COUNTY OF SAN MATEO Departmental Correspondence

DATE: SEP 1 1 2001 HEARING DATE: SEP 2 5 2001

TO:

Honorable Board of Supervisors

FROM:

Gale Bataille, Director, Mental Health Services Gale Bataille

SUBJECT:

Agreement with Caminar/CLC

RECOMMENDATION

Adopt a resolution:

- 1. authorizing the President of the Board to execute an agreement with Caminar/CLC for residential treatment, rehabilitation services, and community support services for psychiatrically disabled adult consumers.
- 2. authorizing the Director of Health Services to execute amendments and minor modifications to this agreement not to exceed the aggregate of \$25,000.

Background

Caminar/CLC is a recognized provider of residential treatment, rehabilitation services and community support services. San Mateo County has contracted with Caminar for over 25 years to provide these services to psychiatrically disabled adult consumers. Without community based support services, these mental health clients are at significantly increased risk of psychiatric hospitalization, placement in a locked skilled nursing facility, or of becoming homeless.

Under the Mental Health Division's plan for contracted services, residential and supportive services are included in the "various qualified provider" category. This category is used when there are a limited number of providers and we are interested in all viable proposals. In this category any agency can submit a proposal at any time and the proposal will be evaluated on quality and cost factors.

Discussion

The services provided by Caminar/CLC include crisis residential, transitional residential, medication support and rehabilitation services for psychiatrically disabled adults. Rehabilitation

services are designed to support clients in a variety of community living arrangements and to assist clients in finding or maintaining housing, employment, education, health care, and psychiatric treatment when necessary. Crisis residential services are provided at Redwood House and transitional residential services at Eucalyptus House and Hawthorne House. Rates of reimbursement vary depending on the intensity of supervision and services provided.

The 2000-01 objectives and actual performance, and 2001-02 objectives are as follows:

Performance Measure	2000-01 Objectives	2000-01 Actual	2001-02 Objectives
Percent of clients satisfied with their services	85%	91%	87%
Percent of clients who will improve or maintain their functioning as measured by a standardized outcome instrument designed by the state*	80%	80%	80%

^{*} This objective corresponds with one of our Division's overall performance objectives. We have collected baseline data in 2000-01 from which change can be measured.

Term and Fiscal Impact

The term of this agreement is from July 1, 2001 through June 30, 2002. The agreement has been reviewed and approved by Risk Management and County Counsel.

The Division recommends that the agreement with Caminar/CLC be increased by \$459,438 above the 2000-01 contract amount of \$4,594,377. This 10% cost of living adjustment provides for increased staff salaries and benefits as well as other necessary program costs.

The total cost of the services provided by Caminar/CLC is \$5,320,092. Of this amount, \$266,277 is provided through clients' fees, grants and other funding sources. The actual contract total is \$5,053,815 and is included in the approved 2001-02 Mental Health Services' budget. Federal Medi-Cal is expected to fund a total of \$2,110,979. Substance Abuse and Mental Health Services (SAMHSA) will provide \$6,880 in grant funding. Sales tax provided through realignment will cover 82% or \$2,407,484 of the remaining balance of \$2,935,956. The remaining \$528,472 is the net County cost. We are requesting that the Director of Health Services be given signing authority to execute minor amendments and adjustments up to \$25,000.

ECOMMENDED

HEALTH SERVICES DEPARTMENT

RESOLUTION NO.	

BOARD OF SUPERVISORS, COUNTY OF SAN MATEO, STATE OF CALIFORNIA

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RESOLUTION AUTHORIZING EXECUTION OF AGREEMENT WITH CAMINAR/CLC

RESOLVED, by the Board of Supervisors of the County of San Mateo, State of California, that

WHEREAS, there has been presented to this Board of Supervisors for its consideration and acceptance an Agreement, reference to which is hereby made for further particulars, whereby Caminar/CLC shall provide residential treatment, rehabilitation services, and community support services for psychiatrically disabled adult consumers; and

WHEREAS, this Board has been presented with the Agreement and has examined and approved it as to both form and content and desires to enter into the Agreement:

NOW, THEREFORE, IT IS HEREBY DETERMINED AND ORDERED that the President, of this Board of Supervisors be, and is hereby, authorized and directed to execute said Agreement for and on behalf of the County of San Mateo, and the Clerk of this Board shall attest the President's signature thereto;

BE IT FURTHER RESOLVED, that the Director of Health Services is hereby authorized to execute subsequent Amendments and minor modifications to the Agreement with Caminar/CLC, not to exceed the aggregate of \$25,000.

AGREEMENT WITH CAMINAR/CLC

FOR RESIDENTIAL TREATMENT AND MENTAL HEALTH

AND REHABILITATION SERVICES

	THIS AGREEMENT, entered into this	day of
20	, by and between the COUNTY OF SAN MA	ΓΕΟ, hereinafter called "County," and
CAMI	NAR/CLC, hereinafter called "Contractor";	

WITNESSETH:

WHEREAS, it is necessary and desirable that Contractor be retained for the purpose of performing the professional services hereinafter described for the Health Services Agency, Mental Health Services Division; and

WHEREAS, pursuant to Government Code, Section 31000, County may contract with independent contractors for the furnishing of such services to or for County or any Department thereof;

NOW, THEREFORE, IT IS HEREBY AGREED BY THE PARTIES HERETO AS FOLLOWS:

1. Services to be Performed by Contractor

In consideration of the payments hereinafter set forth, Contractor, under the general direction of the Director of Health Services, or her designee, with respect to the product or result of Contractor's services, shall provide residential treatment, rehabilitation services, and community support for psychiatrically disabled adult consumers as described in Schedule A, attached hereto and incorporated by reference herein. Such services shall be provided in a professional and diligent manner.

2. Payments

A. <u>Maximum Amount</u>. In full consideration of Contractor's performance of the services described in Schedule A, the amount that County shall be obligated to pay for services rendered under this Agreement shall not exceed FIVE MILLION FIFTY-THREE

THOUSAND EIGHT HUNDRED AND FIFTEEN DOLLARS (\$5,053,815) for the contract term.

- B. Rate of Payment. The rate and terms of payment shall be as specified in Schedule B, attached hereto and incorporated herein. Any rate increase is subject to the approval of the Director of Health Services or her designee, and shall not be binding on County unless so approved in writing. In no event may the rates established in Schedule B be increased to the extent that the maximum County obligation shall exceed the total specified in paragraph 2A above. Each payment shall be conditioned on the performance of the services described in Schedule A to the full satisfaction of the Director of Health Services or her designee.
- C. <u>Time Limit for Submitting Invoices</u>. Contractor shall submit an invoice for services to County for payment in accordance with the provisions of Schedule B. County shall not be obligated to pay Contractor for the services covered by any invoice if Contractor presents the invoice to County more than one hundred eighty (180) days after the date Contractor renders the services, or more than ninety (90) days after this Agreement terminates, whichever is earlier.

3. Relationship of Parties

It is expressly understood that this is an agreement between two (2) independent contractors and that no agency, employee, partnership, joint venture or other relationship is established by this Agreement. The intent by both County and Contractor is to create an independent contractor relationship. Contractor expressly acknowledges and accepts his/her tax status and the tax consequences of an independent contractor. Further, as an independent contractor, Contractor expressly acknowledges and accepts that he/she has no rights, benefits, privileges and/or claims in any form whatsoever under, from, through and/or pursuant to the San Mateo County Civil Service Rules.

4. Hold Harmless

Contractor shall indemnify and save harmless County, its officers, agents, employees, and servants from all claims, suits, or actions of every name, kind and description,

damage to any property of any kind whatsoever and to whomsoever belonging, or (C) any failure to withhold and/or pay to the government income and/or employment taxes from earnings under this Agreement, or (D) any other loss or cost, including but not limited to that caused by the concurrent active or passive negligence of County, its officers, agents, employees, or servants, resulting from the performance of any work required of Contractor or payments made pursuant to this Agreement, provided that this shall not apply to injuries or damage for which County has been found in a court of competent jurisdiction to be solely liable by reason of its own negligence or willful misconduct.

The duty of Contractor to indemnify and save harmless as set forth herein, shall include the duty to defend as set forth in Section 2778 of the California Civil Code.

5. Insurance

Contractor shall not commence work under this Agreement until all insurance required under this section has been obtained and such insurance has been approved by the Director of Health Services. Contractor shall furnish the Health Services Agency with Certificates of Insurance evidencing the required coverage and there shall be a specific contractual liability endorsement extending Contractor's coverage to include the contractual liability assumed by Contractor pursuant to this Agreement. These Certificates shall specify or be endorsed to provide that thirty (30) days' notice must be given, in writing, to the Health Services Agency of any pending change in the limits of liability or of any cancellation or modification of the policy.

In the event of the breach of any provision of this section, or in the event any notice is received which indicates any required insurance coverage will be diminished or canceled, County at its option, may, notwithstanding any other provision of this Agreement to the contrary, immediately suspend all further work pursuant to this Agreement.

A. <u>Workers' Compensation and Employer Liability Insurance</u>. Contractor shall have in effect during the entire life of this Agreement, Workers' Compensation and Employer Liability Insurance providing full statutory coverage. In signing this Agreement,

Contractor makes the following certification, required by Section 1861 of the California Labor Code:

I am aware of the provisions of Section 3700 of the California Labor Code which require every employer to be insured against liability for Workers' Compensation or to undertake self-insurance in accordance with the provisions of the Code, and I will comply with such provisions before commencing the performance of the work of this Agreement.

B. <u>Liability Insurance</u>. Contractor shall take out and maintain during the life of this Agreement such Bodily Injury Liability and Property Damage Liability Insurance as shall protect him while performing work covered by this Agreement from any and all claims for damages for bodily injury, including accidental death, as well as any and all claims for property damage which may arise from Contractor's operations under this Agreement, whether such operations be by himself or by any subcontractor or by anyone directly or indirectly employed by either of them. Such insurance shall be combined single limit bodily injury and property damage for each occurrence and shall not be less than the amounts specified below.

Such insurance shall include:

1)	Comprehensive General Liability	. \$1,000,000
2)	Motor Vehicle Liability Insurance	. \$1,000,000

If this Agreement remains in effect more than one (1) year from the date of its original execution, County may, at its sole discretion, require an increase in the amount of liability insurance to the level then customary in similar County agreements by giving sixty (60) days' notice to Contractor.

County and its officers, agents, employees and servants shall be named as additional insured on any such policies of insurance, which shall also contain a provision that the insurance afforded thereby to County, its officers, agents, employees, and servants shall be primary insurance to the full limits of liability of the policy, and that if County or its officers and employees have other insurance against the loss covered by such a policy, such other insurance shall be excess insurance only. Said certificate(s) of insurance is (are) attached hereto and

incorporated by reference herein as Attachment II (and III).

6. Non-Discrimination

Contractor shall comply with the non-discrimination requirements described in Schedule C, which is attached hereto, and incorporated herein.

Contractor shall comply with County admission and treatment policies which shall provide that patients are accepted for care without discrimination on the basis of race, color, religion, sex, sexual orientation, national origin, age, handicap, or political affiliation.

Violation of the non-discrimination provisions of this Agreement shall be considered a breach of this Agreement and subject Contractor to penalties, to be determined by the County Manager, including, but not limited to:

- i. termination of this Agreement;
- ii. disqualification of Contractor from bidding on or being awarded a County contract for a period of up to three (3) years;
- iii. liquidated damages of TWO THOUSAND FIVE HUNDRED DOLLARS (\$2,500) per violation;
- iv. imposition of other appropriate contractual and civil remedies and sanctions, as determined by the County Manager.

To effectuate the provisions of this paragraph, the County Manager shall have the authority to:

- i. examine Contractor's employment records with respect to compliance with this paragraph;
- ii. set off all or any portion of the amount described in this paragraph against amounts due to Contractor under the Contract or any other contractor between Contractor and County.

Contractor shall report to the County Manager the filing by any person in any court of any complaint of discrimination or the filing by any person of any and all charges with the Equal Employment Opportunity Commission, the Fair Employment and Housing Commission or

any other entity charged with the investigation of allegations within thirty (30) days of such filing, provided that within such thirty (30) days such entity has not notified Contractor that such charges are dismissed or otherwise unfounded. Such notification shall include the name of the complainant, a copy of such complaint, and a description of the circumstance. Contractor shall provide County with a copy of its response to the complaint when filed.

With respect to the provision of employee benefits, Contractor shall comply with the County Ordinance which prohibits contractors from discriminating in the provision of employee benefits between an employee with a domestic partner and an employee with a spouse.

7. Assignments and Subcontracts

- A. Without the written consent of the Director of Health Services or her designee, this Agreement is not assignable in whole or in part. Any assignment by Contractor without the written consent of the Director of Health Services or her designee is a breach of this Agreement and shall automatically terminate this Agreement.
- B. Contractor shall not employ subcontractors or consultants to carry out the responsibilities undertaken pursuant to this contract without the written consent of the Director of Health Services or her designee.
- C. All assignees, subcontractors, or consultants approved by the Director of Health Services or her designee shall be subject to the same terms and conditions applicable to Contractor under this Agreement, and Contractor shall be liable for the assignee's, subcontractor's or consultant's acts and/or omissions.
- D. All agreements between Contractor and subcontractor and/or assignee for services pursuant to this Agreement shall be in writing and shall be provided to County.

8. Amendment of Agreement

This Agreement is complete and contains all the terms and conditions agreed upon by the parties. No amendment shall be valid unless made in writing and signed by the parties hereto, and no oral understanding or agreement shall be binding on the parties hereto.

9. Records

- A. Contractor agrees to provide to County, to any federal or state department having monitoring or reviewing authority, to County's authorized representatives and/or their appropriate audit agencies upon reasonable notice, access to and the right to examine and audit all records and documents necessary to determine compliance with relevant federal, state, and local statutes, rules and regulations, and this Agreement, and to evaluate the quality, appropriateness and timeliness of services performed.
- B. Contractor shall maintain and preserve all financial records relating to this Agreement for a period of four (4) years from the termination date of this Agreement, or until audit findings are resolved, whichever is greater.
- C. The contracting parties shall be subject to the examination and audit of the Auditor General for a period of three (3) years after final payment under contract (Government Code Section 10532).

10. Compliance with Applicable Laws

All services to be performed by Contractor pursuant to this Agreement shall be performed in accordance with all applicable federal, state, county, and municipal laws, including, but not limited to, the Americans with Disabilities Act of 1990, as amended, and Section 504 of the Rehabilitation Act of 1973, as amended and attached hereto and incorporated by reference herein as Attachment I, which prohibits discrimination on the basis of handicap in programs and activities receiving any federal or county financial assistance. Such services shall also be performed in accordance with all applicable ordinances and regulations, including, but not limited to, appropriate licensure, certification regulations, provisions pertaining to confidentiality of records, and applicable quality assurance regulations.

11. Notices

A. Any notice, request, demand or other communication required or permitted hereunder shall be deemed to be properly given when deposited in the United States mail, postage prepaid, or when deposited with a public telegraph company for transmittal,

charges prepaid, addressed:

1) In the case of County, to:

San Mateo County Mental Health Services Division 225 37th Avenue San Mateo, CA 94403

or to such person or address as County may, from time to time furnish to

Contractor.

2) In the case of Contractor, to:

Caminar/CLC 1720 South Amphlett Boulevard, #123 San Mateo, CA 94401

B. <u>Controlling Law</u>. The validity of this Agreement and of its terms or provisions, as well as the rights and duties of the parties hereunder, the interpretation and performance of this Agreement shall be governed by the laws of the State of California.

12. Venue

In the event that suit shall be brought by either party to this contract, the parties agree that venue shall be exclusively vested in the state courts of San Mateo County, or where otherwise appropriate, exclusively in the United States District Court, Northern District of California, San Francisco, California.

13. Term of the Agreement

Subject to compliance with the terms and conditions of this Agreement, the term of this Agreement shall be from July 1, 2001 through June 30, 2002. This Agreement may be terminated by Contractor, Director of Health Services or her designee at any time upon sixty (60) days' written notice to the other party. Parties recognize that Contractor has performed services from July 1, 2001 through date of execution of this Agreement in anticipation of execution of this Agreement. Parties agree that services are subject to all terms and conditions contained herein.

IN WITNESS WHEREOF, the parties hereto, by their duly authorized representatives, have affixed their hands.

COUNTY OF SAN MATEO	CAMINAR/CLC			
By: Michael D. Nevin, President Board of Supervisors, San Mateo County	By: 5Bardill C	F.o		
Date:	Date: 4/6/0 1			
ATTEST:				
By:	Date:			

Attachment I

(Required only from Contractors who provide services directly to the Public on County's behalf.)

Assurance of Compliance with Section 504 of the Rehabilitation Act of 1973, as Amended

The undersigned (hereinafter called the "Contractor(s)") hereby agrees that it will comply with Section 504 of the Rehabilitation Act of 1973, as amended, all requirements imposed by the applicable DHHS regulation, and all guidelines and interpretations issued pursuant thereto.

The Contractor(s) gives/give this assurance in consideration of and for the purpose of obtaining contracts after the date of this assurance. The Contractor(s) recognizes/recognize and agrees/agree that contracts will be extended in reliance on the representations and agreements made in this assurance. This assurance is binding on the Contractor(s), its successors, transferees, and assignees, and the person or persons whose signatures appear below are authorized to sign this assurance on behalf of the Contractor(s).

The Contractor(s): (Check a or b)			
a. () employs fewer than 15	persons.		
b. () employs 15 or more pregulation (45 C.F.R. 84.7 (a)), has defforts to comply with the DHHS reg	esignated the		
SHARON BAR	LDILL	SBardill	
Name of 504	Person - Type	or Print	
Caminar/CLC		1720 S. Amphlett B	slvd., #123
Name of Contractor(s) - Type or Print		Street Address or	PO Box
San Mateo		CA_	94401
City		State	Zip Code
I certify that the above information is complete Date		t to the best of my knowledge to the best of my knowledge to the best of my knowledge to the best of t	o.
*Evention: DUUS regulations state that:			

*Exception: DHHS regulations state that:

"If a recipient with fewer than 15 employees finds that, after consultation with a handicapped person seeking its services, there is no method of complying with (the facility accessibility regulations)...other than making a significant alteration in its existing facilities, the recipient may, as an alternative, refer the handicapped person to other providers of those services that are accessible."

SCHEDULE A

CAMINAR/CLC: 2001-02

I. REHABILITATIVE MENTAL HEALTH SERVICES

A. Introduction and Definition of Terms

Rehabilitative Mental Health Services focus on client needs, strengths, and choices; the client is always involved in service planning and implementation. The goal of rehabilitation is to help clients take charge of their own lives through informed decision making. Services are based on the client's desired results from mental health services (long term goals) concerning his/her own life, and consider his/her diagnosis, functional impairments, symptoms, disabilities, life conditions, and rehabilitation readiness. Services are focused on achieving specific shorter term personal milestones (measurable objectives) to support the client in accomplishing his/her desired results.

Program staffing is multi-disciplinary and reflects the cultural, linguistic, ethnic, age, gender, sexual orientation and other social characteristics of the community which the program serves. Families, caregivers, human service agency personnel and other significant support persons are encouraged to participate in the planning and implementation process to help the client meet his/her needs, choices, responsibilities and desires. Programs are designed to use both licensed and non-licensed personnel who are experienced in providing mental health services. Clients and family members of clients are valued as volunteer or paid staff.

Services are optimal when delivered to clients who live in housing of their own choice. Single room occupancy is a highly valued housing choice by clients and is emphasized in resource development and service planning.

B. Services

Contractor shall provide crisis residential services, transitional residential services, rehabilitation services, medication support services, supported education services, and supported employment services. These services shall be provided in a manner prescribed by the laws of California and in accord with the applicable laws, titles, rules and regulations, including quality improvement requirements of the Short-Doyle/Medi-Cal Program. The Short-Doyle/Medi-Cal Manual for the Rehabilitation Option and Targeted Case Management is included herein by reference. All payments under this Agreement must directly support services specified in this Agreement. Contractor shall provide the following services:

1. Crisis Residential Services

Contractor shall provide a sixteen (16) bed, twenty-four (24) hour, Crisis Residential Treatment facility for mentally ill clients. Therapeutic and/or rehabilitation services shall be provided in a structured program as an alternative to hospitalization for clients experiencing an acute psychiatric episode or crisis, and who do not present medical complications requiring nursing care. Clients are supported in their efforts to restore, maintain, and apply interpersonal and independent living skills, and to access community support systems. Interventions which focus on symptom reduction and management will be available.

- a. Clients admitted to Crisis Residential Treatment Services shall receive a mental health and medical assessment, including a screening for medical complications which may contribute to his/her disability, within three (3) days prior to or after admission.
- b. Ongoing services shall include Assessment/Evaluation, Plan Development, Therapy/Counseling, Rehabilitative Mental Health Services, Dual Diagnosis Assessment and Treatment, Collateral Services, and Crisis Intervention.
- c. Contractor shall provide five thousand seventy-three (5,073) days of care to one hundred thirty-five (135) unduplicated clients during the term of this Agreement. A client day shall mean any and all services rendered by Contractor on behalf of one (1) client during any single day during which the client was present in the facility.
- d. Contractor shall admit only those persons who are in need of subacute services; such persons shall be identified according to the following criteria:
 - 1) Persons in acute psychiatric distress who require immediate supervised crisis residential treatment and who, in the absence of such community-based treatment, would require admission to full-time inpatient psychiatric services.
 - 2) Minimally functioning clients who require supervised housing on an emergency basis while awaiting specific placement within community facilities.
- e. County Mental Health Services Division Adult Resource
 Management working closely with acute inpatient and PES, shall
 authorize persons for admission, and, in the case of multiple applications for admission, shall prioritize eligible persons for admission.

- f. In the first six (6) months of the contract year, the Crises Residential Treatment facility will begin to change the overall program structure to include the following components:
 - The ability to admit more than one person per day.
 - Admission capability on weekends and after hours.
 - The ability to admit some individuals from PES. (County will work together with contractor to define who constitutes an appropriate admission from PES).
 - A program structure that promotes life skills training, addresses dual diagnosis issues via substance abuse groups and mandatory group participation in at least 3 to 5 groups a day, 7 days a week.
 - Psychiatry and nursing component. (This would be a new component and would involve discussion and negotiation around cost).

In January, 2002, the Crises Residential Treatment facility program will be re-evaluated by the County to measure progress in implementing program components outlined above.

2. Transitional Residential Services

Contractor shall provide two (2) twenty-four (24) hour Transitional Residential Treatment facilities (28 beds) for mentally ill clients. Treatment and/or rehabilitation services shall be provided in a structured therapeutic community and shall include a range of activities and services for clients who would be at risk of hospitalization, or other institutional placement, were they not in this residential program. Clients are supported in their efforts to restore, maintain and apply interpersonal and independent living skills, and to access community support systems. Interventions which focus on symptom reduction shall also be available.

- a. Ongoing services shall include Assessment/Evaluation, Plan Development, Therapy/Counseling, Rehabilitative Mental Health Services, Collateral Services and Crisis Intervention.
- b. Contractor shall provide ten thousand fifty-six (10,056) days of care to sixty-eight (68) unduplicated clients during the term of this Agreement. A client day shall be deemed to mean any and all services rendered by Contractor on behalf of one (1) client during any single day during which the client was present in the facility.
 - 1) one (1) bed may be utilized as a short-term respite bed.

c. Eligibility for admission to this service shall be confined to persons with a serious mental illness and functional impairments that require and shall benefit from a rehabilitation program. County Mental Health Services Division Adult Resource Management shall authorize and, in the case of multiple applications, shall prioritize persons for admission. Admission priority shall generally be given to persons coming from more restricted settings such as hospital and locked sub-acute facilities.

3. Rehabilitation Services

Contractor shall provide seriously mentally ill adults with community-based rehabilitative mental health services. Rehabilitation services are intended to identify and provide assistance in locating and obtaining adequate and appropriate living arrangements and supportive resources (medical, social, vocational, and educational) to enhance client's potential for successful community placement. Rehabilitation services include those specified in the contract between Mid-Peninsula, Colma Ridge, Inc., and San Mateo County Mental Health Services.

- a. Ongoing services shall include, but not be limited to:
 Assessment/Evaluation, Plan Development, Individual and Group
 Counseling, Collateral Services, Rehabilitation Services, Case
 Management, and Crisis Intervention.
- b. Contractor shall provide one million, three hundred twelve thousand, five hundred sixty-five (1,312,565) minutes of care to four hundred sixty-five (465) unduplicated adult clients and nineteen (19) unduplicated young adult clients (ages eighteen (18) to twenty-one (21)).
- c. All referrals for rehabilitation services must be authorized by County Mental Health Services Division Adult Resource Management and/or Clinic Unit Chiefs as designated by Adult Resource Management.

4. Medication Support Services

Contractor shall provide community-based medication support services; such services shall include prescribing, administering, dispensing, and monitoring of psychiatric medications or biologicals necessary to alleviate the symptoms of mental illness, and be provided by a staff person within the scope of practice of his/her profession.

a. Contractor shall provide ninety-five thousand eight hundred eighty (95,880) minutes of care to two hundred twenty (220) unduplicated

adult clients.

b. Eligibility for services shall be confined to persons who are in need of medication support services as determined by a clinical assessment; such persons shall be identified according to the following criteria:

All referrals for medication support services must be authorized by County Mental Health Services Division Resource Management and/or Clinic Unit Chiefs as designated by Adult Resource Management.

5. Supported Education Services

Contractor shall provide and coordinate support services for seriously mentally ill clients at local community colleges/universities.

6. Supported Employment Services

Contractor shall provide and coordinate support services for seriously mentally ill clients as they enter competitive employment.

7. <u>Tahanan</u>

Contractor shall provide housing and support services for consumers who are unable to live independently, but who do not require twenty-four (24) hour care. Services shall include housekeeping and meal preparation assistance.

8. Stomp Out Stigma (SOS)

Contractor shall reimburse the SOS program, a client-run public presentation and advocacy program, for travel and other supply costs associated with SOS presentations.

II. REACH (RECOVERY, EMPOWERMENT, AND COMMUNITY HOUSING) SERVICES

A. Introduction and Definition of Terms

County Mental Health Services requires the provisions of a community support program known as REACH (Recovery, Empowerment And Community Housing), for thirty (30) severely and persistently mentally ill adult consumers.

REACH is a capitated, shared risk, integrated, intensive community treatment and support program for individuals who would otherwise require extended care in

twenty-four (24) hour subacute or long term care settings. REACH is recovery-based and consumer-driven, and addresses outcomes that make a difference in the quality of the recipients' lives. Using a rehabilitation model and recovery model, REACH fosters and promotes client choice and empowerment by supporting the individual's re-entry and ability to maintain in the community.

Contractor shall provide all the necessary services for this population, either directly by program staff or by purchase from other service providers. These services shall include a complete array of treatment services, including assessment, individual and group counseling, collateral services, and complete medication management. Services will include twenty-four (24) hour crisis management. Services will also include supportive community services including, but not limited to: full service case management, supportive housing services including finding and securing housing, supported vocational and educational services, and linkage to consumer self-help and peer support.

A major program component must include a complete range of services for seriously mentally ill individuals with a co-occurring chemical dependence problem.

Use of system-wide resources and services by a client enrolled in REACH may be arranged through Resource Management. For services/resources that have waiting lists, REACH clients will take their place with all other clients.

Contractor is responsible for all costs incurred by the enrolled consumers, including acute and subacute hospital stays, Institute for Mental Disease, Mental Health Rehabilitation Centers, state hospital stays, and other mental health treatment and rehabilitative costs. Contractor shall remain responsible for coordination of care. For continuity of care purposes, acute inpatient hospitalization must be provided at San Mateo County General Hospital unless the client refuses, or there is continuity of clinical care established at another contract hospital.

Definitions

- Rehabilitative mental health services focus on client needs, strengths, and choices; the client is always involved in service planning and implementation.
- The goal is to help clients take charge of their own lives through informed decision-making.
- Services assist the client in acquiring the skills and supports needed to function successfully in environments where they choose to live, learn, work and socialize with the least amount of professional intervention.
- Staffing is multi-disciplinary and reflects the cultural, linguistic, ethnic,

age, gender, sexual orientation, and other social characteristics of the community Contractor serves.

- Staff includes licensed and non-licensed individuals who are experienced in providing mental health services.
- Family, caregivers, service providers, and other significant support persons are encouraged to participate in the service planning and delivery process to help clients meet their needs and make choices that ensure success in the community.
- Clients and family members of clients are valued as volunteers or paid staff.
- Services are optimal when clients live in housing of their own choice. Single room occupancy is a highly valued housing choice by clients and is emphasized in resource development and service planning.
- For conserved clients, Contractor shall secure approval of the conservator in all decisions. Conserved clients shall be placed in licensed facilities unless otherwise authorized by the conservator.

B. Services

Contractor shall provide an integrated, intensive community treatment and case management program for at least thirty (30) severely and persistently mentally ill adults. Such treatment services are described below and shall be provided in a manner consistent with the terms and provisions of this Agreement.

These services shall be provided in a manner prescribed by the laws of California and in accord with the applicable laws, titles, rules and regulations, including the most current quality improvement requirements of the Short-Doyle/Medi-Cal Program.

The Short-Doyle/Medi-Cal Manual for the Rehabilitation Option and Targeted Case Management is included herein by reference.

The following services shall be available to program clients via direct provision, purchase of service, interagency arrangements, or other means:

1. Comprehensive assessment of the client's service needs and the client's objectives, including, but not limited to, needs for specified mental health services, rehabilitation, housing, employment, education, social and recreational activities, health and dental care. Once assessment is completed, advocate and assist client in obtaining the appropriate service.

- 2. Case management or treatment services will be organized so as to meet fluctuations in intensity of need and be able to assure continuity and integration of services.
- 3. Medication assessment, prescribing, and management, including the use of injectable medications, Clozaril, Risperidone, Olanzapine, and newer selective serotonin reuptake inhibitors as appropriate.
- 4. Pharmaceutical prescribing and purchasing procedures, including choice of pharmacies, shall match the most current policies established by the division. The Mental Health Services Division Medical Director may authorize alternate procedures as proposed by Contractor. All medications prescribed by Contractor psychiatrists should be for specialty mental health services.
- 5. Medication costs for indigent clients with no third party insurance shall be covered by County as long as the above requirements are met.
- 6. Twenty-four (24) hour, seven (7) day a week, crisis response capability, including in-home support services, and services at other community sites as appropriate for maintaining client in the community.
- 7. Treatment of psychiatric conditions in appropriate settings, including emergency care, acute hospital care, care in skilled nursing facilities, and other special residential care facilities when necessary.
- 8. Substance abuse rehabilitation services.
- 9. Services to assist clients in attending client self-help and peer support services.
- 10. Housing services based upon maximizing the client choice and support for the most independent living arrangements possible; services to include consultation with landlords as appropriate.
- 11. Vocational assessment, job development, support employment, competitive employment, and other employment services.
- 12. Money management, including representative payee services where appropriate, income maintenance services and assisting the clients in budgeting.
- 13. Supported education programs.
- 14. Socialization and recreation.

- 15. Information, counseling, and other appropriate individualized services for the client's family members.
- 16. Participation by Contractor in disposition decisions arising during law enforcement contacts.
- 17. Transportation as needed to implement the client's service plan.

C. Eligibility

Contractor shall admit only those persons that are in identified as eligible by the Mental Health Services Division. Names of eligible clients will be given to contractor by Deputy Director of Adult Services and/or her designee. All final candidates must be approved by Deputy Director of Adult Services and/or her designee and, for those clients who are conserved, approval must also be given by the client's conservator.

Contractor will review eligible clients as identified by County to determine appropriateness for REACH Program. If eligible clients are conserved, conservator must be involved in screening and approval process. Contractor will identify to Deputy Director of Adult Services and/or her designee those individual(s) who meet program criteria and if contractor, conservator and County all agree client will be enrolled. If the contractor indicates that the proposed clients are not appropriate for the program and reasons for denial are clearly outlined to County, then additional names of clients will be proposed for review by contractor.

D. Retention of Program Responsibility for the Clients

Contractor's responsibility for the client does not end unless or until:

- 1. Contractor requests, in writing, County review and obtains County approval of the request to terminate the client's enrollment because the client no longer meets the essential criteria for participation or the client refuses any further treatment from Contractor; or County otherwise determines that the client is unlikely to benefit from or is otherwise inappropriate for continued enrollment. Whenever a client is disenrolled, potential clients shall be identified by the Deputy Director of Adult Services and/or her designee. County agrees to respond to disenrollment requests within five (5) working days of receiving the request from contractor; or
- 2. When and if a client becomes stable and annual costs for service fall into the shared savings category for both County and Contractor, County and Contractor shall negotiate moving client into a lower service level and admit a new client with needs for intensive service.

E. Client Satisfaction/Outcomes Assessment

Contractor shall participate in completing any and all state or local instruments and providing other data pertaining to the client outcomes/assessments as directed by the County Mental Health Services Division.

III. RECORDS AND ADMINISTRATIVE REQUIREMENTS

- A. Contractor shall maintain medical records required by the California Code of Regulations. Notwithstanding the foregoing, Contractor shall maintain beneficiary medical and/or clinical records for a period of seven (7) years, except that the records of persons under age eighteen (18) at the time of treatment shall be maintained: a) until one (1) year beyond the person's eighteenth (18th) birthday; or b) for a period of seven (7) years beyond the date of discharge, whichever is later.
- B. Contractor shall report, by the fifteenth (15th) day of the month following services, data on caseload, units of service and other evaluative information as requested to the Division. The data shall become incorporated into an annual (fiscal year-end) report which shall include such information as the Director requires to permit reporting, monitoring, and evaluation of Contractor's program pursuant to this Agreement.
- C. Contractor shall submit a copy of any licensing report issued by licensing agency to County Mental Health Division Adult Services Deputy Director within three (3) days from date received.
- D. Contractor agrees to administer/utilize any and all survey instruments as directed by the County Mental Health Services Division, including outcomes and satisfaction measurement instruments.

IV. GOALS AND OBJECTIVES

A. Agency and Rehabilitation Services

Goal 1: Contractor shall increase Cultural Competence within the agency.

Objective 1: Contractor shall continue to revise and implement a plan, including a recruitment plan, to increase language skills and cultural competence of staff.

Goal 2: All clients shall be administered a satisfaction survey provided by County Mental Health Services Division.

Objective 1: At least eighty-five percent (85%) of clients responding shall rate services as satisfactory as measured by client satisfaction survey.

Goal 3: Contractor shall participate in assessing the level of functioning of

its clients.

Objective 1: At least eighty percent (80%) of clients will improve or maintain

their level of functioning as measured by a standardized outcome

instrument designated by the state.

B. Crisis Residential

Goal 1: Contractor shall reduce the length of hospitalization through the

provision of brief residential treatment and referral services.

Objective 1: At least seventy percent (70%) of all admissions shall be referrals

from hospital emergency rooms, regional teams, or community

hospital psychiatric units.

C. Transitional Residential Treatment Services

Goal 1: Contractor shall provide a residential alternative to institutional

treatment for clients.

Objective 1: Not more than ten percent (10%) of unduplicated clients shall be

discharged to acute inpatient service during the year.

Goal 2: Contractor shall enhance the client's living and coping skills in

order to prepare him/her to remain in a community-based setting.

Objective 1: At least fifty percent (50%) of clients discharged after completion

of three (3) months or more treatment in residential program shall

be discharged to a more independent living.

D. Medication Services

Goal 1: Contractor shall maximize the number of clients served in the

program.

Objective 1: An active caseload of one hundred fifty (150) clients shall be

maintained per full-time equivalent physician. (An active client is defined as a person who has had a face-to-face contact within

ninety (90) days.)

Objective 2: Ninety-five percent (95%) of all cases of clients who have not

received care within the previous ninety (90) day period shall be

closed.

F. Supported Education

Goal 1: Contractor shall improve the potential of clients to achieve their

educational and vocational goals.

Objective 1: Eighty-five percent (85%) of all clients who complete courses will

receive passing grades.

Objective 2: Sixty-five percent (65%) of clients enrolled at the beginning of

each fall and spring semester shall complete the semester.

G. REACH Services

Goal 1: All clients shall be provided an opportunity to give feedback about

the services provided to them.

Objective 1: At least eighty-five percent (85%) of clients responding shall rate

services as satisfactory, as measured by a client satisfaction survey.

Goal 2: Contractor shall retain ongoing service responsibility for all

assigned clients as long as they remain eligible.

Objective 1: No more than ten percent (10%) of clients will be discharged from

the program due to client or family dissatisfaction with the

program.

Goal 3: Contractor's services will maintain clients in the community as an

alternative to institutionalization.

Onjective 1: No more than ten percent (10%) of clients will spend more than

thirty (30) days during the year in subacute facilities.

SCHEDULE B

CAMINAR/CLC: 2001-02

I. PAYMENTS

In full consideration of the services provided by Contractor and subject to the provisions of Paragraph 2.A. of this Agreement, County shall pay Contractor in the manner described below:

A. The maximum amount that County shall be obligated to pay for all services provided under this Agreement shall not exceed the amount stated in Paragraph 2.A. on page 2 of this Agreement. Furthermore, of the total contract obligation, County shall not pay or be obligated to pay more than the amounts listed below for each component of service required under this Agreement:

Crisis Residential Services	\$ 884,065
Transitional Residential Services	831,658
Rehabilitation Services	1,805,840
Youth Assisted Independent Living (YAIL)	392,056
Medication Support Services	284,353
REACH Services	854,075
Stomp Out Stigma (SOS)	1,768
TOTAL CONTRACT OBLIGATION	\$5,053,815

- B. Subject to the maximum amount stated above and the terms and conditions of this Agreement, Contractor shall be reimbursed the full cost of providing services under this Agreement. Unless otherwise authorized by the Director of Health Services or her authorized representative, the rate of payment by County to Contractor shall be one-twelfth (1/12) of the total obligation per month for the term of this Agreement. Budget modifications may be approved by the Director of Health Services or her designee, subject to the maximum amount set forth in Section 2.A. of this Agreement.
- C. The Director of Health Services or her designee, may execute minor amendments and adjustments, such as cost of living increases, up to \$25,000.
- D. Payment by County to Contractor shall be monthly. Contractor shall bill County on or before the tenth (10th) working day of each month for the current month. All claims shall clearly reflect and in reasonable detail give information regarding the services for which claim is made.
- E. Contractor shall be responsible for all mental health services provided to REACH clients. Any costs to the County mental health system incurred by the client shall

clients. Any costs to the County mental health system incurred by the client shall be deducted from Contractor's case rate payment. Reconciliation of these costs shall be conducted on an annual basis. The amount due and payable from Contractor shall be based on net direct cost, which is the gross cost less the federal share of Medi-Cal revenue.

- F. Contractor shall generate Short-Doyle/Medi-Cal federal revenues equal to at least twenty-five percent (25%) of total case rate payments for REACH clients. Contractor shall report services provided to the clients on a form specified by the Mental Health Services Director. If Short-Doyle/Medi-Cal federal revenues are less than twenty-five percent (25%) of the total case rate payments, then the difference shall be deducted from Contractor's payments.
- G. For REACH clients, pharmaceutical prescribing and purchasing procedures, including choice of pharmacies, shall match the most current policies established by the Division. The Mental Health Services Division Medical Director may authorize alternate procedures as proposed by the program.
- H. Contractor shall be liable for repayment of any disallowed charges. Disallowed charges may be identified through quarterly reports, audits, monitoring or other reviews. Contractor may respond to any adverse findings leading to disallowed costs.
- I. The shared risk management will provide an annual case rate per REACH client for up to thirty (30) clients and Contractor shall be responsible for all costs of services for those clients. Contractor's risk will be limited to all costs up to ten percent (10%) above the total contract payments. Contractor may retain all savings up to ten percent (10%) below total contract payments. Costs over ten percent (10%) above the total contract payments shall be covered by County. Savings over ten percent (10%) below the total payments shall be shared sixty percent (60%) for County and forty percent (40%) for Contractor.
- J. In the event that funds provided under this Agreement are expended prior to the end of the contract period, Contractor shall provide ongoing services under the terms of this Agreement through the end of the contract period without further payment from County.
- K. In the event this Agreement is terminated prior to June 30, 2002, Contractor shall be paid on a prorated basis for only that portion of the contract term during which Contractor provided services pursuant to this Agreement. Such billing shall be subject to the approval of the Director.
- L. Contractor shall submit to County a year-end cost report no later than ninety (90) days after the expiration date of this Agreement. This report shall be in accordance with the principles and format outlined in the Cost Reporting/Data Collection (CR/DC) Manual. Contractor shall annually have its books of accounts

audited by a Certified Public Accountant and a copy of said audit report shall be submitted along with the Cost Report. If Contractor has received more than THREE HUNDRED THOUSAND DOLLARS (\$300,000) in federal funds for the fiscal year, the audit must meet the requirements of the Federal Single Audit Act and OMB Circular A-133.

- M. If the annual Cost Report provided to County shows that total payments to Contractor exceed the total actual costs for all of the services rendered by Contractor to eligible patients during the reporting period, a single payment in the amount of the contract savings shall be made to County by Contractor, unless otherwise authorized by the Director of Health Services or her designee. By mutual agreement of County and Contractor, contract savings, or "rollover," may be retained by Contractor and expended the following year, provided that these funds are expended for mental health services approved by County.
- N. In the event Contractor claims or receives payment from County for a service, reimbursement for which is later disallowed by County or the State of California or the United States Government, then Contractor shall promptly refund the disallowed amount to County upon request, or, at its option, County may offset the amount disallowed from any payment due or become due to Contractor under this Agreement or any other agreement.
- O. However, disallowances that are attributable to an error or omission on the part of County shall be the responsibility of County. This shall include but not be limited to quality assurance (QA) audit disallowances as a result of QA Plan error or format problems with County-designed service documents.
- P. Contractor shall submit to County the cultural composition of Contractor's staff in the third (3rd) quarter of the contract year.
- Q. It is projected that Contractor will generate the following level of federal share Medi-Cal reimbursement: TWO MILLION ONE HUNDRED AND TEN THOUSAND NINE HUNDRED SEVENTY NINE DOLLARS (\$2,110,979).

SCHEDULE C

Contract between County of San Mateo and Caminar/CLC, hereinafter called "Contractor."

- a. No person shall, on the grounds of race, color, creed, national origin, religious affiliation or non-affiliation, sex, sexual orientation, marital status, age (over forty (40)), disability, medical condition (including but not limited to AIDS, HIV positive diagnosis, or cancer), political affiliation or union membership be excluded from participation in, be denied the benefits of, or be subjected to discrimination under this Agreement.
- b. Contractor shall insure equal employment opportunity based on objective standards of recruitment, selection, promotion, classification, compensation, performance evaluations, and management relations, for all employees under this contract. Contractor's personnel policies shall be made available to County upon request.
- c. Contractor shall assure compliance with Section 504 of the Rehabilitation Act of 1973 by submitting a signed letter of assurance (Attachment I) of compliance. Contractor shall be prepared to submit a self-evaluation and compliance plan to County upon request within one (1) year of the execution of this Agreement.

COUNTY OF SAN MATEO

HEALTH SERVICES ADMINISTRATION

MEMORANDUM

DATE:	August	23, 2001
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	t J	

Priscilla Morse, Risk Management/Insurance Division

FROM:

Mary Vozikes, Mental Health Services/PONY #MLH 322

CO	NTR	ACTOR:
\sim	1111	-A1A11

Caminar/ClC

DO THEY TRAVEL:

Yes

PERCENT OF TRAVEL TIME:

NUMBER OF EMPLOYEES:

Yes

DUTIES (SPECIFIC):

See attached

COVERAGE:

Comprehensive General Liability: \$1,000,000

Motor Vehicle Liability: \$1,000,000

Professional Liability: \$1,000,000

Worker's Compensation: \$Yes

	\vee
APPROVE	\sim

WAIVE_____

MODIFY___

REMARKS/COMMENTS:

SIGNATURE

ACORD. CERTIFICATE OF INSURANCE

ISSUE DATE (VWDD.YY)

08/09/2001

PRODUCER

INSURED

Andreini & Co License 0208825 220 West 20th Ave. San Mateo, CA 94403 (650)573-1111 Fax(650)378-4361

1720 SOUTH AMPHLETT BLVD. #123

SAN MATEO, CA 94402

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

COMPANY	Α			MARINE		-
COMPANY LETTER	В	STATE :				
COMPANY LETTER	С	***************************************	 			
COMPANY LETTER	D		 		,	

COVERAGES

CAMINAR

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

LETTER

TR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS			
	GENERAL LIABILITY				GENERAL AGGREGATE	\$		
	COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OP AGG.	\$		
	CLAIMS MADE OCCUR.			:	PERSONAL & ADV. INJURY	\$		
	OWNER'S & CONTRACTOR'S PROT.			:	EACH OCCURRENCE	\$		
					FIRE DAMAGE (Any one fire)	\$		
					MED. EXPENSE (Any one person	1):\$		
Α	AUTOMOBILE LIABILITY ANY AUTO	CL541905			COMBINED SINGLE LIMIT	\$ 1,000,00		
	ALL OWNED AUTOS X SCHEDULED AUTOS		02/15/01	02/15/02	BODILY INJURY (Per person)	\$		
	X HIRED AUTOS X NON-OWNED AUTOS				BODILY INJURY (Per accident)	s		
	GARAGE LIABILITY				PROPERTY DAMAGE	\$		
	EXCESS LIABILITY				EACH OCCUPPENCE	\$		
	UMBRELLA FORM				AGGREGATE	\$		
	OTHER THAN UMBRELLA FORM							
	WARKED'S COMBENSATION				X STATUTORY LIMITS			
В		WORKER'S COMPENSATION AND 488-0563 06/05/01 04/01/02	EACH ACCIDENT	\$ 1,000,00				
			00/03/01	0 - , 0 - , 0 -	DISEASE - POLICY LIMIT	\$ 1,000,00		
	EMPLOYERS' LIABILITY				DISEASE - EACH EMPLOYEE	s 1,000,00		
	OTHER							

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

30 DAYS CANCELLATION EXCEPT WITH RESPECT TO NON-PAY, WHICH IS 10 DAYS.

CERTIFICATE HOLDER

CANCELLATION

COUNTY OF SAN MATEO MENTAL HEALTH SRVCS. DIV. 225 W. 37TH AVE., - MARY VOZIKAS SAN MATEO CA 94403 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 days written notice to the certificate holder named to the Left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

UTHORIZED REPRESENTATIVE LAW E. Kan

ACORD 25-S (7/90)

GACORD CORPORATION 196

ACORD CERTIFICAT	TE OF LIABII	LITY INSU	RANCE			(MM/DD YY) EB 13 01						
PRODUCER NATIONAL INSURANCE PROFESSIONALS CORP 1040 NE HOSTMARK STREET #200 POULSBO WA 98370-7454 PHONE: (360)697-3611		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.										
FAX: (360)697-3688		COMPA	NIES AFFORDING COVE	RAGE								
INSURED	COMPANY A:	COMPANY A: UNITED NATIONAL INSURANCE COMPANY										
CAMINAR/CLC		COMPANY B:										
SAN MATEO CA 94402	1720 SOUTH AMPHLETT BLVD #123 SAN MATEO CA 94402			COMPANY C:								
		COMPANY D:										
	COMPANY E:											
COVERAGES												
THIS IS TO CERTIFY THAT THE POLICIES OF IN NOTWITHSTANDING ANY REQUIREMENT, TERM OR MAY PERTAIN, THE INSURANCE AFFORDED LIMITS SHOWN MAY HAVE BEEN REDUCED BY	NSURANCE LISTED BELOW IN OR CONDITION OF ANY CO BY THE POLICIES DESCRIB PAID CLAIMS.	HAVE BEEN ISSUED TO NTRACT OR OTHER DO ED HEREIN IS SUBJEC	THE INSURED NAME OCUMENT WITH RESPE T TO ALL THE TERMS,	D ABOVE FOR THE POLICY P ECT TO WHICH THIS CERTIFIC EXCLUSIONS AND CONDITION	ERIOD II CATE MA NS OF	NDICATED, NY BE ISSUED SUCH PCLICIES.						
NSR: TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMIT	S							
GENERAL LIABILITY	CGA042631	FEB 15 01	FEB 15 02	EACH OCCURRENCE	S	1,000,000						
X COMMERCIAL GENERAL LIABILITY		!	:	FIRE DAMAGE (Any One Fire)	S	100,000						
X CLAIMS MADE OCCUR			•	MED. EXP (Any One Person)	S	EXCLUDED						
A		İ	:	PERSONAL & ADV INJURY	S	1,000,000						
			•	GENERAL AGGREGATE	\$	3,000,000						
GEN'L AGGREGATE LIMIT APPLIES PER:		ļ	:	PRODUCTS-COMP/OP AGG.	\$	3,000,000						
X POLICY PROJECT LOC				!		_						
AUTOMOBILE LIABILITY			!	COMBINED SINGLE LIMIT (Ea accident)	s							
ANY AUTO		ļ	:	<u> </u>								
ALL OWNED AUTOS			:	BODILY INJURY (Per person)	s							
SCHEDULED AUTOS		:	:		<u> </u>							
HIRED AUTOS				BODILY INJURY (Per accident)	s							
NON-OWNED AUTOS		İ		(1 et accident)	<u> </u>							
			:	PROPERTY DAMAGE	s							
GARAGE LIABILITY		<u> </u>	- :	AUTO ONLY - EA ACCIDENT	; \$							
ANY AUTO					- '							
			İ	AUTO ONLY:	3 \$							
EXCESS LIABILITY				EACH OCCURRENCE	is							
OCCUR CLAIMS MADE			i !	AGGREGATE	\$							
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DEDUCTIBLE					s							
RETENTION \$		j			s							
WORKERS COMPENSATION AND				WC STATU- OTHE	R							
EMPLOYERS' LIABILITY				E.L. EACH ACCIDENT	s -							
į.				E.L. DISEASE-EA EMPLOYEE	S							
	 	İ		E.L. DISEASE-POLICY LIMIT	S							
OTHER: PROFESSIONAL LIABILITY	CGA042631	FEB 15 01	FEB 15 02	\$1,000,000 EACH CLA \$3,000,000 AGGREGA AGG. LIMIT IS COMBI	TE	L & CGL.						
DESCRIPTION OF OPERATIONS/LOC. INSURED UNDER THE ABOVE POLIC THE NAMED INSURED.	ATIONS/VEHICLES/SPE Y BUT ONLY AS THEIR	ECIAL ITEMS RINTERESTS MAY	CERTIFICATE APPEAR AND ON	HOLDER TO BE NAMED LY WITH RESPECT TO	AS A	DDITIONAL PERATIONS OF						
CERTIFICATE HOLDER ADD	ITIONAL INSURED; INSURER L	ETTER: CANCI	ELLATION									
DEPARTMENT OF MENTAL HEALTH MENTAL HEALTH DIVISION 225 WEST 37TH AVENUE SAN MATEO, CA 94401		SHOULD EXPIRA NOTICE SUCH N	O ANY OF THE ABOVE TION DATE THEREOF,	DESCRIBED POLICIES BE C./ THE ISSUING COMPANY WILL HOLDER NAMED TO THE LE HO OBLIGATION OR LIABILITY OF	MAIL :	30 DAYS WRITTEN FAILURE TO MAIL						
Attention:			RIZED REPRESENTATIV		Clijo	han						

COUNTY OF SAN MATEO

Equal Benefits Compliance Declaration Form

Vendor Identification									
Name of Contractor:	Caminar	CLC							
Contact Person:	Barry Shea								
Address:	1720 So	uth Amphiett Blvd.	, Suite 123						
	San Mat	San Mateo, California 94401							
Phone Number:	650 578 869	L Fax Number	: <u>650 578 869</u> 7						
II Employees									
Does the Contractor have	e any employees?	Yes No							
Does the Contractor prov	vide benefits to spouse	s of employees?	Yes/No						
If the answer to	one or both of the above is	no, please skip to Sect	tion IV.						
III Equal Benefits Compli	ance (Check one)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
its employees with s Yes, the Contractor employees in lieu o No, the Contractor o The Contractor is use	spouses and its employ complies by offering a f equal benefits.	rees with domestic cash equivalent p ining agreement w	ayment to eligible						
IV Declaration									
foregoing is true and co	of perjury under the la orrect, and that I am au	thorized to bind th	is entity contractually.						
Executed this 6 day of	of <u>September</u> , 2001	at <u>SAN MATE</u> (City)	(State)						
Sbardill		SHARON &	3ARDILL						
Signature		Name (Please Print)							
C. F. o. Title		94-16393	389						
Title		Contractor Tax I	dentification Number						

CAMINAR/CLC SAN MATEO COUNTY BUDGET Fiscal Year 2001 - 2001

	·	REHAB SERVICES	CRISIS RESIDENTIAL	YAIL	REACH	MED CLININC	TRANSITIONAL HOUSING	sos	TOTAL ALL
#	LINE ITEM		2						
REVENUE									
1	Grants	•	500	-	•	-	•	•	500
2	Allocations/Fund Raising	•	2,000	•	-	-	•	-	(2,000
3	Program Service Fees	•	37,200	-	-	•	219,697	· -	256,897
4	Dept. of Rehabilitation Fees		•	•	•	-	-	•	
5	Fees/Government Agencles	1,805,840	884,065	392,056	854,075	284,352	831,658	1,768	5,053,815
6	Wrap Around Vacancy	•	•	•	-	-		-	-
7	Lease Income	•	-	•	-	•	•	•	-
8	Associated Organizations	•	•	•	-	-	-	•	-
9	Individuals & Business	,	-	-	•	-	•	-	-
10 11	DOR Establishment	1 005 040		-					
11	TOTAL REVENUE	1,805,840	923,765	392,056	854,075	284,352	1,051,355	1,768	5,313,212
EXPENSES PERSONN									
12	Salaries	1,054,612	575,282	250,487	439,438	108,129	578,847		3,006,796
13	Payroll Taxes	80,678	44,009	19,162	33,617	8,272	44,282	-	230,020
14	Benefits	98,180	51,395	22,797	30,695	10,455	57,148	-	270,672
15	Workers' Comp. Insurance	69,632	40,981	19,662	34,636	5,838	42,993	-	213,743
16	SUI	3,480	1,898	827	1,450	357	1,910	-	9,922
17	Retirement	5,828	2,874	1,251	2,195	540	2,891	-	15,579
18	Payroll Provision	1,265	615	275	615	195	450	-	3,415
19	TOTAL PERSONNEL COSTS	1,313,675	717,055	314,462	542,647	133,786	728,521	-	3,750,147
CONTRACT	r costs		-				-	-	-
20	Contract	19,800	-	-	-	74,415		645	94,860
21	Inpatient Services		-	-	58,930	-	-	-	58,930
22	Outpatient Services		-	-	37,790	-	•	-	37,790
23	Dependant Coverage	4,000	•	-	-	-	-	-	4,000
24	TOTAL CONTRACT COSTS	23,800	-	-	96,720	74,415	-	645	195,580
SERVICE &	SUPPLY COSTS								
25	Fingerprinting	1,005	680	500	250	100	850	-	3,385
26	Advertising	4,100	1,000	1,000	1,000	250	2,000	-	9,350
27	Agency Vehicle Expense	6,700	2,500	2,000	3,350	-	1,200	453	16,203
28	Subscriptions	500	725	100	10Ó	50	1,500	62	3,037
29	Depreciation & Amortization	5,050	9,500	3,500	15,000	2,000	31,000	-	66,050
30	Travel	42,450	750	2,000	23,000	250	2,605	168	71,223
31	Equipment Rental	4,800	500	7,000	3,500	1,000	400	•	17,200
32	Rent: Offices	86,489	•	•	23,000	33,000	•	-	142,489
33	Rent: Dwellings	5,000	•	1,000	7,500	•	•	-	13,500

		REHAB Services	CRISIS RESIDENTIAL	YAIL	REACH	MED CLININC	TRANSITIONAL HOUSING	sos	TOTAL ALL
#	LINE ITEM								
SERV	ICE & SUPPLY COSTS CONTINUED							•	
34	Telephone Expense	32,629	3,500	3,245	6,500	2,300	9,930		58,10
35	Telephone Costs: Residents	810	3,500	2,243	1,800	2,300	2,230		2,61
36	Utilities	600	18,000	-	1,000	-	18,565		37,16
37	Utilities Costs: Residents	1,940	10,000	500	1,000	-	10,505	_	3,44
38	Insurance Expense	6,872	3,800	1,510	2,500	900	5,300		20,88
39	Food & Beverage	0,072	25,000	2,210	1,000	-	50,000		76,00
. 40	Insurance: Agency Vehicle	5,000	5,000	3,355	3,300		3,000		19,65
41	Mortgage Interest	3,000	8,000	3,333	3,300	-	45,000		53,00
42	Household Supplies	2,000	3,700	300	2,000	-	6,000		14,00
43	Membership Dues & Licenses	2,575	1,900	300	1,200	250	2,600	38	8,86
44	Bldg Maint Supplies & Repairs	11,500	8,500	2,600	3,000	-	11,600	-	37,20
45	Household Furnishings	4,580	2,700	1,200	7,065	-	4,000	-	19,54
46	Maintenance: Equipment	2,700	2,000	875	1,500		1,500	-	8,57
47	Computer Maint. & Supplies	5,100	1,500	1,500	5,000	500	3,000		16,60
48	Office Supplies	17,371	4,500	750	3,000	3,000	4,600	110	33,33
49	Project Self Esteem		300	·	-,	-,	-		30
50	Conference & Training	7,250	2,000	1,000	2,500	1,000	3,400		17,15
51	Printing & Publications	2,600	450	100	750	250	800	118	5,06
52	Book Club - New Ventures	500	•	-	-	-	-		50
53	Program Expense	6,800	2,500	3,000	2,660	•	5,400	-	20,36
54	Medical Expenses	1,000	500	-	1,000	2,500	1,000	•	6,00
55	Real Estate Tax	•	•	-	-	-	1,500		1,50
56	Postage & Freight	3,975	100	75	500	50	800	•	5,50
57	Client Stipend	•	250	-	-	-	•	-	25
58	Consumer & Family Ed.Tr'g	1,300	250	-	<u>.</u>	-		•	1,55
59	CSM Summer Program				680		•	•	680
60	Miscellaneous	300	100	100	500	100	200	-	1,30
61	Wealth of Health	9,110	2,100	720	3,500	-		•	15,43
62	Special Events	6,980	1,200	550	2,500	500	1,000	•	12,73
63	Pantry		2,000			-			2,000
64	TOTAL SERVICE & SUPPLY COSTS	289,586	115,505	38,780	130,155	48,000	218,750	949	841,72
65	TOTAL EXPENSES	1,627,061	832,560	353,242	769,522	256,201	947,271	1,594	4,787,45
	SUMMARY DATA				.				
66	TOTAL REVENUE	1,805,840	923,765	392,056	854,075	284,352	1,051,355	1,768	5,313,21
67	TOTAL EXPENSES	1,627,061	832,560	353,242	769,522	256,201	947,271	1,594	4,787,45
68	SUBTOTAL ADMINISTRATIVE COSTS	178,779	91,205	38,813	84,553	28,150	104,084	175	525,76
69 70	ADMINISTRATIVE COSTS	178,779	91,205	38,813	84,553	28,151	104,084	175	525,76
70 21	FEES/GOVERNMENT AGENCIES DEFICIT/SURPLUS	1,805,840 0	884,065 0	392,056 0	854,075 0	284,352	831,658 0	1,768	5,053,81
71	DEFICIT/SURPLUS	U	U	U	U	0	U	0	
		•							
			2						