives the baby to someone who works at the hospital or fire station.

Does a parent have to tell anything to the people taking the baby?

No. However, hospital personnel will ask the parent to fill out a questionnaire designed to gather important medical history information, which is very useful in caring for the child. Although encouraged, filling out the questionnaire is not required.

What happens to the baby?

The baby will be examined and given medical treatment, if needed. Then the baby will be placed in a pre-adoptive home.

What happens to the parent?

Once the parent(s) has safely turned over the baby, they are free to go.

Why is California doing this?

The purpose of the Safely Surrendered Baby Law is to protect babies from being abandoned by their parents and potentially being hurt or killed. You may have heard tragic stories of babies left in dumpsters or public bathrooms. The parents who committed these acts may have been under severe emotional distress. The mothers may have hidden their pregnancies, fearful of what would happen if their families found out. Because they were afraid and had nowhere to turn for help, they abandoned their infants. Abandoning a baby puts the child in extreme danger. It is also illegal. Too often, it results in the baby's death. Because of the Safely Surrendered Baby Law, this tragedy doesn't ever have to happen in California again.

A baby's story

At 8:30 a.m. on Thursday, July 25, 2002, a healthy newborn baby was brought to St. Bernardine Medical Center in San Bernardino under the provisions of the California Safely Surrendered Baby Law. As the law states, the baby's mother did not have to identify herself. When the baby was brought to the emergency room, he was examined by a pediatrician, who determined that the baby was healthy and doing fine. He was placed with a loving family while the adoption process was started.

Every baby deserves a chance for a healthy life. If someone you know is considering abandoning a newborn, let her know there are other options.

It is best that women seek help to receive proper medical care and counseling while they are pregnant. But at the same time, we want to assure parents who choose not to keep their baby that they will not go to jail if they deliver their babies to safe hands in any Los Angeles County hospital ER or fire station.

Sin pena.
Sin culpa.
Sin peligro.

Los recién nacidos pueden ser entregados en forma segura en la sala de emergencia de cualquier hospital o en un cuartel de bomberos del Condado de Los Angeles.

En el Condado de Los Angeles:
1-877-BABY SAFE
1-877-222-9723
www.babysafela.org

Estado de California
Gray Davis, Gobernador

Agencia de Salud y Servicios Humanos
(Health and Human Services Agency)
Grantland Johnson, Secretario

Departamento de Servicios Sociales
(Department of Social Services)
Rita Saenz, Directora

Consejo de Supervisores del Condado de Los Angeles
Gloria Molina, Supervisora, Primer Distrito
Yvonne Brathwaite Burke, Supervisora, Segundo Distrito
Zev Yaroslavsky, Supervisor, Tercer Distrito
Don Knabe, Supervisor, Cuarto Distrito
Michael D. Antonovich, Supervisor, Quinto Distrito

Esta Iniciativa tambien esta apollada por First 5 LA y INFO LINE de Los Angeles.

¿Qué es la Ley de Entrega de Bebés Sin Peligro?

La Ley de Entrega de Bebés Sin Peligro de California permite a los padres entregar a su recién nacido confidencialmente. Siempre que el bebé no haya sufrido abuso ni negligencia, padres pueden entregar a su recién nacido sin temor a ser arrestados o procesados.

¿Cómo funciona?

El padre/madre con dificultades que no pueda o no quiera cuidar de su recién nacido puede entregarlo en forma legal, confidencial y segura, dentro de los tres días del nacimiento. El bebé debe ser entregado a un empleado de una sala de emergencias o de un cuartel de bomberos del Condado de Los Angeles. Siempre que el bebé no presente signos de abuso o negligencia, no será necesario suministrar nombres ni información alguna. Si el padre/madre cambia de opinión posteriormente y desea recuperar a su bebé, los trabajadores utilizarán brazaletes para poder vincularlos. El bebé llevará un brazalete y el padre/madre recibirá un brazalete igual.

¿Qué pasa si el padre/madre desea recuperar a su bebé?

Los padres que cambien de opinión pueden empezar el proceso de reclamar a su recién nacido dentro de los 14 días. Estos padres deberán llamar al Departamento de Servicios para Niños y Familias (Department of Children and Family Services) del Condado de Los Angeles, al 1-800-540-4000.

¿Sólo los padres podrán llevar al recién nacido?

En la mayoría de los casos, los padres son los que llevan al bebé. La ley permite que otras personas lleven al bebé si tienen la custodia legal del menor.

¿Los padres deben llamar antes de llevar al bebé?

No. El padre/madre puede llevar a su bebé en cualquier momento, las 24 horas del día, los 7 días de la semana, mientras que entregue a su bebé a un empleado del hospital o de un cuartel de bomberos.

¿Es necesario que el padre/madre diga algo a las personas que reciben al bebé?

No. Sin embargo, el personal del hospital le pedirá que llene un cuestionario con la finalidad de recabar antecedentes médicos importantes, que resultan de gran utilidad para los cuidados que recibirá el bebé. Es recomendado llenar este cuestionario, pero no es obligatorio hacerlo.

¿Qué ocurrirá con el bebé?

El bebé será examinado y, de ser necesario, recibirá tratamiento médico. Luego el bebé se entregará a un hogar preadoptivo.

¿Qué pasará con el padre/madre?

Una vez que los padres hayan entregado a su bebé en forma segura, serán libres de irse.

¿Por qué California hace esto?

La finalidad de la Ley de Entrega de Bebés Sin Peligro es proteger a los bebés del abandono por parte de sus padres y de la posibilidad de que mueran o sufran daños. Usted probablemente haya escuchado historias trágicas sobre bebés abandonados en basureros o en baños públicos. Es posible que los padres que cometieron estos actos hayan estado atravesando dificultades emocionales graves. Las madres pueden haber ocultado su embarazo, por temor a lo que pasaría si sus familias se enteraran. Abandonaron a sus recién nacidos porque tenían miedo y no tenían adonde recurrir para obtener ayuda. El abandono de un recién nacido lo pone en una situación de peligro extremo. Además es ilegal. Muy a menudo el abandono provoca la muerte del bebé. Ahora, gracias a la Ley de Entrega de Bebés Sin Peligro, esta tragedia ya no debe suceder nunca más en California.

Historia de un bebé

A las 8:30 a.m. del jueves 25 de julio de 2002, se entregó un bebé recién nacido saludable en el St. Bernardine Medical Center en San Bernardino, en virtud de las disposiciones de la Ley de Entrega de Bebés Sin Peligro. Como lo establece la ley, la madre del bebé no se tuvo que identificar. Cuando el bebé llegó a la sala de emergencias, un pediatra lo revisó y determinó que el bebé estaba saludable y no tenía problemas. El bebé fue ubicado con una buena familia, mientras se iniciaban los trámites de adopción.

Cada recién nacido merece una oportunidad de tener una vida saludable. Si alguien que usted conoce está pensando en abandonar a un recién nacido, infórmele qué otras opciones tiene.

Es mejor que las mujeres busquen ayuda para recibir atención médica y asesoramiento adecuado durante el embarazo. Pero al mismo tiempo, queremos asegurarles a los padres que optan por no quedarse con su bebé que no irán a la cárcel si dejan a sus bebés en buenas manos en cualquier sala de emergencia de un hospital o en un cuartel de bomberos del Condado de Los Angeles.

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
CONTRACTS DEVELOPMENT AND ADMINISTRATION DIVISION

FEE-FOR-SERVICES MEDI-CAL
PSYCHIATRIC INPATIENT HOSPITAL SERVICES AGREEMENTS

SERVICE AREA	CONTRACTOR	SUPV. DIST.	CONTRACTOR PSYCHIATRIC BED CAPACITY ADULT	CHILD	ADOL.	TOTAL	TYPE OF HOSP.	AGREEMENT TERM	CONTRACT ALLOWABLE RATE *APIHS	CONTRACT ALLOWABLE RATE **ADS
1	Antelope Valley Hospital 1600 West Avenue J Lancaster, CA 93534 (1)	5	18	-	-	18	+GACH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03
3	Aurora Charter Oak 1161 E. Covina Boulevard Covina, CA 91724 (2)	5	50	-	45	95	++APH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03
3	Aurora Las Encinas Hospital 2900 E. Del Mar Boulevard Pasadena, CA 91107 (3)	5	118	20	-	138	++APH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03
7	Bellflower Medical Center 9542 E. Artesia Boulevard Bellflower, CA 90706 (4)	4	32	-	-	32	+GACH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03
3	BHC Alhambra Hospital 4619 Rosemead Boulevard Rosemead, CA 91770 (5)	1	30	55	-	85	++APH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03
5	Brotman Medical Center 3828 Delmas Terrace Culver City, CA 90231 (6)	2	70	-	-	70	+GACH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03

* Acute Psychiatric Inpatient Hospital Services (APIHS)
** Administrative Day Services (ADS)
\+ General Acute Care Hospital (GACH)
++ Acute Psychiatric Hospital (APH)
+++ Child beds included in the Adolescent (ADOL.) column

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
CONTRACTS DEVELOPMENT AND ADMINISTRATION DIVISION

FEE-FOR-SERVICES MEDI-CAL
PSYCHIATRIC INPATIENT HOSPITAL SERVICES AGREEMENTS

SERVICE AREA	CONTRACTOR	SUPV. DIST.	CONTRACTOR PSYCHIATRIC BED CAPACITY ADULT	CHILD	ADOL.	TOTAL	TYPE OF HOSP.	AGREEMENT TERM	CONTRACT ALLOWABLE RATE *APIHS	CONTRACT ALLOWABLE RATE **ADS
4	Cedars-Sinai Medical Center 8730 Alden Drive Los Angeles, CA 90048 (7)	3	68	-	-	68	+GACH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03
3	Intercare Health Systems City of Angeles Med. Ctr. - Ingleside Campus 7500 E. Hellman Avenue Rosemead, CA 91770 (8)	1	70	-	-	70	++APH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03
7	College Hospital-Cerritos 1802 College Place Cerritos, CA 90703 (9)	4	97	28	-	125	++APH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03
9	College Hospital-Costa Mesa 301 Victoria Street Costa Mesa, CA 92627 (10)	++++ Orange County	88	-	37	125	+GACH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	Orange County	Orange County
4	Community Hospital LB 1720 Termino Ave. Long Beach, CA 90804 (11)	8	28	-	-	28	++APH	1/1/05 – 6/30/05 7/1/05 – 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03

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COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
CONTRACTS DEVELOPMENT AND ADMINISTRATION DIVISION

FEE-FOR-SERVICES MEDI-CAL
PSYCHIATRIC INPATIENT HOSPITAL SERVICES AGREEMENTS

SERVICE AREA	CONTRACTOR	SUPV. DIST.	CONTRACTOR PSYCHIATRIC BED CAPACITY ADULT	CHILD	ADOL.	TOTAL	TYPE OF HOSP.	AGREEMENT TERM	CONTRACT ALLOWABLE RATE *APIHS	CONTRACT ALLOWABLE RATE **ADS
8	Del Amo Hospital 23700 Camino Del Sol Torrance, CA 90505 (12)	4	146	20	-	166	++APH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03
5	East Valley Medical Center 150 West Route 66 Glendora, CA 91740 (13)	3	21	-	-	21	++APH	1/1/05 – 6/30/05 7/1/05 – 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03
2	Encino Tarzana 16237 Ventura Blvd. Encino, CA 91436 (14)	3	14	-	-	14	+GACH	1/1/05 - 6/30/05 7/01/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03
2	Glendale Adventist Medical Center 1509 Wilson Terrace Glendale, CA 91206 (15)	5	60	-	-	60	+GACH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03
3	Huntington Memorial Hospital 100 W. California Boulevard Pasadena, CA 91109 (16)	5	56	-	-	56	+GACH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03
3	Inter-Community Medical Center 210 W. San Bernardino Covina, CA 91723 (17)	5	30	-	-	30	+GACH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03

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\+ General Acute Care Hospital (GACH)
++ Acute Psychiatric Hospital (APH)
+++ Child beds included in the Adolescent (ADOL.) column

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
CONTRACTS DEVELOPMENT AND ADMINISTRATION DIVISION

FEE-FOR-SERVICES MEDI-CAL
PSYCHIATRIC INPATIENT HOSPITAL SERVICES AGREEMENTS

SERVICE AREA	CONTRACTOR	SUPV. DIST.	CONTRACTOR PSYCHIATRIC BED CAPACITY ADULT	CHILD	ADOL.	TOTAL	TYPE OF HOSP.	AGREEMENT TERM	CONTRACT ALLOWABLE RATE *APIHS	CONTRACT ALLOWABLE RATE **ADS
8	Little Company of Mary San Pedro Hospital 4101 Torrance Blvd. Torrance, CA 90503 (18)	4	25	-	-	25	+GACH	1/1/05 – 6/30/05 7/1/05 – 6/30/06 7/1/06 – 6/30/07	$ 475	296.03
6	Los Angeles Metropolitan Med. Center 13300 So. Hawthorne Blvd. Hawthorne, CA 90250 (19)	2	39	-	-	39	+GACH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03
2	Mission Community Hospital 14850 Roscoe Boulevard Panorama City, CA 91402 (20)	3	56	-	-	56	+GACH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03
8	Pacific Hospital of Long Beach 2776 Pacific Avenue Long Beach, CA 90806 (21)	4	35	-	-	35	+GACH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03
2	Pacifica Hospital of the Valley 9449 San Fernando Road Sun Valley, CA 91352 (22)	3	39	-	-	39	+GACH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03
7	Robert F. Kennedy Medical Center 4500 W. 116th Street Hawthorne, CA 90250 (23)	2	67	-	-	67	+GACH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03

* Acute Psychiatric Inpatient Hospital Services (APIHS)
** Administrative Day Services (ADS)
\+ General Acute Care Hospital (GACH)
++ Acute Psychiatric Hospital (APH)
+++ Child beds included in the Adolescent (ADOL.) column

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
CONTRACTS DEVELOPMENT AND ADMINISTRATION DIVISION

FEE-FOR-SERVICES MEDI-CAL
PSYCHIATRIC INPATIENT HOSPITAL SERVICES AGREEMENTS

SERVICE AREA	CONTRACTOR	SUPV. DIST.	CONTRACTOR PSYCHIATRIC BED CAPACITY ADULT	CHILD	ADOL.	TOTAL	TYPE OF HOSP.	AGREEMENT TERM	CONTRACT ALLOWABLE RATE *APIHS	CONTRACT ALLOWABLE RATE **ADS
6	St. Francis Medical Center 3630 E. Imperial Highway Lynwood, CA 90262 (24)	2	40	-	-	40	+GACH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03
5	UCLA Neuro. Institute Hospital 760 Westwood Plaza Los Angeles, CA 91030 (25)	2	20	-	19	39	++APH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03
2	Verdugo Hills Hospital 1812 Verdugo Blvd. Glendale, CA 91208 (26)	5	24	-	-	24	+GACH	1/1/05 – 6/30/05 7/01/05 – 6/30/06 7/1/06 – 6/30/07	$ 475	$ 296.03
4	White Memorial Medical Center 1720 Cesar E. Chavez Avenue Los Angeles, CA 90033 (27)	1	35	-	-	35	+GACH	1/1/05 - 6/30/05 7/1/05 - 6/30/06 7/1/06 - 6/30/07	$ 475	$ 296.03

* Acute Psychiatric Inpatient Hospital Services (APIHS)
** Administrative Day Services (ADS)
\+ General Acute Care Hospital (GACH)
++ Acute Psychiatric Hospital (APH)
+++ Child beds included in the Adolescent (ADOL.) column

ATTACHMENT III

76R 352M (11/83)

COUNTY OF LOS ANGELES

REQUEST FOR APPROPRIATION ADJUSTMENT

DEPT'S. NO. 435

DEPARTMENT OF MENTAL HEALTH

19

AUDITOR-CONTROLLER.

THE FOLLOWING APPROPRIATION ADJUSTMENT IS DEEMED NECESSARY BY THIS DEPARTMENT. WILL YOU PLEASE REPORT AS TO ACCOUNTING AND AVAILABLE BALANCES AND FORWARD TO THE CHIEF ADMINISTRATIVE OFFICER FOR HIS RECOMMENDATION OR ACTION.

ADJUSTMENT REQUESTED AND REASONS THEREFOR

4-Votes

Sources:

Department of Mental Health
State Aid - Mental Health
A01-MH-20500-8905
$4,000,000

Department of Mental Health
Federal Aid - Mental Health
A01-MH-20500-9025
$4,000,000

Uses:

Department of Mental Health
Services & Supplies
A01-MH-20500-2000
$8,000,000

This adjustment is requested to increase Services & Supplies appropriation by $8,000,000 to provide spending authority for Fee-For-Service (FFS) contract providers. This appropriation increase is fully funded by the Mental Health Managed Care State allocation $4,000,000, and Federal Financial Participation (FFP) Medi-Cal revenue, $4,000,000. There is no increase in net County cost.

Susan Kerrigan for

Marvin J. Southard, D.S.W.

Director of Mental Health

CHIEF ADMINISTRATIVE OFFICER'S REPORT

REFERRED TO THE CHIEF ADMINISTRATIVE OFFICER FOR — ACTION

✓ RECOMMENDATION

AUDITOR-CONTROLLER

BY Nick Fung

NO. 201

NOV. 22 2004

APPROVED AS REQUESTED

November 23, 2004

AS REVISED

Gregory Pollock for

CHIEF ADMINISTRATIVE OFFICER

DAVID SANSSEN

19

APPROVED (AS REVISED):
BOARD OF SUPERVISORS

BY

DEPUTY COUNTY CLERK

SEND 5 COPIES TO THE AUDITOR-CONTROLLER

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
BUDGET & REIMBURSEMENT DIVISION
RECAP OF MENTAL HEALTH MANAGED CARE STATE ALLOCATION
Revenue Source Code: 8905
FY 2004-2005

DESCRIPTION		AMOUNT
Mental Health State Allocation	$	73,931,070
Final Adopted Budget for Fee For Service Consolidation		68,081,000
Funding Available	$	5,850,070
Less:		
Amount for BA		(4,000,000)
Remaining Balance	$	1,850,070

DEPARTMENT OF MENTAL HEALTH
Fiscal Year 2004-05

COMMUNITY MENTAL HEALTH SERVICES
ALLOCATION WORKSHEET
REVISION NUMBER 0

LOS ANGELES

PROGRAM	CURRENT ALLOCATION	ADJUSTMENT	TOTAL ALLOCATION
Community Services	$16,864,472	$0	$16,864,472
Children's Mental Health Services	$0		$0
Adult System of Care	$0	$0	$0
Community Services: Other Treatment for Mental Health Managed Care	$73,931,070	$0	$73,931,070
Services	*($73,708,056)*	*$0*	*($73,708,056)*
Federal Regulations Implementation	*($223,014)*	*$0*	*($223,014)*
TOTAL COMMUNITY SERVICES	$90,795,542	$0	$90,795,542

PROGRAM DATA BY FUND SOURCES			
4440-101-0001(1) Community Services - Other Treatment	$16,864,472	$0	$16,864,472
4440-101-0001(1.5) Children's Mental Health Services	$0	$0	$0
4440-101-0001 Adult System of Care	$0	$0	$0
4440-103-0001 Community Services - Other Treatment for Mental Health Managed Care	$73,931,070	$0	$73,931,070
Services	*($73,708,056)*	*$0*	*($73,708,056)*
Federal Regulations Implementation	*($223,014)*	*$0*	*($223,014)*
TOTAL FUND SOURCES	$90,795,542	$0	$90,795,542

PURPOSE: Initial Allocation FY 2004-05

DATE: September 8, 2004

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
CONTRACTS DEVELOPMENT AND ADMINISTRATION DIVISION

CONTRACTING WITH MINORITY/WOMEN-OWNED FIRMS
PERCENTAGE OF OWNERSHIP IN FIRM

	Contractor/Firm	Firm Status	Black/African American		Hispanic/Latin American		Asian American		White	
			% Men	% Women	% Men	% Women	% Men	% Women	% Men	% Women
1	Antelope Valley Hospital	NP								
2	Aurora Charter Oak	P					100			
3	Bellflower Medical Center	P							100	
4	BHC Alhambra Hospital	P	Data not Available							
5	Brotman Medical Center	P	Publicly Traded							
6	Cedars Sinai Medical Center	NP								
7	City of Angeles Med. Center Inglewood Campus	P					25	25	25	25
8	College Hospital-Cerritos	P							100	
9	College Hospital-Costa Mesa	P							100	
10	Community Hospital Long Beach	NP								
11	Del Amo Hospital	P							10	90
12	East Valley Medical	P					43.48	56.52		
13	Encino Tarzana	P							100	
14	Glendale Adventist Medical Center	NP								
15	Huntington Memorial Hospital	NP								
16	Inter. Comm. Med. Center	NP								
17	Aurora Las Encinas Hospita	P	Publicly Traded							
18	Little Company of Mary San Pedro	NP								
19	Los Angeles Metro Medical Center	P							100	

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
CONTRACTS DEVELOPMENT AND ADMINISTRATION DIVISION

CONTRACTING WITH MINORITY/WOMEN-OWNED FIRMS
PERCENTAGE OF OWNERSHIP IN FIRM

	Contractor/Firm	Firm Status	Black/African American		Hispanic/Latin American		Asian American		White	
			% Men	% Women	% Men	% Women	% Men	% Women	% Men	% Women
20	Mission Community Hospital	NP								
21	Pacific Hospital of Long Beach	NP								
22	Pacific Hospital of the Valley	P							100	
23	Robert F. Kennedy Med. Ctr.	NP								
24	St. Francis Medical Center	NP								
25	UCLA Neuro. Inst. Hospital	NP								
26	Verdugo Hills Hospital	NP								
27	White Memorial Hospital	NP								

Form Status: NP = Non Profit
P = For Profit
G = Governmental

*NOTE: Non-Profit firms and governmental institutions are not owned; hence, the data on percentage of ownership in firm by ethnicity and gender is not required per instructions from the Office of Affirmative Action Compliance.

EM:Minority-women owned firms Attachment IV