

File No. 220317

Committee Item No. 13

Board Item No. _____

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Budget and Finance Committee Date May 11, 2022

Board of Supervisors Meeting Date _____

Cmte Board

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| <input type="checkbox"/> | <input type="checkbox"/> | Motion |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Resolution |
| <input type="checkbox"/> | <input type="checkbox"/> | Ordinance |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Digest |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Budget and Legislative Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Youth Commission Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Introduction Form |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Department/Agency Cover Letter and/or Report |
| <input type="checkbox"/> | <input type="checkbox"/> | MOU |
| <input type="checkbox"/> | <input type="checkbox"/> | Grant Information Form |
| <input type="checkbox"/> | <input type="checkbox"/> | Grant Budget |
| <input type="checkbox"/> | <input type="checkbox"/> | Subcontract Budget |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Contract/Agreement |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Form 126 – Ethics Commission |
| <input type="checkbox"/> | <input type="checkbox"/> | Award Letter |
| <input type="checkbox"/> | <input type="checkbox"/> | Application |
| <input type="checkbox"/> | <input type="checkbox"/> | Public Correspondence |

OTHER (Use back side if additional space is needed)

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| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Amendment No. 1 - 2/1/2021</u> |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>Original Agreement - 7/1/2018</u> |
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Completed by: Brent Jalipa Date May 6, 2022

Completed by: Brent Jalipa Date _____

1 [Contract Amendment - Alternative Family Services, Inc. - Supporting Permanency and
2 Stability for Children and Youth Involved with the Foster Care System - Not to Exceed
3 \$24,959,253]

4 **Resolution approving Amendment No. 2 to the agreement between Alternative Family**
5 **Services, Inc. and the Department of Public Health (DPH), for services to support**
6 **permanency and stability for children and youth involved with the foster care system**
7 **and their families; to increase the agreement by \$14,960,347 for an amount not to**
8 **exceed \$24,959,253; to extend the term by five and one half years, from June 30, 2022,**
9 **for a total agreement term of July 1, 2018, through December 31, 2027; and to authorize**
10 **DPH to enter into amendments or modifications to the contract prior to its final**
11 **execution by all parties that do not materially increase the obligations or liabilities to**
12 **the City and are necessary to effectuate the purposes of the contract.**

13
14 WHEREAS, There is a continued need for services to support permanency and stability
15 for children and youth involved with the foster care system and their families; and

16 WHEREAS, DPH selected Alternative Family Services, Inc. (AFS) to provide Treatment
17 Foster Care and Therapeutic Visitation Services through Request for Proposal (RFP), RFP
18 33-2016 issued on November 2, 2016, and to provide Outpatient Treatment Services and
19 Educationally Related Mental Health Services through RFP 1-2017, issued on March 24,
20 2017; and

21 WHEREAS, DPH entered into an original agreement with AFS on July 1, 2018, with the
22 term of July 1, 2018, through March 31, 2021, in an amount not to exceed \$9,680,288 and

23 WHEREAS, In order to reflect the annualization of additional funding for Treatment
24 Foster Care services added in Fiscal Year 2019-2020, DPH amended the agreement on
25

1 February 1, 2021, to extend the term through June 30, 2022, and added \$318,618 for an
2 amount not to exceed \$9,998,906; and

3 WHEREAS, DPH wishes to amend the agreement to continue providing
4 behavioral health outpatient services to children and adolescents in alignment with the length
5 of the term anticipated in RFP 1-2017, by extending the term by five and one half years, from
6 June 30, 2022, through December 31, 2027, increasing the contract by \$14,960,347 for a total
7 contract amount not to exceed \$24,959,253 and for a total agreement term of July 1, 2018,
8 through December 31, 2027; now, therefore, be it

9 RESOLVED, That the Board of Supervisors hereby authorizes the Director of Public
10 Health and the Director of the Office of Contract Administration/Purchaser, on behalf of the
11 City and County of San Francisco, to execute Amendment No. 2 to the agreement with
12 Alternative Family Services, Inc. for services to support permanency and stability for children
13 and youth involved with the foster care system and their families, to extend the term by five
14 and one half years, from June 30, 2022, through December 31, 2027, increasing the contract
15 by \$14,960,347, for a total contract amount not to exceed \$24,959,253, and for a total
16 agreement term of July 1, 2018, through December 31, 2027; and, be it

17 FURTHER RESOLVED, That the Board of Supervisors authorizes the Department of
18 Public Health to enter into any amendments or modifications to the contract, prior to its final
19 execution by all parties, that the Department determines, in consultation with the City
20 Attorney, are in the best interests of the City, do not otherwise materially increase the
21 obligations or liabilities of the City, are necessary or advisable to effectuate the purposes of
22 the contract, and are in compliance with all applicable laws; and be it

23 FURTHER RESOLVED, That within thirty (30) days of the contract being fully executed
24 by all parties, the Director of Health and/or the Director of the Office of Contract

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1 Administration/Purchaser shall provide the final contacts to the Clerk of the Board for inclusion
2 into the official File No. 220317.

3 RECOMMENDED

4 /s/ _____

5 Dr. Grant Colfax

6 Director of Health

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Item 13 File 22-0317	Department: Public Health
EXECUTIVE SUMMARY	
<p>Legislative Objectives</p> <ul style="list-style-type: none"> • The proposed resolution would approve the second amendment to a Department of Public Health contract with Alternative Family Services Inc., to extend the agreement for five and a half years through Dec. 31, 2027 and increase the total not-to-exceed amount by \$14,960,347 to a total not-to-exceed amount of \$24,959,253. <p>Key Points</p> <ul style="list-style-type: none"> • Alternative Family Services, Inc. (AFS) is a not-for-profit organization providing foster care services, adoption services, and mental health services for children, youth and families in the foster care system in Northern California. The proposed agreement funds an outpatient behavioral health program youth in the foster care system or at risk of being in the foster care system. • The Department did not require a plan of action in either of the two most recent performance monitoring reports completed for this agreement. <p>Fiscal Impact</p> <ul style="list-style-type: none"> • New spending on through December 2027 totals \$14.8 million plus a \$2.1 million contingency. Annual spending on outpatient services funds 16.25 FTE, including 10.71 FTE mental health professionals and 5.54 FTE administrative staff. • The \$14.8 million of new spending is funded by the General Fund (\$6 million), Medical funds (\$8.8 million). <p>Recommendation</p> <ul style="list-style-type: none"> • Approve the proposed resolution. 	

MANDATE STATEMENT

City Charter Section 9.118(b) states that any contract entered into by a department, board or commission that (1) has a term of more than ten years, (2) requires expenditures of \$10 million or more, or (3) requires a modification of more than \$500,000 to such contract is subject to Board of Supervisors approval.

BACKGROUND

Alternative Family Services, Inc.

Alternative Family Services, Inc. (AFS) is a not-for-profit organization providing foster care services, adoption services, and mental health services for children, youth and families in the foster care system in Northern California.

Solicitations

On March 24, 2017, the Department of Public Health (the Department) issued a Request For Proposals (RFP) #1-2017 seeking multiple vendors to provide mental health outpatient treatment services for children, youth and families in the foster care system. This RFP outlined an agreement with an initial term of 1.5 years, with subsequent extension options for the City up to a maximum term of 10 years.

On November 2, 2016, the Department issued RFP 33-2016 seeking multiple vendors to provide specialty mental health services to children, youth and their families, including Therapeutic Visitation Services (TVS), and Treatment Foster Care services. The RFP outlined an initial agreement of one year with four options to extend, for a maximum term of five years, ending on June 30, 2022. As described below, these services are included in the current agreement but not the proposed extension, because the solicitation authority expires on June 30, 2022

Scoring

In response to the 2017 solicitation, AFS applied for one category of services, Mental Health Outpatient Treatment Services. It received 204 points of 230 possible points and placed seventh of 18 applicants in the category. Of the 28 total applicants across four types of services, 25 were approved to provide services, pending budget negotiations.

The Department divided proposals into two batches, each of which was reviewed by a separate panel. One review panel consisted of one representative each from the Department, the San Francisco Unified School District (SFUSD), Contra Costa County Health Services, and the San Francisco Human Services Agency (HSA). A second review panel consisted of two representatives from SFUSD; one representative each from the Department, the Department of Children, Youth and Their Families, Contra Costa County Health Services; and an independent contractor for HSA.

Initial Agreement

On July 1, 2018, the Department entered into an initial contract agreement with AFS for a period from July 1, 2018 through March 31, 2021 to provide outpatient behavioral health services and

Therapeutic Visitation Services to children, youth and families in the foster care system, with a total not-to-exceed amount of \$9,680,288. Because the initial contract agreement amount was lower than \$10,000,000, the contract did not require approval by the Board of Supervisors.

According to a first-year cost breakdown attached to the contract, the outpatient behavioral health services program accounted for 87.6% of costs in Fiscal Year 2018-19, with therapeutic visitation accounting for 12.4% of costs.

2018 Interim Contract

To prevent an interruption in services during an expected gap between expiring contracts and the start of new agreements reflecting the solicitations noted above, during Fiscal Year 2017-18 the Department provided AFS and other providers with interim contracts for the 2018 calendar year. When the Department subsequently entered the 2018 agreement with AFS on July 1, 2018, this created a six-month overlap period between the interim contract and the new agreement, during which the Department paid AFS through the interim contract. These expenditures during this period, totaling \$1,474,512, thus remained available for subsequent expenditures through the new agreement. The Department subtracted this amount from actual and projected expenditures when calculating the not-to-exceed total for the proposed amendment.

First Amendment

On February 1, 2021 the City amended the contract to extend the term of the agreement through June 30, 2022 and increase the not-to-exceed amount to \$9,998,906. The amendment also referenced a third category of services, Treatment Foster Care, which AFS had started providing in FY 2019-20 under the 2016 solicitation. The original two categories of services in the initial agreement, outpatient behavioral health and therapeutic visitation, remained unchanged.

AFS' outpatient behavioral health program accounted for 65.96% of the projected expenditures for FY 2020-2021 described in Appendix B of the contract amendment. Therapeutic Visitation Services and Treatment Foster Care accounted for 28.33% and 5.72% of projected expenditures, respectively.

DETAILS OF PROPOSED LEGISLATION

The proposed resolution would approve the second amendment to the Department of Public Health's contract with Alternative Family Services Inc. for the provision of behavioral health outpatient services for children and youth in the foster care system and their families. The proposed amendment would extend the agreement for outpatient services for five and a half years through Dec. 31, 2027, and it would increase the total not-to-exceed amount by \$14,960,347 to a total not-to-exceed amount of \$24,959,253.

Two other services that AFS provides in the current agreement, Therapeutic Visitation Services and Treatment Foster Care, are authorized under a separate solicitation than outpatient services and expire June 30, 2022. The Department has issued a new solicitation for providing these services after that date, and the selected entity or entities will provide them under a new agreement or agreements.

Services Provided

AFS' outpatient behavioral health treatment services include comprehensive assessments of clients' mental health needs, individual and family therapy, and rehabilitation services. AFS also provides case management services to coordinate among stakeholders including attorneys, schools, probation officers, biological families and foster families, as well as linkage to nonprofit organizations and other community resources. The program address is 250 Executive Park Boulevard, Suite 4900, in San Francisco, and clinicians also provide intensive home-based services aimed at improving social and daily living skills.

The outpatient behavioral health program serves youth who are in the foster care system or at risk of being in the foster care system.

Performance Measurement

The Department did not require a plan of action in either of the two most recent performance monitoring reports completed for this agreement.

According to the Department's FY 2019-20 performance monitoring report:

- AFS delivered 321,671 (83.64%) of 384,584 contracted units of service in FY 2019-20 for the outpatient behavioral health services portion of this agreement. The organization provided 92 unduplicated clients with these services, more than its contracted number of 60 unduplicated outpatient clients.
- AFS' outpatient behavioral services program met 50 percent of performance objectives; the performance monitoring report notes "a few areas of low compliance with some of the performance objectives." The report recommended that AFS improve its completion of treatment plans and needs assessments in the electronic medical records system Avatar, as well as its documentation of client improvement.
- The program received 100 percent client satisfaction among the 36% of clients who completed a client satisfaction survey.

FISCAL IMPACT

Exhibit 1 below shows the projected spending during the proposed extension period, which totals \$16,949,167, including a 12% contingency.

Exhibit 1: Proposed Spending

	FY 2022-23	FY 2023-24	FY 2024-25	FY 2025-26	FY 2026-27	FY 2027-28	Total
Outpatient Services	2,202,430	2,352,392	2,502,720	2,653,426	2,804,132	1,402,066	13,917,166
MCO & CODB	150,202	150,568	150,947	150,947	150,947	150,947	<u>904,557</u>
Subtotal							14,821,723
Contingency							2,127,445
Total	2,352,632	2,502,960	2,653,667	2,804,373	2,955,078	1,553,012	16,949,167

Source: Public Health

Notes: MCO refers to the requirements of the Minimum Compensation Ordinance. CODB refers to annual cost of doing business increases. FY 2027-28 values are through December 2027.

According to Appendix B of the existing contract, annual spending on outpatient services funds 16.25 FTE, including 10.71 FTE mental health professionals and 5.54 FTE administrative staff. The \$14.8 million of new spending is funded by the General Fund (\$6 million), Medical funds (\$8.8 million)

The proposed contract amendment would increase the total not-to-exceed amount to \$24,959,253. Exhibit 2 below shows the basis for the not-to-exceed amount.

Exhibit 2: Basis for Requested Not-to-Exceed Amount

Projected Spending Through June 2022	9,484,598
Spending on interim contract	(1,474,512)
New Spending	16,949,167
New Not to Exceed	24,959,253

Source: Public Health

RECOMMENDATION

Approve the proposed resolution.

City and County of San Francisco
Office of Contract Administration
Purchasing Division

Second Amendment

THIS AMENDMENT (this “Amendment”) is made as of February 1, 2022 in San Francisco, California, by and between **Alternative Family Services, Inc.** (“Contractor”) and the **City and County of San Francisco**, a municipal corporation (“City”), acting by and through its Director of the Office of Contract Administration.

Recitals

WHEREAS, City and Contractor have entered into the Agreement (as defined below); and

WHEREAS, City and Contractor desire to modify the Agreement on the terms and conditions set forth herein to extend the contract term, increase the contract amount and update standard contractual clauses; and

WHEREAS, the Agreement was competitively procured as required by San Francisco Administrative Code Chapter 21.1 through Request for Proposals (“RFP”), RFP 1-2017 issued on 3/24/17, and this modification is consistent therewith; and

WHEREAS, approval for this Amendment was obtained when the Civil Service Commission approved Contract number 46987-16/17 on August 3, 2020; and.

WHEREAS, approval for this Amendment was obtained when the Board of Supervisors approved Resolution number _____ on _____.

NOW, THEREFORE, Contractor and the City agree as follows:

Article 1 Definitions

The following definitions shall apply to this Amendment:

1.1 Agreement. The term “Agreement” shall mean the Agreement dated July 1, 2018, (Contract ID# 1000010827) between Contractor and City as amended by First amendment dated February 1, 2021 and this Second amendment.

1.2 Other Terms. Terms used and not defined in this Amendment shall have the meanings assigned to such terms in the Agreement.

Article 2 Modifications to the Agreement

The Agreement is hereby modified as follows:

2.1 Term. *Section 2.1 Term of the Agreement currently reads as follows:*

2.1 The term of this Agreement shall commence on the latter of: (i) July 1, 2018; or (ii) the Effective Date and expire on June 30, 2022, unless earlier terminated as otherwise provided herein.

Such section is hereby amended in its entirety to read as follows:

2.1 The term of this Agreement shall commence on the latter of: (i) July 1, 2018; or (ii) the Effective Date and expire on December 31, 2027 unless earlier terminated as otherwise provided herein.

2.2 **Payment.** *Section 3.3.1 Payment of the Agreement currently reads as follows:*

3.3.1 Payment. Contractor shall provide an invoice to the City on a monthly basis for Services completed in the immediately preceding month, unless a different schedule is set out in Appendix B, "Calculation of Charges." Compensation shall be made for Services identified in the invoice that the Director of Health, in his or her sole discretion, concludes has been satisfactorily performed. Payment shall be made within 30 calendar days of receipt of the invoice, unless the City notifies the Contractor that a dispute as to the invoice exists. In no event shall the amount of this Agreement exceed **Nine Million Nine Hundred Ninety-Eight Thousand Nine Hundred Six Dollars (\$9,998,906)**. The breakdown of charges associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein. In no event shall City be liable for interest or late charges for any late payments.

Such section is hereby amended in its entirety to read as follows:

3.3.1 Payment. Contractor shall provide an invoice to the City on a monthly basis for Services completed in the immediate preceding month, unless a different schedule is set out in Appendix B, "Calculation of Charges." Compensation shall be made for Services identified in the invoice that the Director of Health, in his or her sole discretion, concludes has been satisfactorily performed. Payment shall be made within 30 calendar days of receipt of the invoice, unless the City notifies the Contractor that a dispute as to the invoice exists. In no event shall the amount of this Agreement exceed **Twenty-Four Million Nine Hundred Fifty-Nine Thousand Two Hundred Fifty-Three Dollars (\$24,959,253)**. The breakdown of charges associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein. A portion of payment may be withheld until conclusion of the Agreement if agreed to by both parties as retainage, described in Appendix B. In no event shall City be liable for interest or late charges for any late payments.

2.3 **Audit and Inspection of Records.** *The following is hereby added to Article 3 of the Agreement, replacing the previous Section 3.4 in its entirety.*

3.4 **Audit and Inspection of Records.**

3.4.1 Contractor agrees to maintain and make available to the City, during regular business hours, accurate books and accounting records relating to its Services. Contractor will permit City to audit, examine and make excerpts and transcripts from such books and records, and to make audits of all invoices, materials, payrolls, records or personnel and

other data related to all other matters covered by this Agreement, whether funded in whole or in part under this Agreement. Contractor shall maintain such data and records in an accessible location and condition for a period of not fewer than five years, unless required for a longer duration due to Federal, State, or local requirements of which the City will notify contractor in writing, after final payment under this Agreement or until after final audit has been resolved, whichever is later. The State of California or any Federal agency having an interest in the subject matter of this Agreement shall have the same rights as conferred upon City by this Section. Contractor shall include the same audit and inspection rights and record retention requirements in all subcontracts.

Contractor shall annually have its books of accounts audited by a Certified Public Accountant and a copy of said audit report and the associated management letter(s) shall be transmitted to the Director of Public Health or his /her designee within one hundred eighty (180) calendar days following Contractor's fiscal year end date. If Contractor expends \$750,000 or more in Federal funding per year, from any and all Federal awards, said audit shall be conducted in accordance with 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. Said requirements can be found at the following website address: https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl.

3.4.2 If Contractor expends less than \$750,000 a year in Federal awards, Contractor is exempt from the single audit requirements for that year, but records must be available for review or audit by appropriate officials of the Federal Agency, pass-through entity and General Accounting Office. Contractor agrees to reimburse the City any cost adjustments necessitated by this audit report. Any audit report which addresses all or part of the period covered by this Agreement shall treat the service components identified in the detailed descriptions attached to Appendix A and referred to in the Program Budgets of Appendix B as discrete program entities of the Contractor.

3.4.3 The Director of Public Health or his / her designee may approve a waiver of the audit requirement in Section 3.4.1 above, if the contractual Services are of a consulting or personal services nature, these Services are paid for through fee for service terms which limit the City's risk with such contracts, and it is determined that the work associated with the audit would produce undue burdens or costs and would provide minimal benefits. A written request for a waiver must be submitted to the DIRECTOR ninety (90) calendar days before the end of the Agreement term or Contractor's fiscal year, whichever comes first.

3.4.4 Any financial adjustments necessitated by this audit report shall be made by Contractor to the City. If Contractor is under contract to the City, the adjustment may be made in the next subsequent billing by Contractor to the City or may be made by another written schedule determined solely by the City. In the event Contractor is not under contract to the City, written arrangements shall be made for audit adjustments.

2.4 Insurance. *The following is hereby added to Article 5 of the Agreement, replacing the previous Section 5.1 in its entirety:*

5.1 Insurance.

5.1.1 **Required Coverages.** Insurance limits are subject to Risk Management review and revision, as appropriate, as conditions warrant. Without in any way limiting Contractor's liability pursuant to the "Indemnification" section of this Agreement, Contractor must

maintain in force, during the full term of the Agreement, insurance in the following amounts and coverages:

(a) Commercial General Liability Insurance with limits not less than \$1,000,000 each occurrence for Bodily Injury and Property Damage, including Contractual Liability, Personal Injury, Products and Completed Operations. Policy must include Abuse and Molestation coverage.

(b) Commercial Automobile Liability Insurance with limits not less than \$1,000,000 each occurrence, "Combined Single Limit" for Bodily Injury and Property Damage, including Owned, Non-Owned and Hired auto coverage, as applicable.

(c) Workers' Compensation Insurance, in statutory amounts, with Employers' Liability Limits not less than \$1,000,000 each accident, injury, or illness.

(d) Professional Liability Insurance, applicable to Contractor's profession, with limits not less than \$1,000,000 for each claim with respect to negligent acts, errors or omissions in connection with the Services.

(e) Blanket Fidelity Bond or Crime Policy with limits of in the amount of any Initial Payment included under this Agreement covering employee theft of money written with a per loss limit.

(f) Reserved (Technology Errors and Omissions Liability Insurance)

(g) Cyber and Privacy Insurance with limits of not less than \$1,000,000 per claim. Such insurance shall include coverage for liability arising from theft, dissemination, and/or use of confidential information, including but not limited to, bank and credit card account information or personal information, such as name, address, social security numbers, protected health information or other personally identifying information, stored or transmitted in any form.

(h) Reserved. (Pollution Liability Insurance).

5.1.2 **Additional Insured Endorsements**

(a) The Commercial General Liability policy must be endorsed to name as Additional Insured the City and County of San Francisco, its Officers, Agents, and Employees.

(b) The Commercial Automobile Liability Insurance policy must be endorsed to name as Additional Insured the City and County of San Francisco, its Officers, Agents, and Employees.

(c) The Commercial Automobile Liability Insurance policy must be endorsed to include (i) Auto Pollution Additional Insured Endorsement naming as Additional Insured the City and County of San Francisco, its Officers, Agents, and Employees; and (ii) Form MCS-90 for Motor Carrier Policies of Insurance for Public Liability under Sections 29 and 30 of the Motor Carrier Act of 1980.

5.1.3 **Waiver of Subrogation Endorsements**

(a) The Workers' Compensation policy(ies) shall be endorsed with a waiver of subrogation in favor of the City for all work performed by the Contractor, its employees, agents and subcontractors.

5.1.4 **Primary Insurance Endorsements**

(a) The Commercial General Liability policy shall provide that such policies are primary insurance to any other insurance available to the Additional Insureds, with respect to any claims arising out of this Agreement, and that the insurance applies separately to each insured against whom claim is made or suit is brought.

(b) The Commercial Automobile Liability Insurance policy shall provide that such policies are primary insurance to any other insurance available to the Additional Insureds, with respect to any claims arising out of this Agreement, and that the insurance applies separately to each insured against whom claim is made or suit is brought.

(c) Reserved. (Pollution Liability Insurance Primary Insurance Endorsement).

5.1.5 Other Insurance Requirements

(a) Thirty (30) days' advance written notice shall be provided to the City of cancellation, intended non-renewal, or reduction in coverages, except for non-payment for which no less than ten (10) days' notice shall be provided to City. Notices shall be sent to the City email address: luciana.garcia@sfdph.org.

(b) Should any of the required insurance be provided under a claims-made form, Contractor shall maintain such coverage continuously throughout the term of this Agreement and, without lapse, for a period of three years beyond the expiration of this Agreement, to the effect that, should occurrences during the Agreement term give rise to claims made after expiration of the Agreement, such claims shall be covered by such claims-made policies.

(c) Should any of the required insurance be provided under a form of coverage that includes a general annual aggregate limit or provides that claims investigation or legal defense costs be included in such general annual aggregate limit, such general annual aggregate limit shall be double the occurrence or claims limits specified above.

(d) Should any required insurance lapse during the term of this Agreement, requests for payments originating after such lapse shall not be processed until the City receives satisfactory evidence of reinstated coverage as required by this Agreement, effective as of the lapse date. If insurance is not reinstated, the City may, at its sole option, terminate this Agreement effective on the date of such lapse of insurance.

(e) Before commencing any Services, Contractor shall furnish to City certificates of insurance and additional insured policy endorsements with insurers with ratings comparable to A-, VIII or higher, that are authorized to do business in the State of California, and that are satisfactory to City, in form evidencing all coverages set forth above. Approval of the insurance by City shall not relieve or decrease Contractor's liability hereunder.

(f) If Contractor will use any subcontractor(s) to provide Services, Contractor shall require the subcontractor(s) to provide all necessary insurance and to name the City and County of San Francisco, its officers, agents and employees and the Contractor as additional insureds.

The Appendices listed below are Amended as follows:

2.5 Appendices A, A-1 through A-3 dated 2/1/2022 (i.e., February 1, 2022) are hereby added for FY 2021-22.

2.6 Appendices B, B-1 through B-3 dated 2/1/2022 (i.e., February 1, 2022) are hereby added for FY 2021-22.

2.7 Appendix D- Data Access and Sharing Terms is hereby added for this Amendment.

2.8 Appendix F: Invoices Templates corresponding with this FY 2021-22 Second Amendment are hereby added for Fiscal Year 2021-22.

Article 3 Effective Date

Each of the modifications set forth in Section 2 shall be effective on and after the date of this Amendment.

Article 4 Legal Effect

Except as expressly modified by this Amendment, all of the terms and conditions of the Agreement shall remain unchanged and in full force and effect.

IN WITNESS WHEREOF, the parties hereto have executed this Amendment on the day first mentioned above.

CITY

CONTRACTOR

Recommended by:

Alternative Family Services, Inc.

Grant Colfax, MD
Director of Health
Department of Public Health

Date

DocuSigned by:
Jay Berlin

1/24/2022 | 3:44 PM PS

Jay A. Berlin
Executive Director
1421 Guerneville Road, Suite 218
Santa Rosa, CA 94503

Date

Supplier ID: 0000052708

Approved as to Form:

David Chiu
City Attorney

By: _____

Henry Lifton
Deputy City Attorney

Date

Approved:

Sailaja Kurella
Director, Office of Contract Administration and
Purchaser

Date

**City and County of San Francisco
Office of Contract Administration
Purchasing Division
City Hall, Room 430
1 Dr. Carlton B. Goodlett Place
San Francisco, California 94102-4685**

**Agreement between the City and County of San Francisco and
Alternative Family Services, Inc.**

This Agreement is made this 1st day of July, 2018, in the City and County of San Francisco, State of California, by and between **Alternative Family Services, Inc.**, 1421 Guerneville Road, Suite 218 Santa Rosa, CA 94503.

Recitals

WHEREAS, the Department of Public Health ("Department") wishes to provide mental health services; and,

WHEREAS, services in this Agreement were procured competitively as required by San Francisco Administrative Code Chapter 21.1 through multiple Request for Proposals ("RFP"), RFP 33-2016 issued on 11/2/16 and RFP 1-2017 issued on 3/24/17 in which City selected Contractor as the highest qualified scorer pursuant to the RFP, and

WHEREAS, there is no Local Business Entity ("LBE") subcontracting participation requirement for this Agreement; and

WHEREAS, Contractor represents and warrants that it is qualified to perform the Services required by City as set forth under this Agreement; and

WHEREAS, approval for this Agreement was obtained when the Civil Service Commission approved Contract numbers 46987-16/17 on June 19, 2017; and

Now, THEREFORE, the parties agree as follows:

Article 1 Definitions

The following definitions apply to this Agreement:

1.1 "Agreement" means this contract document, including all attached appendices, and all applicable City Ordinances and Mandatory City Requirements which are specifically incorporated into this Agreement by reference as provided herein.

1.2 "City" or "the City" means the City and County of San Francisco, a municipal corporation, acting by and through both its Director of the Office of Contract Administration or the Director's designated agent, hereinafter referred to as "Purchasing" and Department of Public Health."

1.3 "CMD" means the Contract Monitoring Division of the City.

1.4 "Contractor" or "Consultant" means **Alternative Family Services, Inc.** 1421 Guerneville Road, Suite 218, Santa Rosa, CA 94503.

1.5

1.6 "Deliverables" means Contractor's work product resulting from the Services that are provided by Contractor to City during the course of Contractor's performance of the Agreement, including without limitation, the work product described in the "Scope of Services" attached as Appendix A.

1.7 "Effective Date" means the date upon which the City's Controller certifies the availability of funds for this Agreement as provided in Section 3.1.

1.8 "Mandatory City Requirements" means those City laws set forth in the San Francisco Municipal Code, including the duly authorized rules, regulations, and guidelines implementing such laws, that impose specific duties and obligations upon Contractor.

1.9 "Party" and "Parties" mean the City and Contractor either collectively or individually.

1.10 "Services" means the work performed by Contractor under this Agreement as specifically described in the "Scope of Services" attached as Appendix A, including all services, labor, supervision, materials, equipment, actions and other requirements to be performed and furnished by Contractor under this Agreement.

Article 2 Term of the Agreement

2.1 The term of this Agreement shall commence on the latter of: (i) July 1, 2018; or (ii) the Effective Date and expire on March 31, 2021, unless earlier terminated as otherwise provided herein.

Article 3 Financial Matters

3.1 **Certification of Funds; Budget and Fiscal Provisions; Termination in the Event of Non-Appropriation.** This Agreement is subject to the budget and fiscal provisions of the City's Charter. Charges will accrue only after prior written authorization certified by the Controller, and the amount of City's obligation hereunder shall not at any time exceed the amount certified for the purpose and period stated in such advance authorization. This Agreement will terminate without penalty, liability or expense of any kind to City at the end of any fiscal year if funds are not appropriated for the next succeeding fiscal year. If funds are appropriated for a portion of the fiscal year, this Agreement will terminate, without penalty, liability or expense of any kind at the end of the term for which funds are appropriated. City has no obligation to make appropriations for this Agreement in lieu of appropriations for new or other agreements. City budget decisions are subject to the discretion of the Mayor and the Board of Supervisors. Contractor's assumption of risk of possible non-appropriation is part of the consideration for this Agreement.

THIS SECTION CONTROLS AGAINST ANY AND ALL OTHER PROVISIONS OF THIS AGREEMENT.

3.2 **Guaranteed Maximum Costs.** The City's payment obligation to Contractor cannot at any time exceed the amount certified by City's Controller for the purpose and period stated in such certification. Absent an authorized Emergency per the City Charter or applicable Code, no City representative is authorized to offer or promise, nor is the City required to honor, any offered or promised payments to Contractor under this Agreement in excess of the certified maximum amount without the Controller having first certified the additional promised amount and the Parties having modified this Agreement as provided in Section 11.5, "Modification of this Agreement."

3.3 Compensation.

3.3.1 **Payment.** Contractor shall provide an invoice to the City on a monthly basis for Services completed in the immediate preceding month, unless a different schedule is set out in Appendix B, "Calculation of Charges." Compensation shall be made for Services identified in the invoice that the Director of Health, in his or her sole discretion, concludes has been satisfactorily performed. Payment shall be made within 30 calendar days of receipt of the invoice, unless the City notifies the Contractor that a dispute as to the invoice exists. In no event shall the amount of this Agreement exceed **Nine Million Six Hundred Eighty Thousand Two Hundred Eighty Eight Dollars (\$9,680,288)**. The breakdown of charges associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein. A portion of payment may be withheld until conclusion of the Agreement if agreed to by both parties as retainage, described in Appendix B. In no event shall City be liable for interest or late charges for any late payments.

3.3.2 **Payment Limited to Satisfactory Services.** Contractor is not entitled to any payments from City until Department of Public Health approves Services, including any furnished Deliverables, as satisfying all of the requirements of this Agreement. Payments to Contractor by City shall not excuse Contractor from its obligation to replace unsatisfactory Deliverables, including equipment, components, materials, or Services even if the unsatisfactory character of such Deliverables, equipment, components, materials, or Services may not have been apparent or detected at the time such payment was made. Deliverables, equipment, components, materials and Services that do not conform to the requirements of this Agreement may be rejected by City and in such case must be replaced by Contractor without delay at no cost to the City.

3.3.3 **Withhold Payments.** If Contractor fails to provide Services in accordance with Contractor's obligations under this Agreement, the City may withhold any and all payments due Contractor until such failure to perform is cured, and Contractor shall not stop work as a result of City's withholding of payments as provided herein.

3.3.4 **Invoice Format.** Invoices furnished by Contractor under this Agreement must be in a form acceptable to the Controller and City, and must include a unique invoice number. Payment shall be made by City specified in Section 3.3.6, or in such alternate manner as the Parties have mutually agreed upon in writing.

3.3.5 **Reserved. (LBE Payment and Utilization Tracking System)**

3.3.6 **Getting paid for goods and/or services from the City.**

(a) All City vendors receiving new contracts, contract renewals, or contract extensions must sign up to receive electronic payments through, the City's Automated Clearing House (ACH) payments service/provider. Electronic payments are processed every business day and are safe and secure. To sign up for electronic payments, visit www.sfgov.org/ach.

(b) The following information is required to sign up: (i) The enroller must be their company's authorized financial representative, (ii) the company's legal name, main telephone number and all physical and remittance addresses used by the company, (iii) the company's U.S. federal employer identification number (EIN) or Social Security number (if they are a sole proprietor), and (iv) the company's bank account information, including routing and account numbers.

3.3.7 **Federal and/or State Funded Contracts.**

(a) **Disallowance.** If Contractor requests or receives payment from City for Services, reimbursement for which is later disallowed by the State of California or United States Government, Contractor shall promptly refund the disallowed amount to City upon City's request. At its option, City may offset the amount disallowed from any payment due or to become due to Contractor under this Agreement or any other Agreement between Contractor and City.

(b) **Grant Terms.** The funding for this Agreement is provided in full or in part by a Federal or State Grant to the City. As part of the terms of receiving the funds, the City is required to incorporate some of the terms into this Agreement. The incorporated terms may be found in Appendix J. To the extent that any Grant Term is inconsistent with any other provisions of this Agreement such that Contractor is unable to comply with both the Grant Term and the other provision(s), the Grant Term shall apply.

(c) Contractor shall insert each Grant Term into each lower tier subcontract. Contractor is responsible for compliance with the Grant Terms by any subcontractor, lower-tier subcontractor or service provider.

3.4 Audit and Inspection of Records. Contractor agrees to maintain and make available to the City, during regular business hours, accurate books and accounting records relating to its Services. Contractor will permit City to audit, examine and make excerpts and transcripts from such books and records, and to make audits of all invoices, materials, payrolls, records or personnel and other data related to all other matters covered by this Agreement, whether funded in whole or in part under this Agreement. Contractor shall maintain such data and records in an accessible location and condition for a period of not fewer than five years after final payment under this Agreement or until after final audit has been resolved, whichever is later. The State of California or any Federal agency having an interest in the subject matter of this Agreement shall have the same rights as conferred upon City by this Section. Contractor shall include the same audit and inspection rights and record retention requirements in all subcontracts.

3.4.1 Contractor shall annually have its books of accounts audited by a Certified Public Accountant and a copy of said audit report and the associated management letter(s) shall be transmitted to the Director of Public Health or his /her designee within one hundred eighty (180) calendar days following Contractor's fiscal year end date. If Contractor expends \$750,000 or more in Federal funding per year, from any and all Federal awards, said audit shall be conducted in accordance with 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. Said requirements can be found at the following website address: https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl.

If Contractor expends less than \$750,000 a year in Federal awards, Contractor is exempt from the single audit requirements for that year, but records must be available for review or audit by appropriate officials of the Federal Agency, pass-through entity and General Accounting Office. Contractor agrees to reimburse the City any cost adjustments necessitated by this audit report. Any audit report which addresses all or part of the period covered by this Agreement shall treat the service components identified in the detailed descriptions attached to Appendix A and referred to in the Program Budgets of Appendix B as discrete program entities of the Contractor.

3.4.2 The Director of Public Health or his / her designee may approve a waiver of the audit requirement in Section 3.4.1 above, if the contractual Services are of a consulting or personal services nature, these Services are paid for through fee for service terms which limit the City's risk with

such contracts, and it is determined that the work associated with the audit would produce undue burdens or costs and would provide minimal benefits. A written request for a waiver must be submitted to the DIRECTOR ninety (90) calendar days before the end of the Agreement term or Contractor's fiscal year, whichever comes first.

3.4.3 Any financial adjustments necessitated by this audit report shall be made by Contractor to the City. If Contractor is under contract to the City, the adjustment may be made in the next subsequent billing by Contractor to the City, or may be made by another written schedule determined solely by the City. In the event Contractor is not under contract to the City, written arrangements shall be made for audit adjustments.

3.5 **Submitting False Claims.** The full text of San Francisco Administrative Code Chapter 21, Section 21.35, including the enforcement and penalty provisions, is incorporated into this Agreement. Pursuant to San Francisco Administrative Code §21.35, any contractor or subcontractor who submits a false claim shall be liable to the City for the statutory penalties set forth in that section. A contractor or subcontractor will be deemed to have submitted a false claim to the City if the contractor or subcontractor: (a) knowingly presents or causes to be presented to an officer or employee of the City a false claim or request for payment or approval; (b) knowingly makes, uses, or causes to be made or used a false record or statement to get a false claim paid or approved by the City; (c) conspires to defraud the City by getting a false claim allowed or paid by the City; (d) knowingly makes, uses, or causes to be made or used a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property to the City; or (e) is a beneficiary of an inadvertent submission of a false claim to the City, subsequently discovers the falsity of the claim, and fails to disclose the false claim to the City within a reasonable time after discovery of the false claim.

3.6 **Reserved. (Payment of Prevailing Wages)**

Article 4 Services and Resources

4.1 **Services Contractor Agrees to Perform.** Contractor agrees to perform the Services provided for in Appendix A, "Scope of Services." Officers and employees of the City are not authorized to request, and the City is not required to reimburse the Contractor for, Services beyond the Scope of Services listed in Appendix A, unless Appendix A is modified as provided in Section 11.5, "Modification of this Agreement."

4.2 **Qualified Personnel.** Contractor shall utilize only competent personnel under the supervision of, and in the employment of, Contractor (or Contractor's authorized subcontractors) to perform the Services. Contractor will comply with City's reasonable requests regarding assignment and/or removal of personnel, but all personnel, including those assigned at City's request, must be supervised by Contractor. Contractor shall commit adequate resources to allow timely completion within the project schedule specified in this Agreement.

4.3 **Subcontracting.**

4.3.1 Contractor may subcontract portions of the Services only upon prior written approval of City. Contractor is responsible for its subcontractors throughout the course of the work required to perform the Services. All Subcontracts must incorporate the terms of Article 10 "Additional Requirements Incorporated by Reference" of this Agreement, unless inapplicable. Neither Party shall, on the basis of this Agreement, contract on behalf of, or in the name of, the other Party. Any agreement made in violation of this provision shall be null and void.

4.3.2 City's execution of this Agreement constitutes its approval of the subcontractor listed in Appendix B-DPH 4: Operating Expense Detail.

4.4 **Independent Contractor; Payment of Employment Taxes and Other Expenses.**

4.4.1 **Independent Contractor.** For the purposes of this Article 4, "Contractor" shall be deemed to include not only Contractor, but also any agent or employee of Contractor. Contractor acknowledges and agrees that at all times, Contractor or any agent or employee of Contractor shall be deemed at all times to be an independent contractor and is wholly responsible for the manner in which it performs the services and work requested by City under this Agreement. Contractor, its agents, and employees will not represent or hold themselves out to be employees of the City at any time. Contractor or any agent or employee of Contractor shall not have employee status with City, nor be entitled to participate in any plans, arrangements, or distributions by City pertaining to or in connection with any retirement, health or other benefits that City may offer its employees. Contractor or any agent or employee of Contractor is liable for the acts and omissions of itself, its employees and its agents. Contractor shall be responsible for all obligations and payments, whether imposed by federal, state or local law, including, but not limited to, FICA, income tax withholdings, unemployment compensation, insurance, and other similar responsibilities related to Contractor's performing services and work, or any agent or employee of Contractor providing same. Nothing in this Agreement shall be construed as creating an employment or agency relationship between City and Contractor or any agent or employee of Contractor. Any terms in this Agreement referring to direction from City shall be construed as providing for direction as to policy and the result of Contractor's work only, and not as to the means by which such a result is obtained. City does not retain the right to control the means or the method by which Contractor performs work under this Agreement. Contractor agrees to maintain and make available to City, upon request and during regular business hours, accurate books and accounting records demonstrating Contractor's compliance with this section. Should City determine that Contractor, or any agent or employee of Contractor, is not performing in accordance with the requirements of this Agreement, City shall provide Contractor with written notice of such failure. Within five (5) business days of Contractor's receipt of such notice, and in accordance with Contractor policy and procedure, Contractor shall remedy the deficiency. Notwithstanding, if City believes that an action of Contractor, or any agent or employee of Contractor, warrants immediate remedial action by Contractor, City shall contact Contractor and provide Contractor in writing with the reason for requesting such immediate action.

4.4.2 **Payment of Employment Taxes and Other Expenses.** Should City, in its discretion, or a relevant taxing authority such as the Internal Revenue Service or the State Employment Development Division, or both, determine that Contractor is an employee for purposes of collection of any employment taxes, the amounts payable under this Agreement shall be reduced by amounts equal to both the employee and employer portions of the tax due (and offsetting any credits for amounts already paid by Contractor which can be applied against this liability). City shall then forward those amounts to the relevant taxing authority. Should a relevant taxing authority determine a liability for past services performed by Contractor for City, upon notification of such fact by City, Contractor shall promptly remit such amount due or arrange with City to have the amount due withheld from future payments to Contractor under this Agreement (again, offsetting any amounts already paid by Contractor which can be applied as a credit against such liability). A determination of employment status pursuant to the preceding two paragraphs shall be solely for the purposes of the particular tax in question, and for all other purposes of this Agreement, Contractor shall not be considered an employee of City. Notwithstanding the foregoing, Contractor agrees to indemnify and save harmless City and its officers, agents and employees

from, and, if requested, shall defend them against any and all claims, losses, costs, damages, and expenses, including attorneys' fees, arising from this section.

4.5 **Assignment.** The Services to be performed by Contractor are personal in character and neither this Agreement nor any duties or obligations hereunder may be assigned or delegated by Contractor unless first approved by City by written instrument executed and approved in the same manner as this Agreement. Any purported assignment made in violation of this provision shall be null and void.

4.6 **Warranty.** Contractor warrants to City that the Services will be performed with the degree of skill and care that is required by current, good and sound professional procedures and practices, and in conformance with generally accepted professional standards prevailing at the time the Services are performed so as to ensure that all Services performed are correct and appropriate for the purposes contemplated in this Agreement.

4.7 **Reserved. Liquidated Damages.**

Article 5 Insurance and Indemnity

5.1 **Insurance.**

5.1.1 **Required Coverages.** Without in any way limiting Contractor's liability pursuant to the "Indemnification" section of this Agreement, Contractor must maintain in force, during the full term of the Agreement, insurance in the following amounts and coverages:

(a) Workers' Compensation, in statutory amounts, with Employers' Liability Limits not less than \$1,000,000 each accident, injury, or illness; and

(b) Commercial General Liability Insurance with limits not less than \$1,000,000 each occurrence for Bodily Injury and Property Damage, including Contractual Liability, Personal Injury, Products and Completed Operations; policy must include Abuse and Molestation coverage.

(c) Commercial Automobile Liability Insurance with limits not less than \$1,000,000 each occurrence, "Combined Single Limit" for Bodily Injury and Property Damage, including Owned, Non-Owned and Hired auto coverage, as applicable.

(d) Professional liability insurance, applicable to Contractor's profession, with limits not less than \$1,000,000 each claim with respect to negligent acts, errors or omissions in connection with the Services.

5.1.2 Commercial General Liability and Commercial Automobile Liability Insurance policies must be endorsed to provide:

(a) Name as Additional Insured the City and County of San Francisco, its Officers, Agents, and Employees.

(b) That such policies are primary insurance to any other insurance available to the Additional Insureds, with respect to any claims arising out of this Agreement, and that insurance applies separately to each insured against whom claim is made or suit is brought.

5.1.3 All policies shall be endorsed to provide thirty (30) days' advance written notice to the City of cancellation for any reason, intended non-renewal, or reduction in coverages. Notices shall be sent to the City address set forth in Section 11.1, entitled "Notices to the Parties."

5.1.4 Should any of the required insurance be provided under a claims-made form, Contractor shall maintain such coverage continuously throughout the term of this Agreement and, without lapse, for a period of three years beyond the expiration of this Agreement, to the effect that, should

occurrences during the contract term give rise to claims made after expiration of the Agreement, such claims shall be covered by such claims-made policies.

5.1.5 Should any of the required insurance be provided under a form of coverage that includes a general annual aggregate limit or provides that claims investigation or legal defense costs be included in such general annual aggregate limit, such general annual aggregate limit shall be double the occurrence or claims limits specified above.

5.1.6 Should any required insurance lapse during the term of this Agreement, requests for payments originating after such lapse shall not be processed until the City receives satisfactory evidence of reinstated coverage as required by this Agreement, effective as of the lapse date. If insurance is not reinstated, the City may, at its sole option, terminate this Agreement effective on the date of such lapse of insurance.

5.1.7 Before commencing any Services, Contractor shall furnish to City certificates of insurance and additional insured policy endorsements with insurers with ratings comparable to A-, VIII or higher, that are authorized to do business in the State of California, and that are satisfactory to City, in form evidencing all coverages set forth above. Approval of the insurance by City shall not relieve or decrease Contractor's liability hereunder.

5.1.8 The Workers' Compensation policy(ies) shall be endorsed with a waiver of subrogation in favor of the City for all work performed by the Contractor, its employees, agents and subcontractors.

5.1.9 If Contractor will use any subcontractor(s) to provide Services, Contractor shall require the subcontractor(s) to provide all necessary insurance and to name the City and County of San Francisco, its officers, agents and employees and the Contractor as additional insureds.

5.2 **Indemnification.** Contractor shall indemnify and hold harmless City and its officers, agents and employees from, and, if requested, shall defend them from and against any and all claims, demands, losses, damages, costs, expenses, and liability (legal, contractual, or otherwise) arising from or in any way connected with any: (i) injury to or death of a person, including employees of City or Contractor; (ii) loss of or damage to property; (iii) violation of local, state, or federal common law, statute or regulation, including but not limited to privacy or personally identifiable information, health information, disability and labor laws or regulations; (iv) strict liability imposed by any law or regulation; or (v) losses arising from Contractor's execution of subcontracts not in accordance with the requirements of this Agreement applicable to subcontractors; so long as such injury, violation, loss, or strict liability (as set forth in subsections (i) – (v) above) arises directly or indirectly from Contractor's performance of this Agreement, including, but not limited to, Contractor's use of facilities or equipment provided by City or others, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law, and except where such loss, damage, injury, liability or claim is the result of the active negligence or willful misconduct of City and is not contributed to by any act of, or by any omission to perform some duty imposed by law or agreement on Contractor, its subcontractors, or either's agent or employee. Contractor shall also indemnify, defend and hold City harmless from all suits or claims or administrative proceedings for breaches of federal and/or state law regarding the privacy of health information, electronic records or related topics, arising directly or indirectly from Contractor's performance of this Agreement, except where such breach is the result of the active negligence or willful misconduct of City. The foregoing indemnity shall include, without limitation, reasonable fees of attorneys, consultants and experts and related costs and City's costs of investigating any claims against the City.

In addition to Contractor's obligation to indemnify City, Contractor specifically acknowledges and agrees that it has an immediate and independent obligation to defend City from any claim which actually or potentially falls within this indemnification provision, even if the allegations are or may be groundless, false or fraudulent, which obligation arises at the time such claim is tendered to Contractor by City and continues at all times thereafter.

Contractor shall indemnify and hold City harmless from all loss and liability, including attorneys' fees, court costs and all other litigation expenses for any infringement of the patent rights, copyright, trade secret or any other proprietary right or trademark, and all other intellectual property claims of any person or persons arising directly or indirectly from the receipt by City, or any of its officers or agents, of Contractor's Services.

Article 6 Liability of the Parties

6.1 Liability of City. CITY'S PAYMENT OBLIGATIONS UNDER THIS AGREEMENT SHALL BE LIMITED TO THE PAYMENT OF THE COMPENSATION PROVIDED FOR IN SECTION 3.3.1, "PAYMENT," OF THIS AGREEMENT. NOTWITHSTANDING ANY OTHER PROVISION OF THIS AGREEMENT, IN NO EVENT SHALL CITY BE LIABLE, REGARDLESS OF WHETHER ANY CLAIM IS BASED ON CONTRACT OR TORT, FOR ANY SPECIAL, CONSEQUENTIAL, INDIRECT OR INCIDENTAL DAMAGES, INCLUDING, BUT NOT LIMITED TO, LOST PROFITS, ARISING OUT OF OR IN CONNECTION WITH THIS AGREEMENT OR THE SERVICES PERFORMED IN CONNECTION WITH THIS AGREEMENT

6.2 Liability for Use of Equipment. City shall not be liable for any damage to persons or property as a result of the use, misuse or failure of any equipment used by Contractor, or any of its subcontractors, or by any of their employees, even though such equipment is furnished, rented or loaned by City.

6.3 Liability for Incidental and Consequential Damages. Contractor shall be responsible for incidental and consequential damages resulting in whole or in part from Contractor's acts or omissions.

Article 7 Payment of Taxes

7.1 Except for any applicable California sales and use taxes charged by Contractor to City, Contractor shall pay all taxes, including possessory interest taxes levied upon or as a result of this Agreement, or the Services delivered pursuant hereto. Contractor shall remit to the State of California any sales or use taxes paid by City to Contractor under this Agreement. Contractor agrees to promptly provide information requested by the City to verify Contractor's compliance with any State requirements for reporting sales and use tax paid by City under this Agreement.

7.2 Contractor acknowledges that this Agreement may create a "possessory interest" for property tax purposes. Generally, such a possessory interest is not created unless the Agreement entitles the Contractor to possession, occupancy, or use of City property for private gain. If such a possessory interest is created, then the following shall apply:

7.2.1 Contractor, on behalf of itself and any permitted successors and assigns, recognizes and understands that Contractor, and any permitted successors and assigns, may be subject to real property tax assessments on the possessory interest.

7.2.2 Contractor, on behalf of itself and any permitted successors and assigns, recognizes and understands that the creation, extension, renewal, or assignment of this Agreement may result in a “change in ownership” for purposes of real property taxes, and therefore may result in a revaluation of any possessory interest created by this Agreement. Contractor accordingly agrees on behalf of itself and its permitted successors and assigns to report on behalf of the City to the County Assessor the information required by Revenue and Taxation Code section 480.5, as amended from time to time, and any successor provision.

7.2.3 Contractor, on behalf of itself and any permitted successors and assigns, recognizes and understands that other events also may cause a change of ownership of the possessory interest and result in the revaluation of the possessory interest. (see, e.g., Rev. & Tax. Code section 64, as amended from time to time). Contractor accordingly agrees on behalf of itself and its permitted successors and assigns to report any change in ownership to the County Assessor, the State Board of Equalization or other public agency as required by law.

7.2.4 Contractor further agrees to provide such other information as may be requested by the City to enable the City to comply with any reporting requirements for possessory interests that are imposed by applicable law.

Article 8 Termination and Default

8.1 Termination for Convenience

8.1.1 City shall have the option, in its sole discretion, to terminate this Agreement, at any time during the term hereof, for convenience and without cause. City shall exercise this option by giving Contractor written notice of termination. The notice shall specify the date on which termination shall become effective.

8.1.2 Upon receipt of the notice of termination, Contractor shall commence and perform, with diligence, all actions necessary on the part of Contractor to effect the termination of this Agreement on the date specified by City and to minimize the liability of Contractor and City to third parties as a result of termination. All such actions shall be subject to the prior approval of City. Such actions shall include, without limitation:

(a) Halting the performance of all Services under this Agreement on the date(s) and in the manner specified by City.

(b) Terminating all existing orders and subcontracts, and not placing any further orders or subcontracts for materials, Services, equipment or other items.

(c) At City’s direction, assigning to City any or all of Contractor’s right, title, and interest under the orders and subcontracts terminated. Upon such assignment, City shall have the right, in its sole discretion, to settle or pay any or all claims arising out of the termination of such orders and subcontracts.

(d) Subject to City’s approval, settling all outstanding liabilities and all claims arising out of the termination of orders and subcontracts.

(e) Completing performance of any Services that City designates to be completed prior to the date of termination specified by City.

(f) Taking such action as may be necessary, or as the City may direct, for the protection and preservation of any property related to this Agreement which is in the possession of Contractor and in which City has or may acquire an interest.

8.1.3 Within 30 days after the specified termination date, Contractor shall submit to City an invoice, which shall set forth each of the following as a separate line item:

(a) The reasonable cost to Contractor, without profit, for all Services prior to the specified termination date, for which Services City has not already tendered payment. Reasonable costs may include a reasonable allowance for actual overhead, not to exceed a total of 10% of Contractor's direct costs for Services. Any overhead allowance shall be separately itemized. Contractor may also recover the reasonable cost of preparing the invoice.

(b) A reasonable allowance for profit on the cost of the Services described in the immediately preceding subsection (a), provided that Contractor can establish, to the satisfaction of City, that Contractor would have made a profit had all Services under this Agreement been completed, and provided further, that the profit allowed shall in no event exceed 5% of such cost.

(c) The reasonable cost to Contractor of handling material or equipment returned to the vendor, delivered to the City or otherwise disposed of as directed by the City.

(d) A deduction for the cost of materials to be retained by Contractor, amounts realized from the sale of materials and not otherwise recovered by or credited to City, and any other appropriate credits to City against the cost of the Services or other work.

8.1.4 In no event shall City be liable for costs incurred by Contractor or any of its subcontractors after the termination date specified by City, except for those costs specifically enumerated and described in Section 8.1.3. Such non-recoverable costs include, but are not limited to, anticipated profits on the Services under this Agreement, post-termination employee salaries, post-termination administrative expenses, post-termination overhead or unabsorbed overhead, attorneys' fees or other costs relating to the prosecution of a claim or lawsuit, prejudgment interest, or any other expense which is not reasonable or authorized under Section 8.1.3.

8.1.5 In arriving at the amount due to Contractor under this Section, City may deduct: (i) all payments previously made by City for Services covered by Contractor's final invoice; (ii) any claim which City may have against Contractor in connection with this Agreement; (iii) any invoiced costs or expenses excluded pursuant to the immediately preceding subsection 8.1.4; and (iv) in instances in which, in the opinion of the City, the cost of any Service performed under this Agreement is excessively high due to costs incurred to remedy or replace defective or rejected Services, the difference between the invoiced amount and City's estimate of the reasonable cost of performing the invoiced Services in compliance with the requirements of this Agreement.

8.1.6 City's payment obligation under this Section shall survive termination of this Agreement.

8.2 Termination for Default; Remedies.

8.2.1 Each of the following shall constitute an immediate event of default ("Event of Default") under this Agreement:

(a) Contractor fails or refuses to perform or observe any term, covenant or condition contained in any of the following Sections of this Agreement:

3.5	Submitting False Claims.	10.10	Alcohol and Drug-Free Workplace
4.5	Assignment	10.13	Working with Minors
Article 5	Insurance and Indemnity	11.10	Compliance with Laws
Article 7	Payment of Taxes	13.1	Nondisclosure of Private, Proprietary or Confidential Information
13.4	Protected Health Information	13.3	Business Associate Agreement

(b) Contractor fails or refuses to perform or observe any other term, covenant or condition contained in this Agreement, including any obligation imposed by ordinance or statute and incorporated by reference herein, and such default continues for a period of ten days after written notice thereof from City to Contractor.

(c) Contractor (i) is generally not paying its debts as they become due; (ii) files, or consents by answer or otherwise to the filing against it of a petition for relief or reorganization or arrangement or any other petition in bankruptcy or for liquidation or to take advantage of any bankruptcy, insolvency or other debtors' relief law of any jurisdiction; (iii) makes an assignment for the benefit of its creditors; (iv) consents to the appointment of a custodian, receiver, trustee or other officer with similar powers of Contractor or of any substantial part of Contractor's property; or (v) takes action for the purpose of any of the foregoing.

(d) A court or government authority enters an order (i) appointing a custodian, receiver, trustee or other officer with similar powers with respect to Contractor or with respect to any substantial part of Contractor's property, (ii) constituting an order for relief or approving a petition for relief or reorganization or arrangement or any other petition in bankruptcy or for liquidation or to take advantage of any bankruptcy, insolvency or other debtors' relief law of any jurisdiction or (iii) ordering the dissolution, winding-up or liquidation of Contractor.

8.2.2 On and after any Event of Default, City shall have the right to exercise its legal and equitable remedies, including, without limitation, the right to terminate this Agreement or to seek specific performance of all or any part of this Agreement. In addition, where applicable, City shall have the right (but no obligation) to cure (or cause to be cured) on behalf of Contractor any Event of Default; Contractor shall pay to City on demand all costs and expenses incurred by City in effecting such cure, with interest thereon from the date of incurrence at the maximum rate then permitted by law. City shall have the right to offset from any amounts due to Contractor under this Agreement or any other agreement between City and Contractor: (i) all damages, losses, costs or expenses incurred by City as a result of an Event of Default; and (ii) any liquidated damages levied upon Contractor pursuant to the terms of this Agreement; and (iii), any damages imposed by any ordinance or statute that is incorporated into this Agreement by reference, or into any other agreement with the City.

8.2.3 All remedies provided for in this Agreement may be exercised individually or in combination with any other remedy available hereunder or under applicable laws, rules and regulations. The exercise of any remedy shall not preclude or in any way be deemed to waive any other remedy. Nothing in this Agreement shall constitute a waiver or limitation of any rights that City may have under applicable law.

8.2.4 Any notice of default must be sent by registered mail to the address set forth in Article 11.

8.3 Non-Waiver of Rights. The omission by either party at any time to enforce any default or right reserved to it, or to require performance of any of the terms, covenants, or provisions hereof by the other party at the time designated, shall not be a waiver of any such default or right to which the party is entitled, nor shall it in any way affect the right of the party to enforce such provisions thereafter.

8.4 Rights and Duties upon Termination or Expiration.

8.4.1 This Section and the following Sections of this Agreement listed below, shall survive termination or expiration of this Agreement:

3.3.2	Payment Limited to Satisfactory Services	9.1	Ownership of Results
3.3.7(a)	Grant Funded Contracts - Disallowance	9.2	Works for Hire
3.4	Audit and Inspection of Records	11.6	Dispute Resolution Procedure
3.5	Submitting False Claims	11.7	Agreement Made in California; Venue
Article 5	Insurance and Indemnity	11.8	Construction
6.1	Liability of City	11.9	Entire Agreement
6.3	Liability for Incidental and Consequential Damages	11.10	Compliance with Laws
Article 7	Payment of Taxes	11.11	Severability
8.1.6	Payment Obligation	13.1	Nondisclosure of Private, Proprietary or Confidential Information
13.4	Protected Health Information	13.3	Business Associate Agreement

8.4.2 Subject to the survival of the Sections identified in Section 8.4.1, above, if this Agreement is terminated prior to expiration of the term specified in Article 2, this Agreement shall be of no further force or effect. Contractor shall transfer title to City, and deliver in the manner, at the times, and to the extent, if any, directed by City, any work in progress, completed work, supplies, equipment, and other materials produced as a part of, or acquired in connection with the performance of this Agreement, and any completed or partially completed work which, if this Agreement had been completed, would have been required to be furnished to City.

Article 9 Rights In Deliverables

9.1 Ownership of Results. Any interest of Contractor or its subcontractors, in the Deliverables, including any drawings, plans, specifications, blueprints, studies, reports, memoranda, computation sheets, computer files and media or other documents prepared by Contractor or its subcontractors for the purposes of this agreement, shall become the property of and will be transmitted to City. However, unless expressly prohibited elsewhere in this Agreement, Contractor may retain and use copies for reference and as documentation of its experience and capabilities.

9.2 Works for Hire. If, in connection with Services, Contractor or its subcontractors creates Deliverables including, without limitation, artwork, copy, posters, billboards, photographs, videotapes, audiotapes, systems designs, software, reports, diagrams, surveys, blueprints, source codes, or any other original works of authorship, whether in digital or any other format, such works of authorship shall be works for hire as defined under Title 17 of the United States Code, and all copyrights in such works shall be the property of the City. If any Deliverables created by Contractor or its subcontractor(s)

under this Agreement are ever determined not to be works for hire under U.S. law, Contractor hereby assigns all Contractor's copyrights to such Deliverables to the City, agrees to provide any material and execute any documents necessary to effectuate such assignment, and agrees to include a clause in every subcontract imposing the same duties upon subcontractor(s). With City's prior written approval, Contractor and its subcontractor(s) may retain and use copies of such works for reference and as documentation of their respective experience and capabilities.

Article 10 Additional Requirements Incorporated by Reference

10.1 Laws Incorporated by Reference. The full text of the laws listed in this Article 10, including enforcement and penalty provisions, are incorporated by reference into this Agreement. The full text of the San Francisco Municipal Code provisions incorporated by reference in this Article and elsewhere in the Agreement ("Mandatory City Requirements") are available at http://www.amlegal.com/codes/client/san-francisco_ca/

10.2 Conflict of Interest. By executing this Agreement, Contractor certifies that it does not know of any fact which constitutes a violation of Section 15.103 of the City's Charter; Article III, Chapter 2 of City's Campaign and Governmental Conduct Code; Title 9, Chapter 7 of the California Government Code (Section 87100 *et seq.*), or Title 1, Division 4, Chapter 1, Article 4 of the California Government Code (Section 1090 *et seq.*), and further agrees promptly to notify the City if it becomes aware of any such fact during the term of this Agreement.

10.3 Prohibition on Use of Public Funds for Political Activity. In performing the Services, Contractor shall comply with San Francisco Administrative Code Chapter 12G, which prohibits funds appropriated by the City for this Agreement from being expended to participate in, support, or attempt to influence any political campaign for a candidate or for a ballot measure. Contractor is subject to the enforcement and penalty provisions in Chapter 12G.

10.4 Reserved.

10.5 Nondiscrimination Requirements

10.5.1 Non Discrimination in Contracts. Contractor shall comply with the provisions of Chapters 12B and 12C of the San Francisco Administrative Code. Contractor shall incorporate by reference in all subcontracts the provisions of Sections 12B.2(a), 12B.2(c)-(k), and 12C.3 of the San Francisco Administrative Code and shall require all subcontractors to comply with such provisions. Contractor is subject to the enforcement and penalty provisions in Chapters 12B and 12C.

10.5.2 Nondiscrimination in the Provision of Employee Benefits. San Francisco Administrative Code 12B.2. Contractor does not as of the date of this Agreement, and will not during the term of this Agreement, in any of its operations in San Francisco, on real property owned by San Francisco, or where work is being performed for the City elsewhere in the United States, discriminate in the provision of employee benefits between employees with domestic partners and employees with spouses and/or between the domestic partners and spouses of such employees, subject to the conditions set forth in San Francisco Administrative Code Section 12B.2.

10.6 Local Business Enterprise and Non-Discrimination in Contracting Ordinance. Contractor shall comply with all applicable provisions of Chapter 14B ("LBE Ordinance"). Contractor is subject to the enforcement and penalty provisions in Chapter 14B.

10.7 **Minimum Compensation Ordinance.** Contractor shall pay covered employees no less than the minimum compensation required by San Francisco Administrative Code Chapter 12P. Contractor is subject to the enforcement and penalty provisions in Chapter 12P. By signing and executing this Agreement, Contractor certifies that it is in compliance with Chapter 12P.

10.8 **Health Care Accountability Ordinance.** Contractor shall comply with San Francisco Administrative Code Chapter 12Q. Contractor shall choose and perform one of the Health Care Accountability options set forth in San Francisco Administrative Code Chapter 12Q.3. Contractor is subject to the enforcement and penalty provisions in Chapter 12Q.

10.9 **First Source Hiring Program.** Contractor must comply with all of the provisions of the First Source Hiring Program, Chapter 83 of the San Francisco Administrative Code, that apply to this Agreement, and Contractor is subject to the enforcement and penalty provisions in Chapter 83.

10.10 **Alcohol and Drug-Free Workplace.** City reserves the right to deny access to, or require Contractor to remove from, City facilities personnel of any Contractor or subcontractor who City has reasonable grounds to believe has engaged in alcohol abuse or illegal drug activity which in any way impairs City's ability to maintain safe work facilities or to protect the health and well-being of City employees and the general public. City shall have the right of final approval for the entry or re-entry of any such person previously denied access to, or removed from, City facilities. Illegal drug activity means possessing, furnishing, selling, offering, purchasing, using or being under the influence of illegal drugs or other controlled substances for which the individual lacks a valid prescription. Alcohol abuse means possessing, furnishing, selling, offering, or using alcoholic beverages, or being under the influence of alcohol.

Contractor agrees in the performance of this Agreement to maintain a drug-free workplace by notifying employees that unlawful drug use is prohibited and specifying what actions will be taken against employees for violations; establishing an on-going drug-free awareness program that includes employee notification and, as appropriate, rehabilitation. Contractor can comply with this requirement by implementing a drug-free workplace program that complies with the Federal Drug-Free Workplace Act of 1988 (41 U.S.C. § 701) [or California Drug-Free Workplace Act of 1990 Cal. Gov. Code, § 8350 et seq., if state funds involved].

10.11 **Limitations on Contributions.** By executing this Agreement, Contractor acknowledges that it is familiar with section 1.126 of the City's Campaign and Governmental Conduct Code, which prohibits any person who contracts with the City for the rendition of personal services, for the furnishing of any material, supplies or equipment, for the sale or lease of any land or building, or for a grant, loan or loan guarantee, from making any campaign contribution to (1) an individual holding a City elective office if the contract must be approved by the individual, a board on which that individual serves, or the board of a state agency on which an appointee of that individual serves, (2) a candidate for the office held by such individual, or (3) a committee controlled by such individual, at any time from the commencement of negotiations for the contract until the later of either the termination of negotiations for such contract or six months after the date the contract is approved. The prohibition on contributions applies to each prospective party to the contract; each member of Contractor's board of directors; Contractor's chairperson, chief executive officer, chief financial officer and chief operating officer; any person with an ownership interest of more than 20 percent in Contractor; any subcontractor listed in the bid or contract; and any committee that is sponsored or controlled by Contractor. Contractor must inform

each such person of the limitation on contributions imposed by Section 1.126 and provide the names of the persons required to be informed to City.

10.12 Reserved. (Slavery Era Disclosure)

10.13 Working with Minors. In accordance with California Public Resources Code Section 5164, if Contractor, or any subcontractor, is providing services at a City park, playground, recreational center or beach, Contractor shall not hire, and shall prevent its subcontractors from hiring, any person for employment or a volunteer position in a position having supervisory or disciplinary authority over a minor if that person has been convicted of any offense listed in Public Resources Code Section 5164. In addition, if Contractor, or any subcontractor, is providing services to the City involving the supervision or discipline of minors or where Contractor, or any subcontractor, will be working with minors in an unaccompanied setting on more than an incidental or occasional basis, Contractor and any subcontractor shall comply with any and all applicable requirements under federal or state law mandating criminal history screening for such positions and/or prohibiting employment of certain persons including but not limited to California Penal Code Section 290.95. In the event of a conflict between this section and Section 10.14, "Consideration of Criminal History in Hiring and Employment Decisions," of this Agreement, this section shall control.

10.14 Consideration of Criminal History in Hiring and Employment Decisions

10.14.1 Contractor agrees to comply fully with and be bound by all of the provisions of Chapter 12T, "City Contractor/Subcontractor Consideration of Criminal History in Hiring and Employment Decisions," of the San Francisco Administrative Code ("Chapter 12T"), including the remedies provided, and implementing regulations, as may be amended from time to time. The provisions of Chapter 12T are incorporated by reference and made a part of this Agreement as though fully set forth herein. The text of the Chapter 12T is available on the web at <http://sfgov.org/olse/fco>. Contractor is required to comply with all of the applicable provisions of 12T, irrespective of the listing of obligations in this Section. Capitalized terms used in this Section and not defined in this Agreement shall have the meanings assigned to such terms in Chapter 12T.

10.14.2 The requirements of Chapter 12T shall only apply to a Contractor's or Subcontractor's operations to the extent those operations are in furtherance of the performance of this Agreement, shall apply only to applicants and employees who would be or are performing work in furtherance of this Agreement, and shall apply when the physical location of the employment or prospective employment of an individual is wholly or substantially within the City of San Francisco. Chapter 12T shall not apply when the application in a particular context would conflict with federal or state law or with a requirement of a government agency implementing federal or state law.

10.15 Public Access to Nonprofit Records and Meetings. If Contractor receives a cumulative total per year of at least \$250,000 in City funds or City-administered funds and is a non-profit organization as defined in Chapter 12L of the San Francisco Administrative Code, Contractor must comply with the City's Public Access to Nonprofit Records and Meetings requirements, as set forth in Chapter 12L of the San Francisco Administrative Code, including the remedies provided therein.

10.16 Food Service Waste Reduction Requirements. Contractor shall comply with the Food Service Waste Reduction Ordinance, as set forth in San Francisco Environment Code Chapter 16, including but not limited to the remedies for noncompliance provided therein.

10.17 **Sugar-Sweetened Beverage Prohibition.** Contractor agrees that it will not sell, provide, or otherwise distribute Sugar-Sweetened Beverages, as defined by San Francisco Administrative Code Chapter 101, as part of its performance of this Agreement.

10.18 **Tropical Hardwood and Virgin Redwood Ban.** Pursuant to San Francisco Environment Code Section 804(b), the City urges Contractor not to import, purchase, obtain, or use for any purpose, any tropical hardwood, tropical hardwood wood product, virgin redwood or virgin redwood wood product.

10.19 **Reserved. (Preservative Treated Wood Products)**

Article 11 General Provisions

11.1 **Notices to the Parties.** Unless otherwise indicated in this Agreement, all written communications sent by the Parties may be by U.S. mail or e-mail, and shall be addressed as follows:

To CITY:	Office of Contract Management and Compliance Department of Public Health 1380 Howard Street, Room 419 San Francisco, California 94103	e-mail: Ada.ling@sfdph.org
And:	Walerie Wiggins, Program Manager Contract Development and Technical Assistance 1380 Howard Street, 5 th Floor San Francisco, CA 94103	e-mail: Walerie.wiggins@sfdph.org
To CONTRACTOR:	Jay A. Berlin ED Alternative Family Services, Inc.. 1421 Guerneville Road, Suite 218 Santa Rosa, CA 95403	e-mail: jberlin@afs4kids.org

Any notice of default must be sent by registered mail. Either Party may change the address to which notice is to be sent by giving written notice thereof to the other Party. If email notification is used, the sender must specify a receipt notice.

11.2 **Compliance with Americans with Disabilities Act.** Contractor shall provide the Services in a manner that complies with the Americans with Disabilities Act (ADA), including but not limited to Title II's program access requirements, and all other applicable federal, state and local disability rights legislation.

11.3 **Reserved.**

11.4 **Sunshine Ordinance.** Contractor acknowledges that this Agreement and all records related to its formation, Contractor's performance of Services, and City's payment are subject to the California Public Records Act, (California Government Code §6250 et. seq.), and the San Francisco Sunshine Ordinance, (San Francisco Administrative Code Chapter 67). Such records are subject to public inspection and copying unless exempt from disclosure under federal, state or local law.

11.5 **Modification of this Agreement.** This Agreement may not be modified, nor may compliance with any of its terms be waived, except as noted in Section 11.1, "Notices to Parties,"

regarding change in personnel or place, and except by written instrument executed and approved in the same manner as this Agreement. Contractor shall cooperate with Department to submit to the Director of CMD any amendment, modification, supplement or change order that would result in a cumulative increase of the original amount of this Agreement by more than 20% (CMD Contract Modification Form).

11.6 **Dispute Resolution Procedure.**

11.6.1 **Negotiation; Alternative Dispute Resolution.** The Parties will attempt in good faith to resolve any dispute or controversy arising out of or relating to the performance of services under this Agreement. If the Parties are unable to resolve the dispute, then, pursuant to San Francisco Administrative Code Section 21.36, Contractor may submit to the Contracting Officer a written request for administrative review and documentation of the Contractor's claim(s). Upon such request, the Contracting Officer shall promptly issue an administrative decision in writing, stating the reasons for the action taken and informing the Contractor of its right to judicial review. If agreed by both Parties in writing, disputes may be resolved by a mutually agreed-upon alternative dispute resolution process. If the parties do not mutually agree to an alternative dispute resolution process or such efforts do not resolve the dispute, then either Party may pursue any remedy available under California law. The status of any dispute or controversy notwithstanding, Contractor shall proceed diligently with the performance of its obligations under this Agreement in accordance with the Agreement and the written directions of the City. Neither Party will be entitled to legal fees or costs for matters resolved under this section.

11.6.2 **Government Code Claim Requirement.** No suit for money or damages may be brought against the City until a written claim therefor has been presented to and rejected by the City in conformity with the provisions of San Francisco Administrative Code Chapter 10 and California Government Code Section 900, et seq. Nothing set forth in this Agreement shall operate to toll, waive or excuse Contractor's compliance with the California Government Code Claim requirements set forth in San Francisco Administrative Code Chapter 10 and California Government Code Section 900, et seq.

11.6.3 **Health and Human Service Contract Dispute Resolution Procedure.** The Parties shall resolve disputes that have not been resolved administratively by other departmental remedies in accordance with the Dispute Resolution Procedure set forth in Appendix G incorporated herein by this reference.

11.7 **Agreement Made in California; Venue.** The formation, interpretation and performance of this Agreement shall be governed by the laws of the State of California. Venue for all litigation relative to the formation, interpretation and performance of this Agreement shall be in San Francisco.

11.8 **Construction.** All paragraph captions are for reference only and shall not be considered in construing this Agreement.

11.9 **Entire Agreement.** This contract sets forth the entire Agreement between the parties, and supersedes all other oral or written provisions. This Agreement may be modified only as provided in Section 11.5, "Modification of this Agreement."

11.10 **Compliance with Laws.** Contractor shall keep itself fully informed of the City's Charter, codes, ordinances and duly adopted rules and regulations of the City and of all state, and federal laws in any manner affecting the performance of this Agreement, and must at all times comply with such local codes, ordinances, and regulations and all applicable laws as they may be amended from time to time.

11.11 **Severability.** Should the application of any provision of this Agreement to any particular facts or circumstances be found by a court of competent jurisdiction to be invalid or unenforceable, then (a) the validity of other provisions of this Agreement shall not be affected or impaired thereby, and (b) such provision shall be enforced to the maximum extent possible so as to effect the intent of the parties and shall be reformed without further action by the parties to the extent necessary to make such provision valid and enforceable.

11.12 **Cooperative Drafting.** This Agreement has been drafted through a cooperative effort of City and Contractor, and both Parties have had an opportunity to have the Agreement reviewed and revised by legal counsel. No Party shall be considered the drafter of this Agreement, and no presumption or rule that an ambiguity shall be construed against the Party drafting the clause shall apply to the interpretation or enforcement of this Agreement.

11.13 **Order of Precedence.** Contractor agrees to perform the services described below in accordance with the terms and conditions of this Agreement, implementing task orders, any RFPs, and any Contractor's proposals. RFPs and Contractor's proposals are incorporated by reference as though fully set forth herein. Should there be a conflict of terms or conditions, this Agreement and any implementing task orders shall control over the RFP and the Contractor's proposal.

Article 12 Department Specific Terms

12.1 Third Party Beneficiaries.

No third parties are intended by the parties hereto to be third party beneficiaries under this Agreement, and no action to enforce the terms of this Agreement may be brought against either party by any person who is not a party hereto.

12.2 **Exclusion Lists and Employee Verification.** Upon hire and monthly thereafter, Contractor will check the exclusion lists published by the Office of the Inspector General (OIG), General Services Administration (GSA), and the California Department of Health Care Services (DHCS) to ensure that any employee, temporary employee, volunteer, consultant, or governing body member responsible for oversight, administering or delivering state or federally-funded services who is on any of these lists is excluded from (may not work in) your program or agency. Proof of checking these lists will be retained for seven years.

12.3 Certification Regarding Lobbying.

CONTRACTOR certifies to the best of its knowledge and belief that:

A. No federally appropriated funds have been paid or will be paid, by or on behalf of CONTRACTOR to any persons for influencing or attempting to influence an officer or an employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the entering into of any federal cooperative agreement, or the extension, continuation, renewal, amendment, or modification of a federal contract, grant, loan or cooperative agreement.

B. If any funds other than federally appropriated funds have been paid or will be paid to any persons for influencing or attempting to influence an officer or employee of an agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this federal contract, grant, loan or cooperative agreement, CONTRACTOR shall complete and submit Standard Form -111, "Disclosure Form to Report Lobbying," in accordance with the form's instructions.

C. CONTRACTOR shall require the language of this certification be included in the award documents for all subawards at all tiers, (including subcontracts, subgrants, and contracts under grants, loans and cooperation agreements) and that all subrecipients shall certify and disclose accordingly.

D. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

12.4 Materials Review.

CONTRACTOR agrees that all materials, including without limitation print, audio, video, and electronic materials, developed, produced, or distributed by personnel or with funding under this Agreement shall be subject to review and approval by the Contract Administrator prior to such production, development or distribution. CONTRACTOR agrees to provide such materials sufficiently in advance of any deadlines to allow for adequate review. CITY agrees to conduct the review in a manner which does not impose unreasonable delays on CONTRACTOR'S work, which may include review by members of target communities.

12.5 Emergency Response.

CONTRACTOR will develop and maintain an Agency Disaster and Emergency Response Plan containing Site Specific Emergency Response Plan(s) for each of its service sites. The agency-wide plan should address disaster coordination between and among service sites. CONTRACTOR will update the Agency/site(s) plan as needed and CONTRACTOR will train all employees regarding the provisions of the plan for their Agency/site(s). CONTRACTOR will attest on its annual Community Programs' Contractor Declaration of Compliance whether it has developed and maintained an Agency Disaster and Emergency Response Plan, including a site specific emergency response plan for each of its service site. CONTRACTOR is advised that Community Programs Contract Compliance Section staff will review these plans during a compliance site review. Information should be kept in an Agency/Program Administrative Binder, along with other contractual documentation requirements for easy accessibility and inspection.

In a declared emergency, CONTRACTOR'S employees shall become emergency workers and participate in the emergency response of Community Programs, Department of Public Health. Contractors are required to identify and keep Community Programs staff informed as to which two staff members will serve as CONTRACTOR'S prime contacts with Community Programs in the event of a declared emergency.

Article 13 Data and Security

13.1 Nondisclosure of Private, Proprietary or Confidential Information.

13.1.1 If this Agreement requires City to disclose "Private Information" to Contractor within the meaning of San Francisco Administrative Code Chapter 12M, Contractor and subcontractor shall use such information only in accordance with the restrictions stated in Chapter 12M and in this Agreement and only as necessary in performing the Services. Contractor is subject to the enforcement and penalty provisions in Chapter 12M.

13.1.2 In the performance of Services, Contractor may have access to City's proprietary or confidential information, the disclosure of which to third parties may damage City. If City discloses proprietary or confidential information to Contractor, such information must be held by Contractor in confidence and used only in performing the Agreement. Contractor shall exercise the same standard of

care to protect such information as a reasonably prudent contractor would use to protect its own proprietary or confidential information.

13.2 Reserved. (Payment Card Industry ("PCI") Requirements.)

13.3 Business Associate Agreement.

The parties acknowledge that CITY is a Covered Entity as defined in the Healthcare Insurance Portability and Accountability Act of 1996 ("HIPAA") and is required to comply with the HIPAA Privacy Rule governing the access, use, disclosure, transmission, and storage of protected health information (PHI) and the Security Rule under the Health Information Technology for Economic and Clinical Health Act, Public Law 111-005 ("the HITECH Act").

The parties acknowledge that CONTRACTOR will:

1. Do at least one or more of the following:
 - A. Create, receive, maintain, or transmit PHI for or on behalf of CITY/SFDPH (including storage of PHI, digital or hard copy, even if Contractor does not view the PHI or only does so on a random or infrequent basis); or
 - B. Receive PHI, or access to PHI, from CITY/SFDPH or another Business Associate of City, as part of providing a service to or for CITY/SFDPH, including legal, actuarial, accounting, consulting, data aggregation, management, administrative, accreditation, or financial; or
 - C. Transmit PHI data for CITY/SFDPH and require access on a regular basis to such PHI. (Such as health information exchanges (HIEs), e-prescribing gateways, or electronic health record vendors)

FOR PURPOSES OF THIS AGREEMENT, CONTRACTOR IS A BUSINESS ASSOCIATE OF CITY/SFDPH, AS DEFINED UNDER HIPAA. CONTRACTOR MUST COMPLY WITH AND COMPLETE THE FOLLOWING ATTACHED DOCUMENTS, INCORPORATED TO THIS AGREEMENT AS THOUGH FULLY SET FORTH HEREIN:

- a. **Appendix E SFDPH Business Associate Agreement (BAA) (04-12-2018)**
 1. SFDPH Attestation 1 PRIVACY (06-07-2017)
 2. SFDPH Attestation 2 DATA SECURITY (06-07-2017)

2. **NOT do any of the activities listed above in subsection 1;**

Contractor is not a Business Associate of CITY/SFDPH. Appendix E and attestations are not required for the purposes of this Agreement.

Appendix E and attestations are not required.

This option requires review and approval from the Office of Compliance and Privacy Affairs.

13.4 Protected Health Information. Contractor, all subcontractors, all agents and employees of Contractor and any subcontractor shall comply with all federal and state laws regarding the transmission, storage and protection of all private health information disclosed to Contractor by City in the performance of this Agreement. Contractor agrees that any failure of Contractor to comply with the requirements of federal and/or state and/or local privacy laws shall be a material breach of the Contract. In the event that City pays a regulatory fine, and/or is assessed civil penalties or damages through private

rights of action, based on an impermissible use or disclosure of protected health information given to Contractor or its subcontractors or agents by City, Contractor shall indemnify City for the amount of such fine or penalties or damages, including costs of notification. In such an event, in addition to any other remedies available to it under equity or law, the City may terminate the Contract.

Article 14 MacBride And Signature

14.1 **MacBride Principles -Northern Ireland.** The provisions of San Francisco Administrative Code §12F are incorporated herein by this reference and made part of this Agreement. By signing this Agreement, Contractor confirms that Contractor has read and understood that the City urges companies doing business in Northern Ireland to resolve employment inequities and to abide by the MacBride Principles, and urges San Francisco companies to do business with corporations that abide by the MacBride Principles.

rights of action, based on an impermissible use or disclosure of protected health information given to Contractor or its subcontractors or agents by City, Contractor shall indemnify City for the amount of such fine or penalties or damages, including costs of notification. In such an event, in addition to any other remedies available to it under equity or law, the City may terminate the Contract.

Article 14 MacBride And Signature

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IN WITNESS WHEREOF, the parties hereto have executed this Agreement on the day first mentioned above.

CITY

Recommended by:


Greg Wagner
Acting Director of Health
Department of Public Health

1/14/19
Date

CONTRACTOR

Alternative Family Services, Inc.

 12/15/18
Jay A. Berlin
Executive Director
1421 Guerneville Road, Suite 218
Santa Rosa, CA 94503

12/15/18
Date

Supplier ID: 0000052708

Approved as to Form:

Dennis J. Herrera
City Attorney

By:  1/7/19
Deputy City Attorney Date

Approved:

 2-6-2019
FOR Alaric Degrafinried Date
 Director of the Office of Contract Administration, and
Purchaser

Received By:
JAN 25 '19 PM 4:15
Purchasing Department

- A: Scope of Services
- B: Calculation of Charges
- C: Reserved (Insurance Waiver)
- D: Reserved
- E: SFDPH Business Associate Agreement (BAA) & Attestations
- F: Invoice
- G: Reserved
- H: Reserved (formerly "Privacy Policy Compliance Standards")
- I: The Declaration of Compliance

Appendix A
Scope of Services – DPH Behavioral Health Services

1. Terms

- | | |
|---|---|
| A. Contract Administrator | N. Patients' Rights |
| B. Reports | O. Under-Utilization Reports |
| C. Evaluation | P. Quality Improvement |
| D. Possession of Licenses/Permits | Q. Working Trial Balance with Year-End Cost Report |
| E. Adequate Resources | R. Harm Reduction |
| F. Admission Policy | S. Compliance with Behavioral Health Services Policies and Procedures |
| G. San Francisco Residents Only | T. Fire Clearance |
| H. Grievance Procedure | U. Clinics to Remain Open |
| I. Infection Control, Health and Safety | V. Compliance with Grant Award Notices |
| J. Aerosol Transmissible Disease Program, Health and Safety | |
| K. Acknowledgement of Funding | |
| L. Client Fees and Third Party Revenue | |
| M. DPH Behavioral Health (BHS) Electronic Health Records (EHR) System | |

- 2. Description of Services**
3. Services Provided by Attorneys

1. Terms

A. Contract Administrator:

In performing the Services hereunder, Contractor shall report to **Valerie Wiggins**, Contract Administrator for the City, or his / her designee.

B. Reports:

Contractor shall submit written reports as requested by the City. The format for the content of such reports shall be determined by the City. The timely submission of all reports is a necessary and material term and condition of this Agreement. All reports, including any copies, shall be submitted on recycled paper and printed on double-sided pages to the maximum extent possible.

C. Evaluation:

Contractor shall participate as requested with the City, State and/or Federal government in evaluative studies designed to show the effectiveness of Contractor's Services. Contractor agrees to meet the requirements of and participate in the evaluation program and management information systems of the City. The City agrees that any final written reports generated through the evaluation program shall be made available to Contractor within thirty (30) working days. Contractor may submit a written response within thirty working days of receipt of any evaluation report and such response will become part of the official report.

D. Possession of Licenses/Permits:

Contractor warrants the possession of all licenses and/or permits required by the laws and regulations of the United States, the State of California, and the City to provide the Services. Failure to maintain these licenses and permits shall constitute a material breach of this Agreement.

E. Adequate Resources:

Contractor agrees that it has secured or shall secure at its own expense all persons, employees and equipment required to perform the Services required under this Agreement, and that all such Services shall be performed by Contractor, or under Contractor's supervision, by persons authorized by law to perform such Services.

F. Admission Policy:

Admission policies for the Services shall be in writing and available to the public. Except to the extent that the Services are to be rendered to a specific population as described in the programs listed in Section 2 of Appendix A, such policies must include a provision that clients are accepted for care without discrimination on the basis of race, color, creed, religion, sex, age, national origin, ancestry, sexual orientation, gender identification, disability, or AIDS/HIV status.

G. San Francisco Residents Only:

Only San Francisco residents shall be treated under the terms of this Agreement. Exceptions must have the written approval of the Contract Administrator.

H. Grievance Procedure:

Contractor agrees to establish and maintain a written Client Grievance Procedure which shall include the following elements as well as others that may be appropriate to the Services: (1) the name or title of the person or persons authorized to make a determination regarding the grievance; (2) the opportunity for the aggrieved party to discuss the grievance with those who will be making the determination; and (3) the right of a client dissatisfied with the decision to ask for a review and recommendation from the community advisory board or planning council that has purview over the aggrieved service. Contractor shall provide a copy of this procedure, and any amendments thereto, to each client and to the Director of Public Health or his/her designated agent (hereinafter referred to as "DIRECTOR"). Those clients who do not receive direct Services will be provided a copy of this procedure upon request.

I. Infection Control, Health and Safety:

(1) Contractor must have a Bloodborne Pathogen (BBP) Exposure Control plan as defined in the California Code of Regulations, Title 8, Section 5193, Bloodborne Pathogens (<http://www.dir.ca.gov/title8/5193.html>), and demonstrate compliance with all requirements including, but not limited to, exposure determination, training, immunization, use of personal protective equipment and safe needle devices, maintenance of a sharps injury log, post-exposure medical evaluations, and recordkeeping.

(2) Contractor must demonstrate personnel policies/procedures for protection of staff and clients from other communicable diseases prevalent in the population served. Such policies and procedures shall include, but not be limited to, work practices, personal protective equipment, staff/client Tuberculosis (TB) surveillance, training, etc.

(3) Contractor must demonstrate personnel policies/procedures for Tuberculosis (TB) exposure control consistent with the Centers for Disease Control and Prevention (CDC) recommendations for health care facilities and based on the Francis J. Curry National Tuberculosis Center: Template for Clinic Settings, as appropriate.

(4) Contractor is responsible for site conditions, equipment, health and safety of their employees, and all other persons who work or visit the job site.

(5) Contractor shall assume liability for any and all work-related injuries/illnesses including infectious exposures such as BBP and TB and demonstrate appropriate policies and procedures for reporting such events and providing appropriate post-exposure medical management as required by State workers' compensation laws and regulations.

(6) Contractor shall comply with all applicable Cal-OSHA standards including maintenance of the OSHA 300 Log of Work-Related Injuries and Illnesses.

(7) Contractor assumes responsibility for procuring all medical equipment and supplies for use by their staff, including safe needle devices, and provides and documents all appropriate training.

(8) Contractor shall demonstrate compliance with all state and local regulations with regard to handling and disposing of medical waste.

J. Aerosol Transmissible Disease Program, Health and Safety:

(1) Contractor must have an Aerosol Transmissible Disease (ATD) Program as defined in the California Code of Regulations, Title 8, Section 5199, Aerosol Transmissible Diseases (<http://www.dir.ca.gov/Title8/5199.html>), and demonstrate compliance with all requirements including, but not limited to, exposure determination, screening procedures, source control measures, use of personal protective equipment, referral procedures, training, immunization, post-exposure medical evaluations/follow-up, and recordkeeping.

(2) Contractor shall assume liability for any and all work-related injuries/illnesses including infectious exposures such as Aerosol Transmissible Disease and demonstrate appropriate policies and procedures for reporting such events and providing appropriate post-exposure medical management as required by State workers' compensation laws and regulations.

(3) Contractor shall comply with all applicable Cal-OSHA standards including maintenance of the OSHA 300 Log of Work-Related Injuries and Illnesses.

(4) Contractor assumes responsibility for procuring all medical equipment and supplies for use by their staff, including Personnel Protective Equipment such as respirators, and provides and documents all appropriate training.

K. Acknowledgment of Funding:

Contractor agrees to acknowledge the San Francisco Department of Public Health in any printed material or public announcement describing the San Francisco Department of Public Health-funded Services. Such documents or announcements shall contain a credit substantially as follows: "This program/service/activity/research project was funded through the Department of Public Health, City and County of San Francisco."

L. Client Fees and Third Party Revenue:

(1) Fees required by Federal, state or City laws or regulations to be billed to the client, client's family, Medicare or insurance company, shall be determined in accordance with the client's ability to pay and in conformance with all applicable laws. Such fees shall approximate actual cost. No additional fees may be charged to the client or the client's family for the Services. Inability to pay shall not be the basis for denial of any Services provided under this Agreement.

(2) Contractor agrees that revenues or fees received by Contractor related to Services performed and materials developed or distributed with funding under this Agreement shall be used to increase the gross program funding such that a greater number of persons may receive Services. Accordingly, these revenues and fees shall not be deducted by Contractor from its billing to the City, but will be settled during the provider's settlement process.

M. DPH Behavioral Health Services (BHS) Electronic Health Records (EHR) System

Treatment Service Providers use the BHS Electronic Health Records System and follow data reporting procedures set forth by SFDPH Information Technology (IT), BHS Quality Management and BHS Program Administration.

N. Patients' Rights:

All applicable Patients' Rights laws and procedures shall be implemented.

O. Under-Utilization Reports:

For any quarter that CONTRACTOR maintains less than ninety percent (90%) of the total agreed upon units of service for any mode of service hereunder, CONTRACTOR shall immediately notify the Contract Administrator in writing and shall specify the number of underutilized units of service.

P. Quality Improvement:

CONTRACTOR agrees to develop and implement a Quality Improvement Plan based on internal standards established by CONTRACTOR applicable to the SERVICES as follows:

- (1) Staff evaluations completed on an annual basis.
- (2) Personnel policies and procedures in place, reviewed and updated annually.
- (3) Board Review of Quality Improvement Plan.

Q. Working Trial Balance with Year-End Cost Report

If CONTRACTOR is a Non-Hospital Provider as defined in the State of California Department of Mental Health Cost Reporting Data Collection Manual, it agrees to submit a working trial balance with the year-end cost report.

R. Harm Reduction

The program has a written internal Harm Reduction Policy that includes the guiding principles per Resolution # 10-00 810611 of the San Francisco Department of Public Health Commission.

S. Compliance with Behavioral Health Services Policies and Procedures

In the provision of SERVICES under BHS contracts, CONTRACTOR shall follow all applicable policies and procedures established for contractors by BHS, as applicable, and shall keep itself duly informed of such policies. Lack of knowledge of such policies and procedures shall not be an allowable reason for noncompliance.

T. Fire Clearance

Space owned, leased or operated by San Francisco Department of Public Health **providers**, including satellite sites, and used by CLIENTS or STAFF **shall** meet local fire codes. Providers shall undergo of fire safety inspections at least every three (3) years and documentation of fire safety, or corrections of any deficiencies, shall be made available to reviewers upon request."

U. Clinics to Remain Open:

Outpatient clinics are part of the San Francisco Department of Public Health Community Behavioral Health Services (CBHS) Mental Health Services public safety net; as such, these clinics are to remain open to referrals from the CBHS Behavioral Health Access Center (BHAC), to individuals requesting services from the clinic directly, and to individuals being referred from institutional care. Clinics serving children, including comprehensive clinics, shall remain open to referrals from the 3632

unit and the Foster Care unit. Remaining open shall be in force for the duration of this Agreement. Payment for SERVICES provided under this Agreement may be withheld if an outpatient clinic does not remain open.

Remaining open shall include offering individuals being referred or requesting SERVICES appointments within 24-48 hours (1-2 working days) for the purpose of assessment and disposition/treatment planning, and for arranging appropriate dispositions.

In the event that the CONTRACTOR, following completion of an assessment, determines that it cannot provide treatment to a client meeting medical necessity criteria, CONTRACTOR shall be responsible for the client until CONTRACTOR is able to secure appropriate services for the client.

CONTRACTOR acknowledges its understanding that failure to provide SERVICES in full as specified in Appendix A of this Agreement may result in immediate or future disallowance of payment for such SERVICES, in full or in part, and may also result in CONTRACTOR'S default or in termination of this Agreement.

V. Compliance with Grant Award Notices:

Contractor recognizes that funding for this Agreement may be provided to the City through federal, State or private grant funds. Contractor agrees to comply with the provisions of the City's agreements with said funding sources, which agreements are incorporated by reference as though fully set forth.

Contractor agrees that funds received by Contractor from a source other than the City to defray any portion of the reimbursable costs allowable under this Agreement shall be reported to the City and deducted by Contractor from its billings to the City to ensure that no portion of the City's reimbursement to Contractor is duplicated.

2. Description of Services

Contractor agrees to perform the following Services:

All written Deliverables, including any copies, shall be submitted on recycled paper and printed on double-sided pages to the maximum extent possible.

Detailed description of services are listed below and are attached hereto

Appendix A-1 AFS Outpatient Behavioral Program

Appendix A-2 AFS Therapeutic Visitation Services

3. Services Provided by Attorneys. Any services to be provided by a law firm or attorney to the City must be reviewed and approved in writing in advance by the City Attorney. No invoices for services provided by law firms or attorneys, including, without limitation, as subcontractors of Contractor, will be paid unless the provider received advance written approval from the City Attorney.

Contractor Name: Alternative Family Services	Appendix A-1
Program Name: AFS Outpatient Behavioral Health Program	Contract Term: 07/01/18-6/30/19

1. Identifiers:

Program Name: AFS Outpatient Behavioral Health Program
 Program Address: 250 Executive Park Blvd, Suite 4900
 City, State, ZIP: San Francisco, CA 94134
 Telephone/FAX: 415-656-0117
 Website Address: www.afs4kids.org

Executive Director/Program Director: Jay Berlin / Tricca Leverenz
 Telephone: 707-576-7700 x 314
 Email Address: jberlin@afs4kids.org
 Program Code(s): 38GSOP

2. Nature of Document:

Original Contract Amendment Revision to Program Budgets (RPB)

3. Goal Statement:

The goal of this program is to improve the client(s)' interpersonal, adaptive, and communication skills. Additionally, we strive to improve their connection with their family in order to support their emotional and psychological well-being. In so doing, our goal is to support permanency and stability for children and families with a special emphasis and expertise to serve children and youth involved with the foster care system by addressing their unique behavioral health needs.

4. Target Population:

The target population for these programs is San Francisco County child welfare involved children and youth ages 0 to 20. The program is designed to meet the unique needs of children and youth involved in or at risk of becoming involved in the foster care system.

AFS will also provide limited non Medi-Cal reimbursable support services to children and families who I) do not have full scope Medi-Cal or II) require additional support services per approval of Foster Care Mental Health and Human Services Agency (see description below).

5. Modality(s)/Intervention(s)

See Cost Reporting/Data Collection (CRDC) in FY 18-19 Appendix B-1. Modes of Services include: Case Management Brokerage, Mental Health Services – Outpatient Services.

Contractor Name: Alternative Family Services	Appendix A-1
Program Name: AFS Outpatient Behavioral Health Program	Contract Term: 07/01/18-6/30/19

6. Methodology:

Indirect Services and Activities (Funded by Work Order)

Permanency Worker (.75 FTE)

- All SF County youth placed in AFS foster homes will receive intensive permanency case planning services, intensified case review and management, and specialized training for social workers managing these placements.

SF Recruitment Program Activities

- AFS will provide foster and kin parent services for perspective San Francisco Resource Parents. Activities will include outreach, recruitment, parent training, and ongoing support during the approval process.

Other Support Services

- AFS may provide limited non Medi-Cal support services to assist clients in reaching their goals, including, but not limited to, progress reporting to PSWs, coordination efforts, and outreach.

Direct Client Services:

A. Outreach, recruitment, promotion, and advertisement:

All referrals will be received from Foster Care Mental Health (FCMH). AFS will work with FCMH to prioritize any children or youth placed in AFS ISFC homes and who are in need of mental health services.

B. Admission, enrollment and/or intake criteria and process where applicable:

AFS will obtain all referrals from FCMH. Assessments will take place within the first 30 days of receiving the referral. AFS will work with FCMH to facilitate appropriate referral and linkage to services.

Within 48 hours of receipt of referral, AFS staff contacts families and referring party to present a brief introduction to AFS and to schedule an intake appointment at the time and location preferred by the client. The intake also marks the beginning of "engagement work" for AFS that includes building rapport.

- #### C. Non EPSDT Services:
- limited client support services will be provided to current AFS clients and/or SF Dependents placed in AFS homes to increase the likelihood of permanency, safety, and well-being. Support services include, but are not limited to, outreach to legal representatives, engagement prior to a client's opening, transitional support, coordination of systems, facilitating appropriate community resources for SF Dependents, and transportation. These services will be funded by a work order and monitored by the AFS Program Director. All services will be documented and tracked in the AFS Electronic Health Record.

Contractor Name: Alternative Family Services	Appendix A-1
Program Name: AFS Outpatient Behavioral Health Program	Contract Term: 07/01/18-6/30/19

D. Mental Health Service delivery model:

- a) **Assessment & Early Identification:** Ideally, youth are assessed immediately upon entry into the foster care system and at any transition point thereafter (i.e., before and after placement change and system exit). For AFS clients, every case receives a formal comprehensive psychosocial assessment using the Child and Adolescent Strengths and Needs (CANS) assessment system. Youth and caregivers are active participants in the collection, review and prioritization of data.
- b) **Assessment Only.** For clients referred for assessment only, AFS clinicians will complete an initial Assessment and Brief CANS within 30 days of episode opening. The AFS clinician will provide a written summary of needs, strengths and recommendations for mental health services. Based on client needs and FCMH authorization, the AFS clinician may provide ongoing services in order to coordinate care and participate on the Child and Family Team.
- c) **Treatment Planning:** Clients, clinicians and other key individuals develop a treatment plan of care to prioritize client needs, goals and service strategies. As assessment information changes, treatment planning will change accordingly.
- d) **Service Provision and Appropriateness Monitoring:**
 - i. Immediately following the assessment and treatment planning phases the clinician will work with the client to address goals. For the general target population described in Item #4, planned services may include a combination of individual therapy, family therapy, individual rehabilitation, and/or case management. For clients in the priority population (ISFC clients) planned services may also include intensive care coordination (ICC) and intensive home based services (IHBS) to focus on restoring, improving or maintaining daily living skills, functional skills, social skills and support resources. IR, ICC and IHBS services may be provided by a Mental Health Rehab Specialist (MHRS) who will coordinate and collaborate with the clinical team.
 - ii. A great deal of attention is placed on ensuring that the intensity and frequency of services are appropriate to meet the needs of clients and their families. AFS matches interventions and practices to the needs of clients. Services are closely monitored for appropriateness through supervision and CQI processes. AFS Quality Management will monitor the provision of IR Services at the child- and program-level for clients in ITFC placements via an internal monthly report submitted to the Program Director and Mental Health Director.
- e) **Service Coordination and Collaboration:** Coordination and collaboration is a foundational aspect of the AFS clinical model. To achieve client goals, services must be coordinated among all the involved stakeholders such as county case workers, probation officers, FFA workers, lawyers, schools, foster families, and biological families.
- f) **Community Linkage:** A critical aspect of treatment is working to create a network of natural and formal supports in the clients' lives to reinforce and maintain treatment gains and increase the likelihood of successful outcomes. AFS consistently partners with multiple other providers to ensure continuity of service during the referral process, as well as to ensure coordinated care. AFS has worked closely with A Better Way, Seneca, and Fred Finch, all whom provide Mental Health

Contractor Name: Alternative Family Services	Appendix A-1
Program Name: AFS Outpatient Behavioral Health Program	Contract Term: 07/01/18-6/30/19

Services to children who are Dependents of San Francisco. Additionally, we also have partnered with First Stop, Horizon's, La Casa de Las Madres, and Urban Services YMCA.

E. Discharge Planning and exit criteria and process:

As mentioned above, a critical aspect of all services is discharge planning and linkages to formal and informal services and supports. At service initiation, service providers in collaboration with the client and family create a discharge plan to identify and begin to link clients and their families to community supports, and to outline resources for clients following service completion. Common community support agencies are First Stop, Horizon's, La Casa de Las Madres, and Urban Services YMCA.

Data from the Child and Adolescent Needs and Strength Assessment (CANS) (collected every 6 months and during any transition points) helps to monitor and match service needs to client and family needs. This allows for systematic monitoring of service appropriateness. Clients are discharged when treatment goals are achieved, or when a less intensive service may be more appropriate.

F. Program staffing:

All services will be provided by staff that is qualified to deliver EPSDT services. Overall program responsibility is given to Mental Health Director, Tricca Leverenz, LCSW. Specific day to day program responsibility is vested in Program Director, Kris Gamayo, LMFT. Clinical supervision of staff is shared by Kris Gamayo and licensed Clinical Supervisors. Services are delivered by a team of master's level clinicians and MHRS qualified staff. Quality Assurance is the responsibility of Quality Management Director, Lisa Hilley, PhD, who oversees a team of Quality Management Specialists and Associates.

7. Objectives and Measurements:

All objectives, and descriptions of how objectives will be measured, are contained in the BHS document entitled BHS Children, Youth, and Families Performance Objectives FY 18-19

8. Continuous Quality Improvement:

The overall program quality is guided by the agency's Continuous Quality Improvement (CQI) Structure which is documented in the AFS CQI Plan, and led by the CQI Steering Committee and the CQI Working Committees. The CQI working committees are: AFS Program Quality & Compliance Committee led by the Compliance Officer/CFO; the Program Outcomes Committee led by the Chief Program Officer, The Staff Development & Safety Committee led by the CFO; and, the Information Systems Committee led by the Director of Special Projects. The CQI Oversight Committee is led by the CEO and includes the agency's leadership team. The CQI Steering Committee meets on a regular basis and the Working Committee meets, at a minimum, on a quarterly basis.

Contractor Name: Alternative Family Services	Appendix A-2
Program Name: AFS Therapeutic Visitation	Contract Term: 07/01/18-06/30/19

1. Identifiers:

Program Name: AFS Therapeutic Visitation
 Program Address: 250 Executive Park Blvd, Suite 4900
 City, State, ZIP: San Francisco, CA 94134
 Telephone/FAX: 415-656-0117
 Website Address: www.afs4kids.org

Executive Director/Program Director: Jay Berlin
 Telephone: 707-576-7700 x 314
 Email Address: jberlin@afs4kids.org
 Program Code(s): 38GS01

2. Nature of Document:

3. Original Contract Amendment Revision to Program Budgets (RPB)

4. Goal Statement:

AFS Therapeutic Visitation (TVS) program is specifically designed to bring targeted, time-limited, and evidenced-informed mental health services with a special emphasis on San Francisco's foster youth and their families, of all ethnicities and populations, who are separated due to allegations of abuse and neglect and currently in the reunification process. The program is organized to reduce traditional barriers to service provisions, which provide clients, their families and foster families with highly coordinated, flexible, convenient, and culturally and linguistically competent services. We believe that by integrating our longstanding expertise in the field of foster care with well-chosen evidence based mental health practices we can:

- Maintain and strengthen family connections
- Enhance and strengthen family-child relationships
- Reduce youth emotional/behavioral problems that hinder their ability to live in a family environment

5. Target Population:

The target population for this program is San Francisco County child welfare involved children and youth ages 2 to 17, of all ethnicities and populations. The program is designed with a focused emphasis and expertise to meet the unique needs of children and youth involved or at risk for becoming involved in the foster care system. Limited supervised visitation services are provided to children and families who do not have full scope Medi-Cal (see Supervised Visitation Services description below).

Contractor Name: Alternative Family Services	Appendix A-2
Program Name: AFS Therapeutic Visitation	Contract Term: 07/01/18-06/30/19

6. Modality(s)/Intervention(s)

See Cost Reporting/Data Collection (CRDC), FY18-19 Appendix B-2. Mode of Services will include the following: Mental Health Services include Assessment, Plan Development, Individual Therapy, Individual Rehabilitation (IR), Intensive Home Based Services, (IHBS) Family Therapy, Group Therapy, and Collateral. AFS will also provide Case Management, Intensive Care Coordination (ICC).

7. Methodology:

Direct client services

- A. Outreach, Recruitment, Promotion, and Advertisement: All referrals will be received from Foster Care Mental Health.
- B. Admission and Intake Process: AFS will obtain all referrals from Foster Care Mental Health. Assessments for services will be conducted within the first 30 days. AFS will work with Foster Care mental health to facilitate appropriate referrals.

Within 48 hours of receipt of referral, AFS staff contacts families and referring party to present a brief introduction to AFS and to schedule an intake appointment at the time and location preferred by the client. The intake also marks the beginning of “engagement work” for AFS that includes building rapport.

- C. Service delivery model: Program phases, Location, Length of Stay, and Hours of Operation Intake:

Assessment & Early Identification: Ideally, youth are assessed immediately upon entry into the foster care system and at any transition point; thereafter (i.e., before and after placement change and system exit). For AFS clients, every case receives a formal comprehensive psychosocial assessment using the Child and Adolescent Strengths and Needs (CANS) assessment. Youth and caregivers are active participants in the collection, review and prioritization of data.

Treatment Planning: Clients, clinicians and other key individuals develop a treatment plan of care to prioritize client needs, goals and service strategies. As assessment information changes, treatment planning will change accordingly.

Service Provision and Appropriateness Monitoring: A great deal of attention is placed on ensuring that the intensity and frequency of services are appropriate to meet the needs of clients and their families. AFS matches interventions and practices to the needs of clients. Services are closely monitored for appropriateness through supervision and CQI processes.

Service Coordination and Collaboration: Coordination and collaboration is a foundational aspect of the AFS clinical model. To achieve client goals, services must be coordinated among all the involved stakeholders such as county case workers, probation officers, FFA workers, lawyers, schools, foster families, and biological families.

Community Linkage: A critical aspect of treatment is working to create a network of natural and formal supports in the clients’ lives to reinforce and maintain treatment gains and increase the

Contractor Name: Alternative Family Services	Appendix A-2
Program Name: AFS Therapeutic Visitation	Contract Term: 07/01/18-06/30/19

likelihood of successful outcomes. AFS consistently partners with multiple other providers to ensure continuity of service during the referral process, as well as to ensure coordinated care. AFS has worked closely with A Better Way, Seneca, and Fred Finch, all of which provide Mental Health Services to children who are Dependents of San Francisco. Additionally, we also have partnered with First Stop, Horizon's, La Casa de Las Madres, and Urban Services YMCA.

Location: Locations and times of service delivery will be flexible and planned to meet clients' needs as much as possible. Both programs are community based; services will be, whenever clinically and logistically possible, delivered to clients in the least restrictive and most therapeutically appropriate environment possible. The continuum of visitation sites may vary from tightly supervised, in-office sessions to less structured community venues and client homes.

Length of Stay: Treatment planning will be organized to allow clients to move to lower levels of services or a step-down plan within six to nine months of service initiation.

Hours of Operation: Services will be provided to clients' and their families from the hours of 9:00 to 8:00 p.m. and weekends as needed and when possible.

Supervised Visitation Service and other Support Services (Funded by Work Order): At AFS, Supervised Visitation Services are provided on a limited basis for six to nine months. These services are managed by trained staff who are present at all times to ensure visits are safe and aligned with the Visitation Plan. The primary focus of the visits is to promote safety and well-being for children and youth. To promote safe and positive family interactions, families may receive parent coaching and/or support from the AFS staff. Families are referred directly from Protective Social Workers. AFS may also provide additional support services in order to help families reach their goals, including, but not limited to, progress updates to PSWs, debrief meetings with families, and coordination with other providers. Upon receiving the referrals, AFS conducts a Risk and Safety Assessment to determine whether the Supervised Visitation Services are suitable for the referred parent(s), caregiver(s), and child (ren). If accepted, the AFS staff obtains initial paperwork from the PSW, and contacts the family to schedule the first visit.

- D. Discharge Process: As mentioned above, a critical aspect of all services is discharge planning and linkages to formal and informal services and supports. At service initiation, service providers in collaboration with the client and family create a discharge plan to identify and begin to link clients and their families to community supports, and to outline resources for clients following service completion. Common community support agencies are First Stop, Horizon's, La Casa de Las Madres, and Urban Services YMCA.

Data from the Child and Adolescent Needs and Strength Assessment (CANS) (collected every 6 months and during any transition points) helps to monitor and match service needs to client and family needs. This allows for systematic monitoring of service appropriateness. Clients are discharged when treatment goals are achieved, or when a less intensive service may be more appropriate.

Contractor Name: Alternative Family Services	Appendix A-2
Program Name: AFS Therapeutic Visitation	Contract Term: 07/01/18-06/30/19

E. Program Staffing: All services will be provided by staff that is qualified to deliver EPSDT services. Overall program responsibility is given to Tricca Leverenz, LCSW, and Mental Health Director. Specific day to day program responsibility is vested in Kris Gamayo, LMFT, Program Director. Clinical supervision of staff is shared by Ms. Gamayo and licensed Clinical Supervisors. Services are delivered by a team of master's level clinicians and MHRS qualified staff. Quality Assurance is the responsibility of Quality Management Director, Dr. Lisa Hilley, who oversees a team of Quality Management Specialists and Associates.

8. Objectives and Measurements:

All objectives, and descriptions of how objectives will be measured, are contained in the BHS document entitled BHS Children, Youth, and Families Performance Objectives FY18-19

9. Continuous Quality Improvement:

The overall program quality is guided by the agency's Continuous Quality Improvement (CQI) Structure which is documented in the AFS CQI Plan, and led by the CQI Steering Committee and the CQI Working Committees. The CQI working committees are: AFS Program Quality & Compliance Committee led by the Compliance Officer/CFO; the Program Outcomes Committee led by the Chief Program Officer, The Staff Development & Safety Committee led by the CFO; and, the Information Systems Committee led by the Director of Special Projects. The CQI Oversight Committee is led by the CEO and includes the agency's leadership team. The CQI Steering Committee meets on a regular basis and the Working Committee meets, at a minimum, on a quarterly basis.

Program-level quality initiatives are addressed in bi-weekly meeting between program and QM management staff, and implemented by program supervisors and managers. In addition, structured activities (e.g., utilization review; clinical review; etc.) function as CQI methods for the program.

A. Performance-Contract & Productivity: Contract performance is monitored at various levels in the agency: (a) monthly during the Mental Health Management meeting; (b) bi-monthly during the Program CQI Management meeting; (c) quarterly at the agency CQI Steering Committee. The Program Compliance Committee reviews specific contractual obligations while staff productivity is reviewed monthly by Management. Program managers and Quality Management staff look at service intensity issues (e.g., looking at levels of Collateral contacts, a key indicator of collaboration and coordination for AFS' population children in the foster care system) during their biweekly meetings. Clinical Supervisors and Program Directors meet on a weekly basis to review clinician caseload, service intensity and care coordination.

AFS generates a report at opening for each client through our internal data base, which allows us to track due dates and ensure timely submission of Assessments, Treatment Plans and service delivery.

B. Documentation Quality, including a description of internal audits: Service quality is monitored at various levels of the agency: (a) program supervision; (b) peer-review (monthly review of charts by peers); (c) utilization review (monthly review of charts by external agency); (d) internal Medi-Cal audits. AFS will continue to utilize internal Quality Management and Clinical Managers to review documentation quality and seek outside consultation as needed to identify best practices, internal review and auditing tools, methods and infrastructure development, as well as, conduct quarterly documentation trainings.

Contractor Name: Alternative Family Services	Appendix A-2
Program Name: AFS Therapeutic Visitation	Contract Term: 07/01/18-06/30/19

AFS internal audits are as follows:

- a. Utilization Review (UR): Under the direction of the AFS SF Program Director and QM Associates. The QM Unit-collates data on UR outcomes (i.e., number of charts identified as conditional, passing, failing) and compares with the benchmark (95% passing or conditional).
 - b. Critical Case Peer Review: Will be in conjunction with the Level 2 PURQC process. Is a Peer Review in the format of a live case-consultation. Cases are selected based on length of service, level of service, and level of Clinical need.
 - c. Level 2 PURQC: AFS will participate in the pilot project to further solidify expectations and procedures for this higher level clinical review of all charts open longer than 36 months of service.
- C. Cultural Competency: Cultural competence is monitored at the local level: (a) supervision and (b) trainings (for managers and clinicians). The Program Director works closely with the Human Resources Department to review hiring and advertising practices to ensure that newly hired staff consistently meets our client's cultural and language needs. AFS also utilizes contractors and/or The Department of Public Health Language Access Services when interpreter services are needed in languages outside of the language capacity of AFS staff. AFS conducts three Cultural Competency trainings per year, tailoring trainings to match clientele backgrounds, ethnicities and languages.
- D. Client Satisfaction: Client satisfaction is measured through State-administered and/or AFS-administered satisfaction surveys. AFS conducts a San Francisco County client survey twice a year. Additionally, AFS is looking to implement an internal pre/post client survey. AFS has also implemented a survey via Survey Monkey, which targets County Social Workers to gather data for the purpose of enhancing the quality of our services, and maintaining/improving our relationship with our referral source.
- E. Measurement, analysis, and use of CANS data: Program (a) participates in Super User calls on a monthly basis, (b) utilizes SF county reports (Pivot Charts) when available to evaluate treatment, and (c) created and analyzed our Theory of Change Clinical Formulation. AFS is also in the process of implementing "Using CANS in Supervision" and the TCOM strategies created by John Lyons.

10. Required Language:

None

Appendix B
Calculation of Charges

1. Method of Payment

A. Invoices furnished by CONTRACTOR under this Agreement must be in a form acceptable to the Contract Administrator and the CONTROLLER and must include the Contract Progress Payment Authorization number or Contract Purchase Number. All amounts paid by CITY to CONTRACTOR shall be subject to audit by CITY. The CITY shall make monthly payments as described below. Such payments shall not exceed those amounts stated in and shall be in accordance with the provisions of Section 5, COMPENSATION, of this Agreement.

Compensation for all SERVICES provided by CONTRACTOR shall be paid in the following manner. For the purposes of this Section, "General Fund" shall mean all those funds which are not Work Order or Grant funds. "General Fund Appendices" shall mean all those appendices which include General Fund monies.

(1) Fee For Service (Monthly Reimbursement by Certified Units at Budgeted Unit Rates)

CONTRACTOR shall submit monthly invoices in the format attached, Appendix F, and in a form acceptable to the Contract Administrator, by the fifteenth (15th) calendar day of each month, based upon the number of units of service that were delivered in the preceding month. All deliverables associated with the SERVICES defined in Appendix A times the unit rate as shown in the appendices cited in this paragraph shall be reported on the invoice(s) each month. All charges incurred under this Agreement shall be due and payable only after SERVICES have been rendered and in no case in advance of such SERVICES.

(2) Cost Reimbursement (Monthly Reimbursement for Actual Expenditures within Budget):

CONTRACTOR shall submit monthly invoices in the format attached, Appendix F, and in a form acceptable to the Contract Administrator, by the fifteenth (15th) calendar day of each month for reimbursement of the actual costs for SERVICES of the preceding month. All costs associated with the SERVICES shall be reported on the invoice each month. All costs incurred under this Agreement shall be due and payable only after SERVICES have been rendered and in no case in advance of such SERVICES.

B. Final Closing Invoice

(1) Fee For Service Reimbursement:

A final closing invoice, clearly marked "FINAL," shall be submitted no later than forty-five (45) calendar days following the closing date of each fiscal year of the Agreement, and shall include only those SERVICES rendered during the referenced period of performance. If SERVICES are not invoiced during this period, all unexpended funding set aside for this Agreement will revert to CITY. CITY'S final reimbursement to the CONTRACTOR at the close of the Agreement period shall be adjusted to conform to actual units certified multiplied by the unit rates identified in Appendix B attached hereto, and shall not exceed the total amount authorized and certified for this Agreement.

(2) Cost Reimbursement:

A final closing invoice, clearly marked "FINAL," shall be submitted no later than forty-five (45) calendar days following the closing date of each fiscal year of the Agreement, and shall include only those costs incurred during the referenced period of performance. If costs are not invoiced during this period, all unexpended funding set aside for this Agreement will revert to CITY.

C. Payment shall be made by the CITY to CONTRACTOR at the address specified in the section entitled "Notices to Parties."

2. Program Budgets and Final Invoice

A. Program Budgets are listed below and are attached hereto.

Budget Summary
CRDC B1 – B2
Appendix B-1 AFS Outpatient Behavioral Health Program
Appendix B-2 AFS Therapeutic Visitation Services

B. Compensation

Compensation shall be made in monthly payments on or before the 30th day after the DIRECTOR, in his or her sole discretion, has approved the invoice submitted by CONTRACTOR. The breakdown of costs and sources of revenue associated with this Agreement appears in Appendix B, Cost Reporting/Data Collection (CR/DC) and Program Budget, attached hereto and incorporated by reference as though fully set forth herein. The maximum dollar obligation of the CITY under the terms of this Agreement shall not exceed **Nine Million Six Hundred Eighty Thousand Two Hundred Eighty Eight Dollars (\$9,680,288)** for the period of **July 1, 2018 through March 31, 2021**.

CONTRACTOR understands that, of this maximum dollar obligation, \$1,037,174 is included as a contingency amount and is neither to be used in Appendix B, Budget, or available to CONTRACTOR without a modification to this Agreement executed in the same manner as this Agreement or a revision to Appendix B, Budget, which has been approved by the Director of Health. CONTRACTOR further understands that no payment of any portion of this contingency amount will be made unless and until such modification or budget revision has been fully approved and executed in accordance with applicable CITY and Department of Public Health laws, regulations and policies/procedures and certification as to the availability of funds by the Controller. CONTRACTOR agrees to fully comply with these laws, regulations, and policies/procedures.

(1) For each fiscal year of the term of this Agreement, CONTRACTOR shall submit for approval of the CITY's Department of Public Health a revised Appendix A, Description of Services, and a revised Appendix B, Program Budget and Cost Reporting Data Collection form, based on the CITY's allocation of funding for SERVICES for the appropriate fiscal year. CONTRACTOR shall create these Appendices in compliance with the instructions of the Department of Public Health. These Appendices shall apply only to the fiscal year for which they were created. These Appendices shall become part of this Agreement only upon approval by the CITY.

(2) CONTRACTOR understands that, of the maximum dollar obligation stated above, the total amount to be used in Appendix B, Budget and available to CONTRACTOR for the entire term of the contract is as follows, notwithstanding that for each fiscal year, the amount to be used in Appendix B, Budget and available to CONTRACTOR for that fiscal year shall conform with the Appendix A, Description of Services, and a Appendix B, Program Budget and Cost Reporting Data Collection form, as approved by the CITY's Department of Public Health based on the CITY's allocation of funding for SERVICES for that fiscal year.

July 1, 2018 through June 30, 2019	\$	3,072,595
July 1, 2019 through June 30, 2020	\$	3,149,410
July 1, 2020 through March 31, 2021	\$	2,421,109
Subtotal - July 1, 2018 through March 31, 2021	\$	8,643,114
Contingency	\$	1,037,174
TOTAL - July 1, 2018 through March 31, 2021	\$	9,680,288

(3) CONTRACTOR understands that the CITY may need to adjust sources of revenue and agrees that these needed adjustments will become part of this Agreement by written modification to CONTRACTOR. In event that such reimbursement is terminated or reduced, this Agreement shall be terminated or proportionately reduced accordingly. In no event will CONTRACTOR be entitled to compensation in excess of these amounts for these periods without there first being a modification of the Agreement or a revision to Appendix B, Budget, as provided for in this section of this Agreement.

(4) SERVICES OF ATTORNEYS No invoices for Services provided by law firms or attorneys, including, without limitation, as subcontractors of Contractor, will be paid unless the provider received advance written approval from the City Attorney.

(5) STATE OR FEDERAL MEDI-CAL REVENUES

- CONTRACTOR understands and agrees that should the CITY'S maximum dollar obligation under this Agreement include State or Federal Medi-Cal revenues, CONTRACTOR shall expend such revenues in the provision of SERVICES to Medi-Cal eligible clients in accordance with CITY, State, and Federal Medi-Cal regulations. Should CONTRACTOR fail to expend budgeted Medi-Cal revenues herein, the CITY'S maximum dollar obligation to CONTRACTOR shall be proportionally reduced in the amount of such unexpended revenues. In no event shall State/Federal Medi-Cal revenues be used for clients who do not qualify for Medi-Cal reimbursement.
- CONTRACTOR further understands and agrees that any State or Federal Medi-Cal funding in this Agreement subject to authorized Federal Financial Participation (FFP) is an estimate, and actual amounts will be determined based on actual services and actual costs, subject to the total compensation amount shown in this Agreement."

CBHS BUDGET

Appendix B - DPH 1: Department of Public Health Contract Budget Summary

DHCS Legal Entity Number		00510		Summary Page:		1 of 1	
Legal Entity Name/Contractor Name		ALTERNATIVE FAMILY SERVICES, INC.		Fiscal Year		2018-2019	
Contract ID Number		1000010827		Funding Notification Date		10/03/18	
Appendix Number	B-# 1	B-# 2	B-#	B-#			
Provider Number	38GS OP	38GS 01					
Program Name	Outpatient Behavioral Health	Therapeutic Visitation Services					
Program Code	38GSOP	38GS01					
Funding Term	7/1/18-6/30/19	7/1/18-6/30/19					
FUNDING USES					TOTAL		
Salaries	\$ 1,551,838	\$ 216,462			\$ 1,768,300		
Employee Benefits	\$ 403,478	\$ 56,280			\$ 459,758		
Subtotal Salaries & Employee Benefits	\$ 1,955,316	\$ 272,742			\$ 2,228,058		
Operating Expenses	\$ 384,339	\$ 59,427			\$ 443,766		
Capital Expenses	\$ -				\$ -		
Subtotal Direct Expenses	\$ 2,339,655	\$ 332,169			\$ 2,671,824		
Indirect Expenses	\$ 350,948	\$ 49,825			\$ 400,773		
Indirect %	15%	15%			15.0%		
TOTAL FUNDING USES	\$ 2,690,602	\$ 381,994			\$ 3,072,595		
					Employee Benefits Rate		26.0%
BHS MENTAL HEALTH FUNDING SOURCES							
MH CYF Fed SDMC FFP (50%)	\$ 1,156,239	\$ 127,223			\$ 1,283,462		
MH CYF State 2011 PSR-EPSDT	\$ 932,653	\$ 127,955			\$ 1,060,608		
MH CYF County General Fund	\$ 249,994	\$ 86,838			\$ 336,831		
MH CYF County GF WO CODB	\$ 7,421	\$ 952			\$ 8,373		
MH WO HSA GF Match	\$ 126,512	\$ -			\$ 126,512		
MH WO HSA CWS Non-IVE Overmatch	\$ 177,783	\$ 39,026			\$ 216,809		
MH WO HSA CWS Non-IVE Overmatch	\$ 40,000	\$ -			\$ 40,000		
					\$ -		
					\$ -		
TOTAL BHS MENTAL HEALTH FUNDING SOURCES	\$ 2,690,602	\$ 381,994	\$ -	\$ -	\$ 3,072,595		
TOTAL DPH FUNDING SOURCES	\$ 2,690,602	\$ 381,994	\$ -	\$ -	\$ 3,072,595		
TOTAL FUNDING SOURCES (DPH AND NON-DPH)	\$ 2,690,602	\$ 381,994	\$ -	\$ -	\$ 3,072,595		
Date: 7/1/2018		Prepared By <i>Martha E. Duarte, CFO</i>		Phone Number		707-529-5670	

Appendix B - DPH 2: Department of Public Health Cost Reporting/Data Collection (CRDC)

DHCS Legal Entity Number **00510**
 Provider Name **ALTERNATIVE FAMILY SERVICES, INC.**
 Provider Number **38GS OP** **OUTPATIENT SERVICES**

Appendix Number **B-# 1**
 Page Number **1**
 Fiscal Year **2018-2019**
 Funding Notification Date **10/03/18**

Program Name	OUTPATIENT SERVICES	OUTPATIENT SERVICES	OUTPATIENT SERVICES	OUTPATIENT SERVICES	OUTPATIENT SERVICES		
Program Code	38GSOP	38GSOP	38GSOP	38GSOP	38GSOP		
Mode/SFC (MH) or Modality (SUD)	15/01-09	15/10-57	45/20-29	60/78	60/78		
Service Description	Case Mgt Brokerage	Mental Health Services	Mode 45 Fee for Service	SS-Other Non-MediCal Client Support Exp	SS-Other Non-MediCal Client Support Exp		
Funding Term (07/01/18-06/30/19):	07/01/18-06/30/19	07/01/18-06/30/19	07/01/18-06/30/19	07/01/18-06/30/19	07/01/18-06/30/19		
FUNDING USES							TOTAL
Salaries & Employee Benefits	258,067	1,462,377	126,512	37,800	70,560		1,955,316
Operating Expenses	41,179	298,355	42,605	2,200			384,339
Capital Expenses	-						-
Subtotal Direct Expenses	299,246	1,760,732	169,117	40,000	70,560	-	2,339,655
Indirect Expenses	33,066	122,361	195,521				350,948
TOTAL FUNDING USES	332,311	1,883,093	364,638	40,000	70,560	-	2,690,602
BHS MENTAL HEALTH FUNDING SOURC	Dept-Auth-Proj-Activity						
MH CYF Fed SDMC FFP (50%)	251962-10000-10001670-0001	\$ 173,436	\$ 982,803				1,156,239
MH CYF State 2011 PSR-EPST	251962-10000-10001670-0001	\$ 139,898	\$ 792,755				932,653
MH WO HSA GF Match	251962-10002-10001803-0006	\$ 18,977	\$ 107,535				126,512
MH CYF County General Fund	251962-10000-10001670-0001			249,994			249,994
MH CYF County GF WO CODB	251962-10000-10001670-0001			7,421			7,421
MH WO HSA CWS Non-IVE Overmatch	251962-10002-10001803-0002			107,223	70,560		177,783
MH WO HSA CWS Non-IVE Overmatch	251962-10002-10001803-0017				40,000		40,000
This row left blank for funding sources not in drop-down list							
TOTAL BHS MENTAL HEALTH FUNDING SOURCES		\$ 332,311	1,883,093	364,638	40,000	70,560	- 2,690,602
TOTAL DPH FUNDING SOURCES		\$ 332,311	1,883,093	364,638	40,000	70,560	- 2,690,602
NON-DPH FUNDING SOURCES							
This row left blank for funding sources not in drop-down list							
TOTAL NON-DPH FUNDING SOURCES		\$ -	-	-	-	-	-
TOTAL FUNDING SOURCES (DPH AND NON-DPH)		\$ 332,311	1,883,093	364,638	40,000	70,560	- 2,690,602
BHS UNITS OF SERVICE AND UNIT COST							
Number of Beds Purchased							
SUD Only - Number of Outpatient Group Counseling Sessions							
SUD Only - Licensed Capacity for Narcotic Treatment Programs							
Payment Method	Fee-For-Service (FFS)	Fee-For-Service (FFS)	Fee-For-Service (FFS)	Cost Reimbursement (CR)	Cost Reimbursement (CR)		
DPH Units of Service	149,018	744,306	126,610	1,387	1,835		
Unit Type	Staff Minute	Staff Minute	Staff Minute	Staff Hours	Staff Hours		
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES Only)	\$ 2.23	\$ 2.53	\$ 2.88	\$ 28.85	\$ 38.46		
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)	\$ 2.23	\$ 2.53		\$ 28.85	\$ 38.46		
Published Rate (Medi-Cal Providers Only)	\$ 3.25	\$ 3.50					
Unduplicated Clients (UDC)							Total UDC
							68

CBHS BUDGET

Appendix B - DPH 3: Salaries & Employee Benefits Detail

Program Name OUTPATIENT SERVICES

Program Code 38GSOP

Appendix Number

Page Number

Fiscal Year

Funding Notification Date

B-# 1

2

2018-2019

10/3/18

Funding Term	TOTAL		251962-10000-10001670-0001		251962-10002-10001803-0006		251962-10002-10001803-0017		251962-10002-100001803-0002	
	7/1/18-6/30/19		7/1/18-6/30/19		7/1/18-6/30/19		7/1/18-6/30/19		7/1/18-6/30/19	
Position Title	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries
Mental Health Clinician	13.00	805,975	11.40	705,569	1.6	100,406				
MHRS/Parent Partner	2.50	119,599	2.50	119,599						
Clinical Supervisor	2.15	173,084	2.15	173,084						
Program Director	0.87	77,888	0.87	77,888						
Intake Coordinator/Admin Support	0.87	32,401	0.87	32,401						
Mental Health Director	0.37	36,113	0.37	36,113						
Chief Program Officer	0.09	14,053	0.09	14,053						
Quality Management Director	0.37	51,622	0.37	51,622						
Asst. Quality Management Director	0.37	33,185	0.37	33,185						
Quality Improvement Manager	0.37	29,499	0.37	29,499						
Quality Management Coordinator	0.37	23,968	0.37	23,968						
Quality Management Associate	1.57	68,451	1.57	68,451						
Permanency Director	0.33	26,000		-					0.33	26,000
Permanency Social Worker	0.50	30,000		-					0.50	30,000
Bi-lingual Family Recruitment Social Worker	0.50	30,000		-			0.50	30,000		
Totals:	24.23	1,551,838	21.30	1,365,432	1.60	100,406	0.50	30,000	0.83	56,000
Employee Benefits:	26%	403,478	26.00%	355,012	26%	26,105.56	26.00%	7,800	26.00%	14,560
TOTAL SALARIES & BENEFITS		1,955,316		1,720,444		126,512		37,800		70,560

CBHS BUDGET

Appendix B - DPH 4: Operating Expenses Detail

Program Name OUTPATIENT SERVICES
 Program Code 38GSOP

Appendix Number B-# 1
 Page Number 3
 Fiscal Year 2018-2019
 Funding Notification Date 10/03/18

Expense Categories & Line Items	TOTAL	251962-10000-10001670-0001	251962-10002-10001803-0002	251962-10002-10001803-0017		
		Funding Term	7/1/18-6/30/19	7/1/18-6/30/19	7/1/18-6/30/19	
Rent	147,603	127,565	20,038			
Utilities (telephone, electricity, water, gas)	23,194	20,045	3,149			
Building Repair/Maintenance	5,539	4,787	752			
Occupancy Total:	176,336	152,397	23,939	-	\$	-
Office Supplies	15,145	13,089	2,056			
Photocopying	-	-	-			
Program Supplies	5,520	4,771	749			
Computer Hardware/Software	28,731	24,831	3,900			
Materials & Supplies Total:	49,396	42,691	6,705	-	\$	-
Training/Staff Development	28,126	24,308	3,818			
Insurance	11,078	9,574	1,504			
Professional License	5,193	4,488	705			
Permits	-	-	-			
Equipment Lease & Maintenance	4,067	3,515	552			
General Operating Total:	48,464	41,885	6,579	-	\$	-
Local Travel	97,576	91,700	3,676	2,200		
Out-of-Town Travel	-					
Field Expenses	-					
Staff Travel Total:	97,576	91,700	3,676	2,200	\$	-
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate and Amounts)	-					
TSL Consulting - Database Mgt/Maintenance	12,567	10,861	1,706			
Consultant/Subcontractor Total:	12,567	10,861	1,706	-	\$	-
Other (provide detail):	-					
	-					
	-					
Other Total:	-	-	-	-	\$	-
TOTAL OPERATING EXPENSE	384,339	339,534	42,605	2,200	\$	-

CBHS BUDGET

Appendix B - DPH 2: Department of Public Health Cost Reporting/Data Collection (CRDC)

DHCS Legal Entity Number 00510		Appendix Number		B#2
Provider Name		Page Number		1
Provider Number 38GS OP	THERAPEUTIC VISITATION			Fiscal Year 2018-2019
Funding Notification Date				10/03/18
Program Name	THERAPEUTIC VISITATION	THERAPEUTIC VISITATION	THERAPEUTIC VISITATION	
Program Code	38GS01	38GS01	38GS01	
Mode/SFC (MH) or Modality (SUD)	15/01-09	15/10-57	45/20-29	
Service Description	Case Mgt Brokerage	Mental Health Services	Mode 45 Fee for Service	
Funding Term (mm/dd/yy-mm/dd/yy):	7/1/18-6/30/19	7/1/18-6/30/19	7/1/18-6/30/19	
FUNDING USES				TOTAL
Salaries & Employee Benefits	40,911	231,832		272,742
Operating Expenses	5,707	43,990	9,730	59,427
Capital Expenses	-	-		-
Subtotal Direct Expenses	46,618	275,822	9,730	332,169
Indirect Expenses	9,033	39,532	1,260	49,825
TOTAL FUNDING USES	55,651	315,354	10,990	381,994
BHS MENTAL HEALTH FUNDING SOURCE	Dept-Auth-Proj-Activity			
MH CYF Fed SDMC FFP (50%)	251962-10000-10001670-0001	19,083	108,140	127,223
MH CYF State 2011 PSR-EPSDT	251962-10000-10001670-0001	19,193	108,762	127,955
MH CYF County General Fund	251962-10000-10001670-0001	17,374	69,465	86,839
MH CYF County GF WO CODB	251962-10000-10001670-0001		952	952
MH WO HSA CWS Non-IVE Overmatch	251962-10002-10001803-0002		28,988	10,038
TOTAL BHS MENTAL HEALTH FUNDING SOURCES		55,651	315,354	10,990
TOTAL DPH FUNDING SOURCES		55,651	315,354	10,990
TOTAL FUNDING SOURCES (DPH AND NON-DPH)		55,651	315,354	10,990
BHS UNITS OF SERVICE AND UNIT COST				
Number of Beds Purchased				
SUD Only - Number of Outpatient Group Counseling Sessions				
SUD Only - Licensed Capacity for Narcotic Treatment Programs				
Payment Method	Fee-For-Service (FFS)	Fee-For-Service (FFS)	Fee-For-Service (FFS)	
DPH Units of Service	24,955	109,498	3,816	
Unit Type	Staff Minute	Staff Minute	Staff Minute	
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES Only)	\$ 2.23	\$ 2.88	\$ 2.88	
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)	\$ 2.23	\$ 2.88		
Published Rate (Medi-Cal Providers Only)	\$ 3.25	\$ 3.50		
Date: 7/1/2018	Unduplicated Clients (UDC)			Total UDC 60

CBHS BUDGET

Appendix B - DPH 3: Salaries & Employee Benefits Detail

Program Name THERAPEUTIC VISITATION SERVICES
 Program Code 38GS01

Appendix Number
 Page Number
 Fiscal Year
 Funding Notification Date

B#2
2
2018-2019
10/3/18

	TOTAL		251962-10000-10001670-0001		
Funding Term	7/1/18-6/30/19		7/1/18-6/30/19		
Position Title	FTE	Salaries	FTE	Salaries	
Mental Health Clinician	2.50	\$108,525	2.50	\$108,525	
MHRS/Parent Partner	0.50	\$23,920	0.50	\$23,920	
Clinical Supervisor	0.34	\$26,917	0.34	\$26,917	
Program Director	0.13	\$12,112	0.13	\$12,112	
Intake Coordinator/Admin Support	0.13	\$5,038	0.13	\$5,038	
Mental Health Director	0.05	\$5,616	0.05	\$5,616	
Chief Program Officer	0.02	\$2,185	0.02	\$2,185	
Quality Management Director	0.06	\$8,028	0.06	\$8,028	
Asst. Quality Management Director	0.06	\$5,161	0.06	\$5,161	
Quality Improvement Manager	0.06	\$4,587	0.06	\$4,587	
Quality Management Coordinator	0.06	\$3,727	0.06	\$3,727	
Quality Management Associate	0.24	\$10,646	0.24	\$10,646	
Totals:	4.14	\$216,462	4.14	\$216,462	
Employee Benefits:	26%	\$56,280	0.26	\$56,281	
TOTAL SALARIES & BENEFITS		\$272,742		\$272,743	

CBHS BUDGET

Appendix B - DPH 4: Operating Expenses Detail

Program Name THERAPEUTIC VISITATION SERVICES
 Program Code 38GS01

Appendix Number B#2
 Page Number 3
 Fiscal Year 2018-2019
 Funding Notification Date 10/03/18

Expense Categories & Line Items	TOTAL	251962-10002-10001803-0002	251962-10000-10001670-0001		
Funding Term	7/1/18-6/30/19	7/1/18-6/30/19	7/1/18-6/30/19		
Rent	22,954	20,960	1,994		
Utilities (telephone, electricity, water, gas)	3,607	2,309	1,298		
Building Repair/Maintenance	861	551	310		
Occupancy Total:	27,422	23,820	3,602		
Office Supplies	2,356	1,508	848		
Program Supplies	859	550	309		
Computer Hardware/Software	4,468	2,860	1,608		
Materials & Supplies Total:	7,683	4,918	2,765		
Training/Staff Development	4,374	2,800	1,574		
Insurance	1,723	1,103	620		
Professional License	808	517	291		
Equipment Lease & Maintenance	633	405	228		
General Operating Total:	7,538	4,825	2,713		
Local Travel	14,832	4,212	10,620		
Staff Travel Total:	14,832	4,212	10,620		
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate and Amounts)	-				
	1,952	1,251	701		
Consultant/Subcontractor Total:	1,952	1,251	701		
Other (provide detail):	-				
	-				
	-				
Other Total:	-	-	-		
TOTAL OPERATING EXPENSE	59,427	39,026	20,401		

Appendix C

Reserved

**Appendix D
Reserved**

Appendix E

HIPAA Business Associate Agreement

APPENDIX E



San Francisco Department of Public Health Business Associate Agreement

This Business Associate Agreement (“BAA”) supplements and is made a part of the contract by and between the City and County of San Francisco, the Covered Entity (“CE”), and Richmond Area Multi Services, Inc., the Business Associate (“BA”), dated July 1, 2018, F&P #1000003053 (the “Agreement”). To the extent that the terms of the Agreement are inconsistent with the terms of this BAA, the terms of this BAA shall control.

RECITALS

- A. CE, by and through the San Francisco Department of Public Health (“SFDPH”), wishes to disclose certain information to BA pursuant to the terms of the Agreement, some of which may constitute Protected Health Information (“PHI”) (defined below).
- B. For purposes of the Agreement, CE requires Contractor, even if Contractor is also a covered entity under HIPAA, to comply with the terms and conditions of this BAA as a BA of CE.
- C. CE and BA intend to protect the privacy and provide for the security of PHI disclosed to BA pursuant to the Agreement in compliance with the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 (“HIPAA”), the Health Information Technology for Economic and Clinical Health Act, Public Law 111-005 (“the HITECH Act”), and regulations promulgated there under by the U.S. Department of Health and Human Services (the “HIPAA Regulations”) and other applicable laws, including, but not limited to, California Civil Code §§ 56, et seq., California Health and Safety Code § 1280.15, California Civil Code §§ 1798, et seq., California Welfare & Institutions Code §§5328, et seq., and the regulations promulgated there under (the “California Regulations”).
- D. As part of the HIPAA Regulations, the Privacy Rule and the Security Rule (defined below) require CE to enter into a contract containing specific requirements with BA prior to the disclosure of PHI, as set forth in, but not limited to, Title 45, Sections 164.314(a), 164.502(a) and (e) and 164.504(e) of the Code of Federal Regulations (“C.F.R.”) and contained in this BAA.
- E. BA enters into agreements with CE that require the CE to disclose certain identifiable health information to BA. The parties desire to enter into this BAA to permit BA to have access to such information and comply with the BA requirements of HIPAA, the HITECH Act, and the corresponding Regulations.

In consideration of the mutual promises below and the exchange of information pursuant to this BAA, the parties agree as follows:

1. Definitions.

- a. **Breach** means the unauthorized acquisition, access, use, or disclosure of PHI that compromises the security or privacy of such information, except where an unauthorized person to whom such information is disclosed would not reasonably have been able to retain such information, and shall have the meaning given to such term under the HITECH Act and HIPAA Regulations [42 U.S.C. Section 17921 and 45 C.F.R. Section 164.402], as well as California Civil Code Sections 1798.29 and 1798.82.
- b. **Breach Notification Rule** shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and D.



San Francisco Department of Public Health

Business Associate Agreement

c. **Business Associate** is a person or entity that performs certain functions or activities that involve the use or disclosure of protected health information received from a covered entity, but other than in the capacity of a member of the workforce of such covered entity or arrangement, and shall have the meaning given to such term under the Privacy Rule, the Security Rule, and the HITECH Act, including, but not limited to, 42 U.S.C. Section 17938 and 45 C.F.R. Section 160.103.

d. **Covered Entity** means a health plan, a health care clearinghouse, or a health care provider who transmits any information in electronic form in connection with a transaction covered under HIPAA Regulations, and shall have the meaning given to such term under the Privacy Rule and the Security Rule, including, but not limited to, 45 C.F.R. Section 160.103.

e. **Data Aggregation** means the combining of Protected Information by the BA with the Protected Information received by the BA in its capacity as a BA of another CE, to permit data analyses that relate to the health care operations of the respective covered entities, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

f. **Designated Record Set** means a group of records maintained by or for a CE, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

g. **Electronic Protected Health Information** means Protected Health Information that is maintained in or transmitted by electronic media and shall have the meaning given to such term under HIPAA and the HIPAA Regulations, including, but not limited to, 45 C.F.R. Section 160.103. For the purposes of this BAA, Electronic PHI includes all computerized data, as defined in California Civil Code Sections 1798.29 and 1798.82.

h. **Electronic Health Record** means an electronic record of health-related information on an individual that is created, gathered, managed, and consulted by authorized health care clinicians and staff, and shall have the meaning given to such term under the HITECH Act, including, but not limited to, 42 U.S.C. Section 17921.

i. **Health Care Operations** shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

j. **Privacy Rule** shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and E.

k. **Protected Health Information or PHI** means any information, including electronic PHI, whether oral or recorded in any form or medium: (i) that relates to the past, present or future physical or mental condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual; and (ii) that identifies the individual or with respect to which there is a reasonable basis to believe the information can be used to identify the individual, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Sections 160.103 and 164.501. For the purposes of this BAA, PHI includes all medical information and health insurance information as defined in California Civil Code Sections 56.05 and 1798.82.

l. **Protected Information** shall mean PHI provided by CE to BA or created, maintained, received or transmitted by BA on CE's behalf.



San Francisco Department of Public Health

Business Associate Agreement

m. **Security Incident** means the attempted or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system, and shall have the meaning given to such term under the Security Rule, including, but not limited to, 45 C.F.R. Section 164.304

n. **Security Rule** shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and C.

o. **Unsecured PHI** means PHI that is not secured by a technology standard that renders PHI unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute, and shall have the meaning given to such term under the HITECH Act and any guidance issued pursuant to such Act including, but not limited to, 42 U.S.C. Section 17932(h) and 45 C.F.R. Section 164.402.

2. Obligations of Business Associate.

a. **Attestations.** Except when CE's data privacy officer exempts BA in writing, the BA shall complete the following forms, attached and incorporated by reference as though fully set forth herein, SFDPH Attestations for Privacy (Attachment 1) and Data Security (Attachment 2) within sixty (60) calendar days from the execution of the Agreement. If CE makes substantial changes to any of these forms during the term of the Agreement, the BA will be required to complete CE's updated forms within sixty (60) calendar days from the date that CE provides BA with written notice of such changes. BA shall retain such records for a period of seven years after the Agreement terminates and shall make all such records available to CE within 15 calendar days of a written request by CE.

b. **User Training.** The BA shall provide, and shall ensure that BA subcontractors, provide, training on PHI privacy and security, including HIPAA and HITECH and its regulations, to each employee or agent that will access, use or disclose Protected Information, upon hire and/or prior to accessing, using or disclosing Protected Information for the first time, and at least annually thereafter during the term of the Agreement. BA shall maintain, and shall ensure that BA subcontractors maintain, records indicating the name of each employee or agent and date on which the PHI privacy and security trainings were completed. BA shall retain, and ensure that BA subcontractors retain, such records for a period of seven years after the Agreement terminates and shall make all such records available to CE within 15 calendar days of a written request by CE.

c. **Permitted Uses.** BA may use, access, and/or disclose Protected Information only for the purpose of performing BA's obligations for, or on behalf of, the City and as permitted or required under the Agreement and BAA, or as required by law. Further, BA shall not use Protected Information in any manner that would constitute a violation of the Privacy Rule or the HITECH Act if so used by CE. However, BA may use Protected Information as necessary (i) for the proper management and administration of BA; (ii) to carry out the legal responsibilities of BA; (iii) as required by law; or (iv) for Data Aggregation purposes relating to the Health Care Operations of CE [45 C.F.R. Sections 164.502, 164.504(e)(2), and 164.504(e)(4)(i)].

d. **Permitted Disclosures.** BA shall disclose Protected Information only for the purpose of performing BA's obligations for, or on behalf of, the City and as permitted or required under the Agreement and BAA, or as required by law. BA shall not disclose Protected Information in any manner that would constitute a violation of the



San Francisco Department of Public Health
Business Associate Agreement

Privacy Rule or the HITECH Act if so disclosed by CE. However, BA may disclose Protected Information as necessary (i) for the proper management and administration of BA; (ii) to carry out the legal responsibilities of BA; (iii) as required by law; or (iv) for Data Aggregation purposes relating to the Health Care Operations of CE. If BA discloses Protected Information to a third party, BA must obtain, prior to making any such disclosure, (i) reasonable written assurances from such third party that such Protected Information will be held confidential as provided pursuant to this BAA and used or disclosed only as required by law or for the purposes for which it was disclosed to such third party, and (ii) a written agreement from such third party to immediately notify BA of any breaches, security incidents, or unauthorized uses or disclosures of the Protected Information in accordance with paragraph 2 (n) of this BAA, to the extent it has obtained knowledge of such occurrences [42 U.S.C. Section 17932; 45 C.F.R. Section 164.504(e)]. BA may disclose PHI to a BA that is a subcontractor and may allow the subcontractor to create, receive, maintain, or transmit Protected Information on its behalf, if the BA obtains satisfactory assurances, in accordance with 45 C.F.R. Section 164.504(e)(1), that the subcontractor will appropriately safeguard the information [45 C.F.R. Section 164.502(e)(1)(ii)].

e. Prohibited Uses and Disclosures. BA shall not use or disclose Protected Information other than as permitted or required by the Agreement and BAA, or as required by law. BA shall not use or disclose Protected Information for fundraising or marketing purposes. BA shall not disclose Protected Information to a health plan for payment or health care operations purposes if the patient has requested this special restriction, and has paid out of pocket in full for the health care item or service to which the Protected Information solely relates [42 U.S.C. Section 17935(a) and 45 C.F.R. Section 164.522(a)(1)(vi)]. BA shall not directly or indirectly receive remuneration in exchange for Protected Information, except with the prior written consent of CE and as permitted by the HITECH Act, 42 U.S.C. Section 17935(d)(2), and the HIPAA regulations, 45 C.F.R. Section 164.502(a)(5)(ii); however, this prohibition shall not affect payment by CE to BA for services provided pursuant to the Agreement.

f. Appropriate Safeguards. BA shall take the appropriate security measures to protect the confidentiality, integrity and availability of PHI that it creates, receives, maintains, or transmits on behalf of the CE, and shall prevent any use or disclosure of PHI other than as permitted by the Agreement or this BAA, including, but not limited to, administrative, physical and technical safeguards in accordance with the Security Rule, including, but not limited to, 45 C.F.R. Sections 164.306, 164.308, 164.310, 164.312, 164.314, 164.316, and 164.504(e)(2)(ii)(B). BA shall comply with the policies and procedures and documentation requirements of the Security Rule, including, but not limited to, 45 C.F.R. Section 164.316, and 42 U.S.C. Section 17931. BA is responsible for any civil penalties assessed due to an audit or investigation of BA, in accordance with 42 U.S.C. Section 17934(c).

g. Business Associate's Subcontractors and Agents. BA shall ensure that any agents and subcontractors that create, receive, maintain or transmit Protected Information on behalf of BA, agree in writing to the same restrictions and conditions that apply to BA with respect to such PHI and implement the safeguards required by paragraph 2.f. above with respect to Electronic PHI [45 C.F.R. Section 164.504(e)(2) through (e)(5); 45 C.F.R. Section 164.308(b)]. BA shall mitigate the effects of any such violation.

h. Accounting of Disclosures. Within ten (10) calendar days of a request by CE for an accounting of disclosures of Protected Information or upon any disclosure of Protected Information for which CE is required to account to an individual, BA and its agents and subcontractors shall make available to CE the information required to



San Francisco Department of Public Health

Business Associate Agreement

provide an accounting of disclosures to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.528, and the HITECH Act, including but not limited to 42 U.S.C. Section 17935 (c), as determined by CE. BA agrees to implement a process that allows for an accounting to be collected and maintained by BA and its agents and subcontractors for at least seven (7) years prior to the request. However, accounting of disclosures from an Electronic Health Record for treatment, payment or health care operations purposes are required to be collected and maintained for only three (3) years prior to the request, and only to the extent that BA maintains an Electronic Health Record. At a minimum, the information collected and maintained shall include: (i) the date of disclosure; (ii) the name of the entity or person who received Protected Information and, if known, the address of the entity or person; (iii) a brief description of Protected Information disclosed; and (iv) a brief statement of purpose of the disclosure that reasonably informs the individual of the basis for the disclosure, or a copy of the individual's authorization, or a copy of the written request for disclosure [45 C.F.R. 164.528(b)(2)]. If an individual or an individual's representative submits a request for an accounting directly to BA or its agents or subcontractors, BA shall forward the request to CE in writing within five (5) calendar days.

i. Access to Protected Information. BA shall make Protected Information maintained by BA or its agents or subcontractors in Designated Record Sets available to CE for inspection and copying within (5) days of request by CE to enable CE to fulfill its obligations under state law [Health and Safety Code Section 123110] and the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.524 [45 C.F.R. Section 164.504(e)(2)(ii)(E)]. If BA maintains Protected Information in electronic format, BA shall provide such information in electronic format as necessary to enable CE to fulfill its obligations under the HITECH Act and HIPAA Regulations, including, but not limited to, 42 U.S.C. Section 17935(e) and 45 C.F.R. 164.524.

j. Amendment of Protected Information. Within ten (10) days of a request by CE for an amendment of Protected Information or a record about an individual contained in a Designated Record Set, BA and its agents and subcontractors shall make such Protected Information available to CE for amendment and incorporate any such amendment or other documentation to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.526. If an individual requests an amendment of Protected Information directly from BA or its agents or subcontractors, BA must notify CE in writing within five (5) days of the request and of any approval or denial of amendment of Protected Information maintained by BA or its agents or subcontractors [45 C.F.R. Section 164.504(e)(2)(ii)(F)].

k. Governmental Access to Records. BA shall make its internal practices, books and records relating to the use and disclosure of Protected Information available to CE and to the Secretary of the U.S. Department of Health and Human Services (the "Secretary") for purposes of determining BA's compliance with HIPAA [45 C.F.R. Section 164.504(e)(2)(ii)(I)]. BA shall provide CE a copy of any Protected Information and other documents and records that BA provides to the Secretary concurrently with providing such Protected Information to the Secretary.

l. Minimum Necessary. BA, its agents and subcontractors shall request, use and disclose only the minimum amount of Protected Information necessary to accomplish the intended purpose of such use, disclosure, or request. [42 U.S.C. Section 17935(b); 45 C.F.R. Section 164.514(d)]. BA understands and agrees that the definition of "minimum necessary" is in flux and shall keep itself informed of guidance issued by the Secretary with respect to



San Francisco Department of Public Health
Business Associate Agreement

what constitutes "minimum necessary" to accomplish the intended purpose in accordance with HIPAA and HIPAA Regulations.

m. Data Ownership. BA acknowledges that BA has no ownership rights with respect to the Protected Information.

n. Notification of Breach. BA shall notify CE within 5 calendar days of any breach of Protected Information; any use or disclosure of Protected Information not permitted by the BAA; any Security Incident (except as otherwise provided below) related to Protected Information, and any use or disclosure of data in violation of any applicable federal or state laws by BA or its agents or subcontractors. The notification shall include, to the extent possible, the identification of each individual whose unsecured Protected Information has been, or is reasonably believed by the BA to have been, accessed, acquired, used, or disclosed, as well as any other available information that CE is required to include in notification to the individual, the media, the Secretary, and any other entity under the Breach Notification Rule and any other applicable state or federal laws, including, but not limited, to 45 C.F.R. Section 164.404 through 45 C.F.R. Section 164.408, at the time of the notification required by this paragraph or promptly thereafter as information becomes available. BA shall take (i) prompt corrective action to cure any deficiencies and (ii) any action pertaining to unauthorized uses or disclosures required by applicable federal and state laws. [42 U.S.C. Section 17921; 42 U.S.C. Section 17932; 45 C.F.R. 164.410; 45 C.F.R. Section 164.504(e)(2)(ii)(C); 45 C.F.R. Section 164.308(b)]

o. Breach Pattern or Practice by Business Associate's Subcontractors and Agents. Pursuant to 42 U.S.C. Section 17934(b) and 45 C.F.R. Section 164.504(e)(1)(iii), if the BA knows of a pattern of activity or practice of a subcontractor or agent that constitutes a material breach or violation of the subcontractor or agent's obligations under the Contract or this BAA, the BA must take reasonable steps to cure the breach or end the violation. If the steps are unsuccessful, the BA must terminate the contractual arrangement with its subcontractor or agent, if feasible. BA shall provide written notice to CE of any pattern of activity or practice of a subcontractor or agent that BA believes constitutes a material breach or violation of the subcontractor or agent's obligations under the Contract or this BAA within five (5) calendar days of discovery and shall meet with CE to discuss and attempt to resolve the problem as one of the reasonable steps to cure the breach or end the violation.

3. Termination.

a. Material Breach. A breach by BA of any provision of this BAA, as determined by CE, shall constitute a material breach of the Agreement and this BAA and shall provide grounds for immediate termination of the Agreement and this BAA, any provision in the AGREEMENT to the contrary notwithstanding. [45 C.F.R. Section 164.504(e)(2)(iii).]

b. Judicial or Administrative Proceedings. CE may terminate the Agreement and this BAA, effective immediately, if (i) BA is named as defendant in a criminal proceeding for a violation of HIPAA, the HITECH Act, the HIPAA Regulations or other security or privacy laws or (ii) a finding or stipulation that the BA has violated any standard or requirement of HIPAA, the HITECH Act, the HIPAA Regulations or other security or privacy laws is made in any administrative or civil proceeding in which the party has been joined.



San Francisco Department of Public Health

Business Associate Agreement

c. **Effect of Termination.** Upon termination of the Agreement and this BAA for any reason, BA shall, at the option of CE, return or destroy all Protected Information that BA and its agents and subcontractors still maintain in any form, and shall retain no copies of such Protected Information. If return or destruction is not feasible, as determined by CE, BA shall continue to extend the protections and satisfy the obligations of Section 2 of this BAA to such information, and limit further use and disclosure of such PHI to those purposes that make the return or destruction of the information infeasible [45 C.F.R. Section 164.504(e)(2)(ii)(J)]. If CE elects destruction of the PHI, BA shall certify in writing to CE that such PHI has been destroyed in accordance with the Secretary's guidance regarding proper destruction of PHI.

d. **Civil and Criminal Penalties.** BA understands and agrees that it is subject to civil or criminal penalties applicable to BA for unauthorized use, access or disclosure of Protected Information in accordance with the HIPAA Regulations and the HITECH Act including, but not limited to, 42 U.S.C. 17934 (c).

e. **Disclaimer.** CE makes no warranty or representation that compliance by BA with this BAA, HIPAA, the HITECH Act, or the HIPAA Regulations or corresponding California law provisions will be adequate or satisfactory for BA's own purposes. BA is solely responsible for all decisions made by BA regarding the safeguarding of PHI.

4. Amendment to Comply with Law.

The parties acknowledge that state and federal laws relating to data security and privacy are rapidly evolving and that amendment of the Agreement or this BAA may be required to provide for procedures to ensure compliance with such developments. The parties specifically agree to take such action as is necessary to implement the standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations and other applicable state or federal laws relating to the security or confidentiality of PHI. The parties understand and agree that CE must receive satisfactory written assurance from BA that BA will adequately safeguard all Protected Information. Upon the request of either party, the other party agrees to promptly enter into negotiations concerning the terms of an amendment to this BAA embodying written assurances consistent with the updated standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations or other applicable state or federal laws. CE may terminate the Agreement upon thirty (30) days written notice in the event (i) BA does not promptly enter into negotiations to amend the Agreement or this BAA when requested by CE pursuant to this section or (ii) BA does not enter into an amendment to the Agreement or this BAA providing assurances regarding the safeguarding of PHI that CE, in its sole discretion, deems sufficient to satisfy the standards and requirements of applicable laws.

Reimbursement for Fines or Penalties.

In the event that CE pays a fine to a state or federal regulatory agency, and/or is assessed civil penalties or damages through private rights of action, based on an impermissible access, use or disclosure of PHI by BA or its subcontractors or agents, then BA shall reimburse CE in the amount of such fine or penalties or damages within thirty (30) calendar days from City's written notice to BA of such fines, penalties or damages.

APPENDIX E



**San Francisco Department of Public Health
Business Associate Agreement**

Attachment 1 – SFDPH Privacy Attestation, version 06-07-2017
Attachment 2 – SFDPH Data Security Attestation, version 06-07-2017

**Office of Compliance and Privacy Affairs
San Francisco Department of Public Health
101 Grove Street, Room 330, San Francisco, CA 94102
Email: compliance.privacy@sfdph.org
Hotline (Toll-Free): 1-855-729-6040**

Contractor Name:	Alternative Family Services	Contractor City Vendor ID	0000025708
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PRIVACY ATTESTATION

INSTRUCTIONS: Contractors and Partners who receive or have access to health or medical information or electronic health record systems maintained by SFDPH must complete this form. Retain completed Attestations in your files for a period of 7 years. Be prepared to submit completed attestations, along with evidence related to the following items, if requested to do so by SFDPH.

Exceptions: If you believe that a requirement is Not Applicable to you, see instructions below in Section IV on how to request clarification or obtain an exception.

I. All Contractors.

DOES YOUR ORGANIZATION...					Yes	No*
A	Have formal Privacy Policies that comply with the Health Insurance Portability and Accountability Act (HIPAA)?					
B	Have a Privacy Officer or other individual designated as the person in charge of investigating privacy breaches or related incidents?					
	If yes:	Name & Title:	Phone #	Email:		
C	Require health information Privacy Training upon hire and annually thereafter for all employees who have access to health information? [Retain documentation of trainings for a period of 7 years.] [SFDPH privacy training materials are available for use; contact OCPA at 1-855-729-6040.]					
D	Have proof that employees have signed a form upon hire and annually thereafter, with their name and the date, acknowledging that they have received health information privacy training? [Retain documentation of acknowledgement of trainings for a period of 7 years.]					
E	Have (or will have if/when applicable) Business Associate Agreements with subcontractors who create, receive, maintain, transmit, or access SFDPH's health information?					
F	Assure that staff who create, or transfer health information (via laptop, USB/thumb-drive, handheld), have prior supervisorial authorization to do so AND that health information is only transferred or created on encrypted devices approved by SFDPH Information Security staff?					

II. Contractors who serve patients/clients and have access to SFDPH PHI, must also complete this section.

If Applicable: DOES YOUR ORGANIZATION...					Yes	No*
G	Have (or will have if/when applicable) evidence that SFDPH Service Desk (628-206-SERV) was notified to de-provision employees who have access to SFDPH health information record systems within 2 business days for regular terminations and within 24 hours for terminations due to cause?					
H	Have evidence in each patient's / client's chart or electronic file that a <u>Privacy Notice</u> that meets HIPAA regulations was provided in the patient's / client's preferred language? (English, Cantonese, Vietnamese, Tagalog, Spanish, Russian forms may be required and are available from SFDPH.)					
I	Visibly post the Summary of the Notice of Privacy Practices in all six languages in common patient areas of your treatment facility?					
J	Document each disclosure of a patient's/client's health information for purposes <u>other than</u> treatment, payment, or operations?					
K	When required by law, have proof that signed authorization for disclosure forms (that meet the requirements of the HIPAA Privacy Rule) are obtained PRIOR to releasing a patient's/client's health information?					

III. ATTEST: Under penalty of perjury, I hereby attest that to the best of my knowledge the information herein is true and correct and that I have authority to sign on behalf of and bind Contractor listed above.

ATTESTED by Privacy Officer or designated person	Name: (print)	Signature	Date
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IV. *EXCEPTIONS: If you have answered "NO" to any question or believe a question is Not Applicable, please contact OCPA at 1-855-729-6040 or compliance.privacy@sfdph.org for a consultation. All "No" or "N/A" answers must be reviewed and approved by OCPA below.

EXCEPTION(S) APPROVED by OCPA	Name (print)	Signature	Date
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Contractor Name:	Alternative Family Services	Contractor City Vendor ID	0000025708
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DATA SECURITY ATTESTATION

INSTRUCTIONS: Contractors and Partners who receive or have access to health or medical information or electronic health record systems maintained by SFPDH must complete this form. Retain completed Attestations in your files for a period of 7 years. Be prepared to submit completed attestations, along with evidence related to the following items, if requested to do so by SFPDH.

Exceptions: If you believe that a requirement is Not Applicable to you, see instructions in Section III below on how to request clarification or obtain an exception.

I. All Contractors.

DOES YOUR ORGANIZATION...		Yes	No*
A	Conduct assessments/audits of your data security safeguards to demonstrate and document compliance with your security policies and the requirements of HIPAA/HITECH at least every two years? [Retain documentation for a period of 7 years]		
B	Use findings from the assessments/audits to identify and mitigate known risks into documented remediation plans?		
	Date of last Data Security Risk Assessment/Audit:		
	Name of firm or person(s) who performed the Assessment/Audit and/or authored the final report:		
C	Have a formal Data Security Awareness Program?		
D	Have formal Data Security Policies and Procedures to detect, contain, and correct security violations that comply with the Health Insurance Portability and Accountability Act (HIPAA) and the Health Information Technology for Economic and Clinical Health Act (HITECH)?		
E	Have a Data Security Officer or other individual designated as the person in charge of ensuring the security of confidential information?		
	If yes: Name & Title: Phone # Email:		
F	Require Data Security Training upon hire and annually thereafter for all employees who have access to health information? [Retain documentation of trainings for a period of 7 years.] [SFPDH data security training materials are available for use; contact OCPA at 1-855-729-6040.]		
G	Have proof that employees have signed a form upon hire and annually, or regularly, thereafter, with their name and the date, acknowledging that they have received data security training? [Retain documentation of acknowledgement of trainings for a period of 7 years.]		
H	Have (or will have if/when applicable) Business Associate Agreements with subcontractors who create, receive, maintain, transmit, or access SFPDH's health information?		
I	Have (or will have if/when applicable) a diagram of how SFPDH data flows between your organization and subcontractors or vendors (including named users, access methods, on-premise data hosts, processing systems, etc.)?		

II. ATTEST: Under penalty of perjury, I hereby attest that to the best of my knowledge the information herein is true and correct and that I have authority to sign on behalf of and bind Contractor listed above.

ATTESTED by Data Security Officer or designated person	Name: (print)	Signature	Date
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III. *EXCEPTIONS: If you have answered "NO" to any question or believe a question is Not Applicable, please contact OCPA at 1-855-729-6040 or compliance.privacy@sfdph.org for a consultation. All "No" or "N/A" answers must be reviewed and approved by OCPA below.

EXCEPTION(S) APPROVED by OCPA	Name (print)	Signature	Date
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**Appendix F
Invoice**

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
FEE FOR SERVICE STATEMENT OF DELIVERABLES AND INVOICE**

Appendix F
PAGE A

Control Number

Contractor: **Alternative Family Services, Inc.**

Address: 1421 Guerneville Road, Suite 218, Santa Rosa, CA 95403

Tel. No.: (707) 576-7700

Funding Term: 07/01/2018 - 06/30/2019

PHP Division: Behavioral Health Services

INVOICE NUMBER: M11 JL 18

Ct.Blanket No.: BPHM TBD

User Cd

Ct. PO No.: POHM TBD

Fund Source: MH CYF Fed/ State/ MH WO HS A

Invoice Period : July 2018

Final Invoice: (Check if Yes)

ACE Control Number:

Unduplicated Clients for Exhibit:	Total Contracted Exhibit UDC	Delivered THIS PERIOD Exhibit UDC	Delivered to Date Exhibit UDC	% of TOTAL Exhibit UDC	Remaining Deliverables Exhibit UDC
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*Unduplicated Counts for AIDS Use Only.

DELIVERABLES Program Name/Reptg. Unit Modality/Mode # - Svc Func (MH Only)	Total Contracted		Delivered THIS PERIOD		Unit Rate	AMOUNT DUE	Delivered to Date		% of TOTAL		Remaining Deliverables	
	UOS	CLIENTS	UOS	CLIENTS			UOS	CLIENTS	UOS	CLIENTS	UOS	CLIENTS
B-1 Outpatient Services PC# - 38GSOP (HMHMCP751594) (HSA/M-CHM/TCHWO)												
15/ 10 - 57 MH Svcs	149,018				\$ 2.88	\$ -	0.000		0.00%		149,018.000	
15/ 01 - 09 Case Mgt Brokerage	744,306				\$ 2.23	\$ -	0.000		0.00%		744,306.000	
TOTAL	893,324		0.000				0.000		0.00%		893,324.000	
	Budget Amount				\$ 2,215,404.00			Expenses To Date	% of Budget		Remaining Budget	
								\$ -	0.00%		\$ 2,215,404.00	
SUBTOTAL AMOUNT DUE						\$ -	NOTES:					
Less: Initial Payment Recovery							WO HSA-GF - 251962-10002-10001803-0006 - \$126,512.00					
(For DPH Use) Other Adjustments							MH GF - 251962-10000-10001670-0001 - \$2,088,892.00					
NET REIMBURSEMENT						\$ -						

\$ 429,171.84
1,659,802.38

\$ 2,088,974.22

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____

Date: _____

Title: _____

Send to:
Behavioral Health Services-Budget/ Invoice Analyst
1380 Howard St., 4th Floor
San Francisco, CA 94103

DPH Authorization for Payment

Authorized Signatory

Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
FEE FOR SERVICE STATEMENT OF DELIVERABLES AND INVOICE**

Appendix F
PAGE A

Control Number

Contractor: Alternative Family Services, Inc.

Address: 1421 Guerneville Road, Suite 218, Santa Rosa, CA 95403

Tel. No.: (707) 576-7700

Funding Term: 07/01/2018 - 06/30/2019

PHP Division: Behavioral Health Services

INVOICE NUMBER: M12 JL 18

Ct.Blanket No.: BPHM TBD

Cl. PO No.: POHM TBD

Fund Source: MH CYF County General Fund

Invoice Period: July 2018

Final Invoice: (Check if Yes)

ACE Control Number:

Unduplicated Clients for Exhibit:	Total Contracted Exhibit UDC	Delivered THIS PERIOD Exhibit UDC	Delivered to Date Exhibit UDC	% of TOTAL Exhibit UDC	Remaining Deliverables Exhibit UDC
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*Unduplicated Counts for AIDS Use Only.

DELIVERABLES Program Name/Reptg. Unit Modality/Mode # - Svc Func (MH Only)	Total Contracted		Delivered THIS PERIOD		Unit Rate	AMOUNT DUE	Delivered to Date		% of TOTAL		Remaining Deliverables	
	UOS	CLIENTS	UOS	CLIENTS			UOS	CLIENTS	UOS	CLIENTS	UOS	CLIENTS
B-1 Outpatient Services PC# - 38GSOP (HMHMCP761594) 251962-10000-10001670-0021												
45/ 20 - 29 Mode 45 Fee for Service	86,689				\$ 2.88	\$ -	0.000		0.00%		86,689.000	
TOTAL	86,689		0.000				0.000		0.00%		86,689.000	
Budget Amount					\$ 249,994.00		Expenses To Date		% of Budget		Remaining Budget	
							\$ -		0.00%		\$ 249,994.00	

\$ 249,614.32

\$ 249,634.32

SUBTOTAL AMOUNT DUE \$ -
 Less: Initial Payment Recovery
 (For DPH Use) Other Adjustments
NET REIMBURSEMENT \$ -

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____
 Title: _____

Date: _____

Send to:
 Behavioral Health Services-Budget/ Invoice Analyst
 1380 Howard St., 4th Floor
 San Francisco, CA 94103

DPH Authorization for Payment

 Authorized Signatory

 Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
 FEE FOR SERVICE STATEMENT OF DELIVERABLES AND INVOICE**

Appendix F
 PAGE A

Control Number

Contractor: Alternative Family Services, Inc.

Address: 1421 Guerneville Road, Suite 218, Santa Rosa, CA 95403

Tel. No.: (707) 576-7700

Funding Term: 07/01/2018 - 06/30/2019

PHP Division: Behavioral Health Services

INVOICE NUMBER: M13 JL 18

Cl.Blanket No.: BPHM TBD

Cl. PO No.: POHM TBD

Fund Source: MH WO HSA CWS/ CY County GF

Invoice Period: July 2018

Final Invoice: (Check if Yes)

ACE Control Number:

Unduplicated Clients for Exhibit:	Total Contracted Exhibit UDC	Delivered THIS PERIOD Exhibit UDC	Delivered to Date Exhibit UDC	% of TOTAL Exhibit UDC	Remaining Deliverables Exhibit UDC

*Unduplicated Counts for AIDS Use Only.

DELIVERABLES Program Name/Reptg. Unit Modality/Mode # - Svc Func (M+ Only)	Total Contracted		Delivered THIS PERIOD		Unit Rate	AMOUNT DUE	Delivered to Date		% of TOTAL		Remaining Deliverables	
	UOS	CLIENTS	UOS	CLIENTS			UOS	CLIENTS	UOS	CLIENTS	UOS	CLIENTS
B-1 Outpatient Services PC# - 38GSOP (HMHMCP751594) 251962-10000-10001670-0001 45/ 20 - 29 Mode 45 Fee for Service	39,807				\$ 2.88	\$ -	0.000		0.00%		39,807.000	
TOTAL	39,807		0.000				0.000		0.00%		39,807.000	

\$ 114,644.16

\$ 114,644.16

Budget Amount	\$ 114,644.00	Expenses To Date	\$ -	% of Budget	0.00%	Remaining Budget	\$ 114,644.00
SUBTOTAL AMOUNT DUE \$ -		NOTES:					
Less: Initial Payment Recovery		WO HSA-GF - 251962-10002-10001803-0002 - \$107,223.00					
(For DPH Use) Other Adjustments		MH GF CODB - 251962-10000-10001670-0001 - \$7,421.00					
NET REIMBURSEMENT \$ -							

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____
 Title: _____

Send to:
 Behavioral Health Services-Budget/ Invoice Analyst
 1380 Howard St., 4th Floor
 San Francisco, CA 94103

DPH Authorization for Payment

 Authorized Signatory

 Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
FEE FOR SERVICE STATEMENT OF DELIVERABLES AND INVOICE**

Appendix F
PAGE A

Control Number

Contractor: Alternative Family Services, Inc.
Address: 1421 Guerneville Road, Suite 218, Santa Rosa, CA 95403
Tel. No.: (707) 576-7700
Funding Term: 07/01/2018 - 06/30/2019
PHP Division: Behavioral Health Services

INVOICE NUMBER: M16 JL 18
Ct.Blanket No.: BPHM TBD
Ct. PO No.: POHM TBD
Fund Source: WO HSA-CH-CWS Non IVE Overmatch
Invoice Period: July 2018
Final Invoice: (Check if Yes)
ACE Control Number: _____

Unduplicated Clients for Exhibit:	Total Contracted Exhibit UDC	Delivered THIS PERIOD Exhibit UDC	\$0.00 Delivered to Date Exhibit UDC	% of TOTAL Exhibit UDC	Remaining Deliverables Exhibit UDC

DELIVERABLES Program Name/Replg. Unit Modality/Mode # - Svc Func (MH Only)	Total Contracted		Delivered THIS PERIOD		Unit Rate	AMOUNT DUE	Delivered to Date		% of TOTAL		Remaining Deliverables	
	UOS	CLIENTS	UOS	CLIENTS			UOS	CLIENTS	UOS	CLIENTS	UOS	CLIENTS
B-3 Outpatient Services PC# - 38GSOP (HMHMCHCWSNWO) 251962-10002-10001863-0002												
15/ 10 - 57 MH Svcs	7,035				\$ 2.88	\$ -	0.000		0.00%		7,035.000	
TOTAL	7,035		0.000				0.000		0.00%		7,035.000	
	Budget Amount				\$ 28,988.00		Expenses To Date		% of Budget		Remaining Budget	
							\$ -		0.00%		\$ 28,988.00	

SUBTOTAL AMOUNT DUE \$ -
Less: Initial Payment Recovery
(For DPH Use) Other Adjustments
NET REIMBURSEMENT \$ -

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____
Title: _____

Send to:
Behavioral Health Services-Budget/ Invoice Analyst
1380 Howard St., 4th Floor
San Francisco, CA 94103

DPH Authorization for Payment

Authorized Signatory

Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
FEE FOR SERVICE STATEMENT OF DELIVERABLES AND INVOICE**

Appendix F
PAGE A

Control Number

Contractor: Alternative Family Services, Inc.

Address: 1421 Guerneville Road, Suite 218, Santa Rosa, CA 95403

Tel. No.: (707) 576-7700

Funding Term: 07/01/2018 - 06/30/2019

PHP Division: Behavioral Health Services

INVOICE NUMBER: M17 JL 18

Ct.Blanket No.: BPHM TBD

Ct. PO No.: POHM TBD

Fund Source: MH WO HSA CWS Non-IVE/ GF

Invoice Period: July 2018

Final Invoice: (Check if Yes)

ACE Control Number:

Unduplicated Clients for Exhibit:	Total Contracted Exhibit UDC	Delivered THIS PERIOD Exhibit UDC	Delivered to Date Exhibit UDC	% of TOTAL Exhibit UDC	Remaining Deliverables Exhibit UDC
-----------------------------------	------------------------------	-----------------------------------	-------------------------------	------------------------	------------------------------------

*Unduplicated Counts for AIDS Use Only.

DELIVERABLES Program Name/Reptg. Unit Modality/Mode # - Svc Func (MH only)	Total Contracted		Delivered THIS PERIOD		Unit Rate	AMOUNT DUE	Delivered to Date		% of TOTAL		Remaining Deliverables	
	UOS	CLIENTS	UOS	CLIENTS			UOS	CLIENTS	UOS	CLIENTS	UOS	CLIENTS
B-2 Outpatient Services PC# - 38GSOP (HMHMCP751594) 251962-10000-10001670-0001												
45/ 20 - 29 Mode 45 Fee for Service	86,689				\$ 2.88	\$ -	0.000		0.00%		86,689.000	
TOTAL	86,689			0.000			0.000		0.00%		86,689.000	
Budget Amount						\$ 10,990.00						
								Expenses To Date	% of Budget		Remaining Budget	
								\$ -	0.00%		\$ 10,990.00	
								NOTES:				
								SUBTOTAL AMOUNT DUE \$ -				
								Less: Initial Payment Recovery				
								(For DPH Use) Other Adjustments				
								WO HSA-GF - 251962-10002-10001803-0002 - \$10,038.00				
								MH GF CODB - 251962-10000-10001670-0001 - \$952.00				
								NET REIMBURSEMENT \$ -				

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____
Title: _____

Send to:
Behavioral Health Services-Budget/ Invoice Analyst
1380 Howard St., 4th Floor
San Francisco, CA 94103

DPH Authorization for Payment

Authorized Signatory

Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
COST REIMBURSEMENT INVOICE**

Appendix F
PAGE A

Control Number

Contractor: **Alternative Family Services, Inc.**

Address: 1421 Guerneville Road, Suite 218, Santa Rosa, CA 95403

Tel. No.: (707) 576-7700

BHS

Funding Term: 07/01/2018 - 06/30/2019

PHP Division: Community Behavioral Health Services

INVOICE NUMBER: M18 JL 18

Ct.Blanket No.: BPHM TBD
User Cj

Ct. PO No.: POHM TBD

Fund Source: MH WO HSA CWS Non-IVE Overmatch

Invoice Period: July 2018

Final Invoice: _____ (Check if Yes)

ACE Control Number: _____

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
B-1 Outpatient Services PC# - 38GSOP												
60/ 78 SS-Other Non-Medical Client	1,387				-	-	0%	#DIV/0!	1,387	-	100%	#DIV/0!
Support Exp												

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 30,000.00	\$ -	\$ -	0.00%	\$ 30,000.00
Fringe Benefits	\$ 7,800.00	\$ -	\$ -	0.00%	\$ 7,800.00
Total Personnel Expenses	\$ 37,800.00	\$ -	\$ -	0.00%	\$ 37,800.00
Operating Expenses:	\$ -	\$ -	\$ -		
Occupancy	\$ -	\$ -	\$ -	0.00%	\$ -
Materials and Supplies	\$ -	\$ -	\$ -	0.00%	\$ -
General Operating	\$ -	\$ -	\$ -	0.00%	\$ -
Staff Travel	\$ 2,200.00	\$ -	\$ -	0.00%	\$ 2,200.00
Consultant/ Subcontractor	\$ -	\$ -	\$ -	0.00%	\$ -
Other:	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
Total Operating Expenses	\$ 2,200.00	\$ -	\$ -	0.00%	\$ 2,200.00
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
TOTAL DIRECT EXPENSES	\$ 40,000.00	\$ -	\$ -	0.00%	\$ 40,000.00
Indirect Expenses	\$ -	\$ -	\$ -	0.00%	\$ -
TOTAL EXPENSES	\$ 40,000.00	\$ -	\$ -	0.00%	\$ 40,000.00
Less: Initial Payment Recovery					
Other Adjustments (DPH use only)					
REIMBURSEMENT		\$ -			

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____
Printed Name: _____
Title: _____

Date: _____
Phone: _____

Send to:
Behavioral Health Services-Budget/ Invoice Analyst
1380 Howard St., 4th Floor
San Francisco, CA 94103

DPH Authorization for Payment

Authorized Signatory

Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
COST REIMBURSEMENT INVOICE**

Appendix F
PAGE A

Control Number

Contractor: Alternative Family Services, Inc.

Address: 1421 Guerneville Road, Suite 218, Santa Rosa, CA 95403

Tel. No.: (707) 576-7700

BHS

Funding Term: 07/01/2018 - 06/30/2019

PHP Division: Community Behavioral Health Services

INVOICE NUMBER: M19 JL 18
 Ct.Blanket No.: BPHM TBD User Cd _____
 Ct. PO No.: POHM TBD
 Fund Source: MH WO HSA CWS Non-IVE Overmaton
 Invoice Period: July 2018
 Final Invoice: _____ (Check if Yes)
 ACE Control Number: _____

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
B-1 Outpatient Services PC# - 38GSOP - 251962-10002-10001803-0002												
60/ 78 SS-Other Non-Medical Client	1,835				-	-	0%	#DIV/0!	1,835	-	100%	#DIV/0!
Support Exp												

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 56,000.00	\$ -	\$ -	0.00%	\$ 56,000.00
Fringe Benefits	\$ 14,560.00	\$ -	\$ -	0.00%	\$ 14,560.00
Total Personnel Expenses	\$ 70,560.00	\$ -	\$ -	0.00%	\$ 70,560.00
Operating Expenses:	\$ -	\$ -	\$ -		
Occupancy	\$ -	\$ -	\$ -	0.00%	\$ -
Materials and Supplies	\$ -	\$ -	\$ -	0.00%	\$ -
General Operating	\$ -	\$ -	\$ -	0.00%	\$ -
Staff Travel	\$ -	\$ -	\$ -	0.00%	\$ -
Consultant/ Subcontractor	\$ -	\$ -	\$ -	0.00%	\$ -
Other:	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
Total Operating Expenses	\$ -	\$ -	\$ -	0.00%	\$ -
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
TOTAL DIRECT EXPENSES	\$ 70,560.00	\$ -	\$ -	0.00%	\$ 70,560.00
Indirect Expenses	\$ -	\$ -	\$ -	0.00%	\$ -
TOTAL EXPENSES	\$ 70,560.00	\$ -	\$ -	0.00%	\$ 70,560.00

Less: Initial Payment Recovery	
Other Adjustments (DPH use only)	
REIMBURSEMENT	\$ -

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____
 Printed Name: _____
 Title: _____

Date: _____
 Phone: _____

Send to:
 Behavioral Health Services-Budget/ Invoice Analyst
 1380 Howard St., 4th Floor
 San Francisco, CA 94103

DPH Authorization for Payment

 Authorized Signatory

 Date

Appendix G

Reserved

Appendix H

**San Francisco Department of Public Health
Privacy Policy Compliance Standards**

As part of this Agreement, Contractor acknowledges and agrees to comply with the following:

In City's Fiscal Year 2003/04, a DPH Privacy Policy was developed and contractors advised that they would need to comply with this policy as of July 1, 2005.

As of July 1, 2004, contractors were subject to audits to determine their compliance with the DPH Privacy Policy using the six compliance standards listed below. Audit findings and corrective actions identified in City's Fiscal year 2004/05 were to be considered informational, to establish a baseline for the following year.

Beginning in City's Fiscal Year 2005/06, findings of compliance or non-compliance and corrective actions were to be integrated into the contractor's monitoring report.

Item #1: DPH Privacy Policy is integrated in the program's governing policies and procedures regarding patient privacy and confidentiality.

As Measured by: Existence of adopted/approved policy and procedure that abides by the rules outlined in the DPH Privacy Policy

Item #2: All staff who handle patient health information are oriented (new hires) and trained in the program's privacy/confidentiality policies and procedures.

As Measured by: Documentation showing individual was trained exists

Item #3: A Privacy Notice that meets the requirements of the Federal Privacy Rule (HIPAA) is written and provided to all patients/clients served in their threshold and other languages. If document is not available in the patient's/client's relevant language, verbal translation is provided.

As Measured by: Evidence in patient's/client's chart or electronic file that patient was "noticed." (Examples in English, Cantonese, Vietnamese, Tagalog, Spanish, Russian will be provided.)

Item #4: A Summary of the above Privacy Notice is posted and visible in registration and common areas of treatment facility.

As Measured by: Presence and visibility of posting in said areas. (Examples in English, Cantonese, Vietnamese, Tagalog, Spanish, Russian will be provided.)

Item #5: Each disclosure of a patient's/client's health information for purposes other than treatment, payment, or operations is documented.

As Measured by: Documentation exists.

Item #6: Authorization for disclosure of a patient's/client's health information is obtained prior to release (1) to non-treatment providers or (2) from a substance abuse program.

As Measured by: An authorization form that meets the requirements of the Federal Privacy Rule (HIPAA) is available to program staff and, when randomly asked, staff are aware of circumstances when authorization form is needed.

Appendix I

THE DECLARATION OF COMPLIANCE

Each Fiscal Year, CONTRACTOR attests with a Declaration of Compliance that each program site has an Administrative Binder that contains all of the forms, policies, statements, and documentation required by Community Behavioral Health Services (CBHS). The Declaration of Compliance also lists requirements for site postings of public and client information, and client chart compliance if client charts are maintained. CONTRACTOR understands that the Community Programs Business Office of Contract Compliance may visit a program site at any time to ensure compliance with all items of the Declaration of Compliance.

**City and County of San Francisco
Office of Contract Administration
Purchasing Division**

First Amendment

THIS AMENDMENT (this “Amendment”) is made as of **February 1, 2021** in San Francisco, California, by and between **Alternative Family Services, Inc** (“Contractor”) and the **City and County of San Francisco**, a municipal corporation (“City”), acting by and through its Director of the Office of Contract Administration.

Recitals

WHEREAS, City and Contractor have entered into the Agreement (as defined below); and

WHEREAS, City and Contractor desire to modify the Agreement on the terms and conditions set forth herein to extend the contract term, increase the contract amount and update standard contractual clauses; and

WHEREAS, the Agreement was competitively procured as required by San Francisco Administrative Code Chapter 21.1 through Request for Proposals (“RFP”), RFP 33-2016 issued on 11/2/16 and RFP 1-2017 issued on 3/24/17, and this modification is consistent therewith; and

WHEREAS, approval for this Amendment was obtained when the Civil Service Commission approved Contract number 46987-16/17 on August 3, 2020; and.

NOW, THEREFORE, Contractor and the City agree as follows:

Article 1 Definitions

The following definitions shall apply to this Amendment:

1.1 Agreement. The term “Agreement” shall mean the Agreement dated January 1, 2018, (Contract ID# 1000010827) between Contractor and City as amended by this First amendment.

1.2 Other Terms. Terms used and not defined in this Amendment shall have the meanings assigned to such terms in the Agreement.

Article 2 Modifications to the Agreement

The Agreement is hereby modified as follows:

2.1 Definitions. *The following is hereby added to the Agreement as a Definition in Article 1:*

1.10 “Confidential Information” means confidential City information including, but not limited to, personally-identifiable information (“PII”), protected health information (“PHI”), or individual financial information (collectively, “Proprietary or Confidential Information”) that is subject to local, state or federal laws restricting the use and disclosure of such information, including, but not limited to, Article 1, Section 1 of the California Constitution; the California Information Practices Act (Civil Code § 1798 et seq.); the California Confidentiality of Medical Information Act (Civil Code § 56 et seq.); the federal Gramm-Leach-Bliley Act (15 U.S.C. §§ 6801(b) and 6805(b)(2)); the privacy and information security aspects of the Administrative Simplification provisions of the federal Health Insurance Portability and Accountability Act (45 CFR Part 160 and Subparts A, C, and E of part 164); and San Francisco Administrative Code Chapter 12M (Chapter 12M).

2.2 Term. *Section 2.1 Term of the Agreement currently reads as follows:*

2.1 The term of this Agreement shall commence on the latter of: (i) July 1, 2018; or (ii) the Effective Date and expire on March 31, 2021, unless earlier terminated as otherwise provided herein.

Such section is hereby amended in its entirety to read as follows:

2.1 The term of this Agreement shall commence on the latter of: (i) July 1, 2018; or (ii) the Effective Date and expire on June 30, 2022, unless earlier terminated as otherwise provided herein.

2.3 Payment. *Section 3.3.1 Payment of the Agreement currently reads as follows:*

3.3.1 Payment. Contractor shall provide an invoice to the City on a monthly basis for Services completed in the immediately preceding month, unless a different schedule is set out in Appendix B, "Calculation of Charges." Compensation shall be made for Services identified in the invoice that the Director of Health, in his or her sole discretion, concludes has been satisfactorily performed. Payment shall be made within 30 calendar days of receipt of the invoice, unless the City notifies the Contractor that a dispute as to the invoice exists. In no event shall the amount of this Agreement exceed **Nine Million Six Hundred Eighty Thousand Two Hundred Eighty Eight Dollars (\$9,680,288)**. The breakdown of charges associated with this Agreement appears in Appendix B, “Calculation of Charge ns,” attached hereto and incorporated by reference as though fully set forth herein. In no event shall City be liable for interest or late charges for any late payments.

Such section is hereby amended in its entirety to read as follows:

3.3.1 Payment. Contractor shall provide an invoice to the City on a monthly basis for Services completed in the immediate preceding month, unless a different schedule is set out in Appendix B, "Calculation of Charges." Compensation shall be made for Services identified in the invoice that the Director of Health, in his or her sole discretion, concludes has been satisfactorily performed. Payment shall be made within 30 calendar days of receipt of the invoice, unless the City notifies the Contractor that a dispute as to the invoice exists. In no event

shall the amount of this Agreement exceed **Nine Million Nine Hundred Ninety Eight Thousand Nine Hundred Six Dollars (\$9,998,906)**. The breakdown of charges associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein. A portion of payment may be withheld until conclusion of the Agreement if agreed to by both parties as retainage, described in Appendix B. In no event shall City be liable for interest or late charges for any late payments.

2.4 Contract Amendments; Budgeting Revisions. *The following is hereby added and incorporated into Article 3 of the Agreement:*

3.7 Contract Amendments; Budgeting Revisions.

3.7.1 Formal Contract Amendment. Contractor shall not be entitled to an increase in the Compensation or an extension of the Term unless the Parties agree to a Formal Amendment in accordance with the San Francisco Administrative Code and Section 11.5 (Modifications of this Agreement).

3.7.2 City Revisions to Program Budgets. The City shall have authority, without the execution of a Formal Amendment, to purchase additional Services and/or make changes to the work in accordance with the terms of this Agreement (including such terms that require Contractor's agreement), not involving an increase in the Compensation or the Term by use of a written City Program Budget Revision.

3.7.13.7.3 City Program Scope Reduction. Given the local emergency, the pandemic, and the City's resulting budgetary position, and in order to preserve the Agreement and enable Contractor to continue to perform work albeit potentially on a reduced basis, the City shall have authority during the Term of the Agreement, without the execution of a Formal Amendment, to reduce scope, temporarily suspend the Agreement work, and/or convert the Term to month-to-month (Program Scope Reduction), by use of a written Revision to Program Budgets, executed by the Director of Health, or his or her designee, and Contractor. Contractor understands and agrees that the City's right to effect a Program Scope Reduction is intended to serve a public purpose and to protect the public fisc and is not intended to cause harm to or penalize Contractor. Contractor provides City with a full and final release of all claims arising from a Program Scope Reduction. Contractor further agrees that it will not sue the City for damages arising directly or indirectly from a City Program Scope Reduction.

2.5 Assignment. *The following is hereby added to Article 4 of the Agreement, replacing the previous Section 4.5 in its entirety:*

4.5 Assignment. The Services to be performed by Contractor are personal in character. Neither this Agreement, nor any duties or obligations hereunder, may be directly or indirectly assigned, novated, hypothecated, transferred, or delegated by Contractor, or, where the Contractor is a joint venture, a joint venture partner, (collectively referred to as an "Assignment") unless first approved by City by written instrument executed and approved in the same manner as this Agreement in accordance with the Administrative Code. The City's approval of any such Assignment is subject to the Contractor demonstrating to City's reasonable satisfaction that the proposed transferee is: (i) reputable and capable, financially and otherwise, of performing each of Contractor's obligations under this Agreement and any other documents to be assigned, (ii) not forbidden by applicable law from transacting business or entering into

contracts with City; and (iii) subject to the jurisdiction of the courts of the State of California. A change of ownership or control of Contractor or a sale or transfer of substantially all of the assets of Contractor shall be deemed an Assignment for purposes of this Agreement. Contractor shall immediately notify City about any Assignment. Any purported Assignment made in violation of this provision shall be null and void.

2.6 Insurance. *The following is hereby added to Article 5 of the Agreement, replacing the previous Section 5.1 in its entirety:*

5.1 Insurance

5.1.1 Required Coverages. Insurance limits are subject to Risk Management review and revision, as appropriate, as conditions warrant. Without in any way limiting Contractor's liability pursuant to the "Indemnification" section of this Agreement, Contractor must maintain in force, during the full term of the Agreement, insurance in the following amounts and coverages:

(a) Workers' Compensation, in statutory amounts, with Employers' Liability Limits not less than \$1,000,000 each accident, injury, or illness; and

(b) Commercial General Liability Insurance with limits not less than \$1,000,000 each occurrence for Bodily Injury and Property Damage, including Contractual Liability, Personal Injury, Products and Completed Operations; policy must include Abuse and Molestation coverage.

(c) Commercial Automobile Liability Insurance with limits not less than \$1,000,000 each occurrence, "Combined Single Limit" for Bodily Injury and Property Damage, including Owned, Non-Owned and Hired auto coverage, as applicable.

(d) Professional Liability Insurance, applicable to Contractor's profession, with limits not less than \$1,000,000 for each claim with respect to negligent acts, errors or omissions in connection with the Services.

(e) Blanket Fidelity Bond or Crime Policy with limits of in the amount of any Initial Payment included under this Agreement covering employee theft of money written with a per loss limit.

(f) Reserved (Technology Errors and Omissions Coverage).

(g) Contractor shall maintain in force during the full life of the agreement Cyber and Privacy Insurance with limits of not less than \$1,000,000 per claim. Such insurance shall include coverage for liability arising from theft, dissemination, and/or use of confidential information, including but not limited to, bank and credit card account information or personal information, such as name, address, social security numbers, protected health information or other personally identifying information, stored or transmitted in any form.

5.1.2 Commercial General Liability and Commercial Automobile Liability Insurance policies must be endorsed to name as Additional Insured the City and County of San Francisco, its Officers, Agents, and Employees.

5.1.3 Contractor's Commercial General Liability and Commercial Automobile Liability Insurance policies shall provide that such policies are primary insurance to any other insurance available to the Additional Insureds, with respect to any claims arising out of this

Agreement, and that the insurance applies separately to each insured against whom claim is made or suit is brought.

5.1.4 All policies shall be endorsed to provide thirty (30) days' advance written notice to the City of cancellation for any reason, intended non-renewal, or reduction in coverages. Notices shall be sent to the City address set forth in Section 11.1, entitled "Notices to the Parties."

5.1.5 Should any of the required insurance be provided under a claims-made form, Contractor shall maintain such coverage continuously throughout the term of this Agreement and, without lapse, for a period of three years beyond the expiration of this Agreement, to the effect that, should occurrences during the contract term give rise to claims made after expiration of the Agreement, such claims shall be covered by such claims-made policies.

5.1.6 Should any of the required insurance be provided under a form of coverage that includes a general annual aggregate limit or provides that claims investigation or legal defense costs be included in such general annual aggregate limit, such general annual aggregate limit shall be double the occurrence or claims limits specified above.

5.1.7 Should any required insurance lapse during the term of this Agreement, requests for payments originating after such lapse shall not be processed until the City receives satisfactory evidence of reinstated coverage as required by this Agreement, effective as of the lapse date. If insurance is not reinstated, the City may, at its sole option, terminate this Agreement effective on the date of such lapse of insurance.

5.1.8 Before commencing any Services, Contractor shall furnish to City certificates of insurance and additional insured policy endorsements with insurers with ratings comparable to A-, VIII or higher, that are authorized to do business in the State of California, and that are satisfactory to City, in form evidencing all coverages set forth above. Approval of the insurance by City shall not relieve or decrease Contractor's liability hereunder.

5.1.9 The Workers' Compensation policy(ies) shall be endorsed with a waiver of subrogation in favor of the City for all work performed by the Contractor, its employees, agents and subcontractors.

5.1.10 If Contractor will use any subcontractor(s) to provide Services, Contractor shall require the subcontractor(s) to provide all necessary insurance and to name the City and County of San Francisco, its officers, agents and employees and the Contractor as additional insureds.

2.7 Indemnification. *The following is hereby added to Article 5 of the Agreement, replacing the previous Section 5.2.1 in its entirety:*

5.2.1 Contractor shall indemnify and hold harmless City and its officers, agents and employees from, and, if requested, shall defend them from and against any and all claims, demands, losses, damages, costs, expenses, and liability (legal, contractual, or otherwise) arising from or in any way connected with any: (i) injury to or death of a person, including employees of City or Contractor; (ii) loss of or damage to property; (iii) violation of local, state, or federal common law, statute or regulation, including but not limited to privacy or personally identifiable information, health information, disability and labor laws or regulations; (iv) strict liability

imposed by any law or regulation; or (v) losses arising from Contractor's execution of subcontracts not in accordance with the requirements of this Agreement applicable to subcontractors; so long as such injury, violation, loss, or strict liability (as set forth in subsections (i) – (v) above) arises directly or indirectly from Contractor's performance of this Agreement, including, but not limited to, Contractor's use of facilities or equipment provided by City or others, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law, and except where such loss, damage, injury, liability or claim is the result of the active negligence or willful misconduct of City and is not contributed to by any act of, or by any omission to perform some duty imposed by law or agreement on Contractor, its subcontractors, or either's agent or employee. Contractor shall also indemnify, defend and hold City harmless from all suits or claims or administrative proceedings for breaches of federal and/or state law regarding the privacy of health information, electronic records or related topics, arising directly or indirectly from Contractor's performance of this Agreement, except where such breach is the result of the active negligence or willful misconduct of City. The foregoing indemnity shall include, without limitation, reasonable fees of attorneys, consultants and experts and related costs and City's costs of investigating any claims against the City.

2.8 **Withholding.** *The following is hereby added to Article 7 of the Agreement:*

7.3 Withholding. Contractor agrees that it is obligated to pay all amounts due to the City under the San Francisco Business and Tax Regulations Code during the term of this Agreement. Pursuant to Section 6.10-2 of the San Francisco Business and Tax Regulations Code, Contractor further acknowledges and agrees that City may withhold any payments due to Contractor under this Agreement if Contractor is delinquent in the payment of any amount required to be paid to the City under the San Francisco Business and Tax Regulations Code. Any payments withheld under this paragraph shall be made to Contractor, without interest, upon Contractor coming back into compliance with its obligations.

2.9 **Consideration of Salary History.** *The following is hereby added to Article 10 of the Agreement, replacing the previous Section 10.4 in its entirety:*

10.4 Consideration of Salary History. Contractor shall comply with San Francisco Administrative Code Chapter 12K, the Consideration of Salary History Ordinance or "Pay Parity Act." Contractor is prohibited from considering current or past salary of an applicant in determining whether to hire the applicant or what salary to offer the applicant to the extent that such applicant is applying for employment to be performed on this Agreement or in furtherance of this Agreement, and whose application, in whole or part, will be solicited, received, processed or considered, whether or not through an interview, in the City or on City property. The ordinance also prohibits employers from (1) asking such applicants about their current or past salary or (2) disclosing a current or former employee's salary history without that employee's authorization unless the salary history is publicly available. Contractor is subject to the enforcement and penalty provisions in Chapter 12K. Information about and the text of Chapter 12K is available on the web at <https://sfgov.org/olse/consideration-salary-history>. Contractor is

required to comply with all of the applicable provisions of 12K, irrespective of the listing of obligations in this Section.

2.10 **Limitations on Contributions.** *The following is hereby added to Article 10 of the Agreement, replacing the previous 10.11 in its entirety:*

10.11 Limitations on Contributions. By executing this Agreement, Contractor acknowledges its obligations under section 1.126 of the City’s Campaign and Governmental Conduct Code, which prohibits any person who contracts with, or is seeking a contract with, any department of the City for the rendition of personal services, for the furnishing of any material, supplies or equipment, for the sale or lease of any land or building, for a grant, loan or loan guarantee, or for a development agreement, from making any campaign contribution to (i) a City elected official if the contract must be approved by that official, a board on which that official serves, or the board of a state agency on which an appointee of that official serves, (ii) a candidate for that City elective office, or (iii) a committee controlled by such elected official or a candidate for that office, at any time from the submission of a proposal for the contract until the later of either the termination of negotiations for such contract or twelve months after the date the City approves the contract. The prohibition on contributions applies to each prospective party to the contract; each member of Contractor’s board of directors; Contractor’s chairperson, chief executive officer, chief financial officer and chief operating officer; any person with an ownership interest of more than 10% in Contractor; any subcontractor listed in the bid or contract; and any committee that is sponsored or controlled by Contractor. Contractor certifies that it has informed each such person of the limitation on contributions imposed by Section 1.126 by the time it submitted a proposal for the contract, and has provided the names of the persons required to be informed to the City department with whom it is contracting.

2.11 **Distribution of Beverages and Water.** *The following is hereby added to Article 10 of the Agreement, replacing the previous Section 10.17 in its entirety:*

10.17 Distribution of Beverages and Water.

10.17.1 **Sugar-Sweetened Beverage Prohibition.** Contractor agrees that it shall not sell, provide, or otherwise distribute Sugar-Sweetened Beverages, as defined by San Francisco Administrative Code Chapter 101, as part of its performance of this Agreement.

10.17.2 **Packaged Water Prohibition.** Contractor agrees that it shall not sell, provide, or otherwise distribute Packaged Water, as defined by San Francisco Environment Code Chapter 24, as part of its performance of this Agreement.

2.12 **Notification of Legal Requests.** *The following is hereby added to Article 11 of the Agreement:*

11.14 Notification of Legal Requests. Contractor shall immediately notify City upon receipt of any subpoenas, service of process, litigation holds, discovery requests and other legal requests (“Legal Requests”) related to all data given to Contractor by City in the performance of this Agreement (“City Data” or “Data”), or which in any way might reasonably require access to

City's Data, and in no event later than 24 hours after it receives the request. Contractor shall not respond to Legal Requests related to City without first notifying City other than to notify the requestor that the information sought is potentially covered under a non-disclosure agreement. Contractor shall retain and preserve City Data in accordance with the City's instruction and requests, including, without limitation, any retention schedules and/or litigation hold orders provided by the City to Contractor, independent of where the City Data is stored.

2.13 Exclusion Lists and Employee Verification. *The following is hereby added to Article 12 of the Agreement:*

12.5 Exclusion Lists and Employee Verification

Upon hire and monthly thereafter, Contractor will check the exclusion lists published by the Office of the Inspector General (OIG), General Services Administration (GSA), and the California Department of Health Care Services (DHCS) to ensure that any employee, temporary employee, volunteer, consultant, or governing body member responsible for oversight, administering or delivering state or federally-funded services who is on any of these lists is excluded from (may not work in) your program or agency. Proof of checking these lists must be retained for seven years.

2.14 Management of City Data and Confidential Information, *The following is hereby added and incorporated into Article 13 of the Agreement:*

13.5 Management of City Data and Confidential Information

13.5.1 Access to City Data. City shall at all times have access to and control of all data given to Contractor by City in the performance of this Agreement ("City Data" or "Data"), and shall be able to retrieve it in a readable format, in electronic form and/or print, at any time, at no additional cost.

13.5.2 Use of City Data and Confidential Information. Contractor agrees to hold City's Confidential Information received from or created on behalf of the City in strictest confidence. Contractor shall not use or disclose City's Data or Confidential Information except as permitted or required by the Agreement or as otherwise authorized in writing by the City. Any work using, or sharing or storage of, City's Confidential Information outside the United States is subject to prior written authorization by the City. Access to City's Confidential Information must be strictly controlled and limited to Contractor's staff assigned to this project on a need-to-know basis only. Contractor is provided a limited non-exclusive license to use the City Data or Confidential Information solely for performing its obligations under the Agreement and not for Contractor's own purposes or later use. Nothing herein shall be construed to confer any license or right to the City Data or Confidential Information, by implication, estoppel or otherwise, under copyright or other intellectual property rights, to any third-party. Unauthorized use of City Data or Confidential Information by Contractor, subcontractors or other third-parties is prohibited. For purpose of this requirement, the phrase "unauthorized use" means the data mining or processing of data, stored or transmitted by the service, for commercial purposes, advertising or advertising-related purposes, or for any purpose other than security or service delivery analysis that is not explicitly authorized.

13.5.3 Disposition of Confidential Information. Upon termination of Agreement or request of City, Contractor shall within forty-eight (48) hours return all Confidential Information which includes all original media. Once Contractor has received written confirmation from City that Confidential Information has been successfully transferred to City, Contractor shall within ten (10) business days purge all Confidential Information from its servers, any hosted environment Contractor has used in performance of this Agreement, work stations that were used to process the data or for production of the data, and any other work files stored by Contractor in whatever medium. Contractor shall provide City with written certification that such purge occurred within five (5) business days of the purge.

The Appendices listed below are Amended as follows:

2.15 Appendices A, A-1 through A-3 dated 2/1/2021 (i.e., February 1, 2021) are hereby added for FY 2020-21.

2.16 Appendices B, B-1 and B-2 dated 2/1/2021 (i.e., February 1, 2021) are hereby added for FY 2020-21.

2.17 Delete Appendix E-HIPAA Business Associate Agreement with Original Agreement and replace in its entirety with Appendix E-HIPAA Business Associate Agreement dated 4/12/18 to Agreement as amended.

2.18 Appendix F: Invoices Templates corresponding with this FY 20-21 First Amendment are hereby added for Fiscal Year 2020-21.

Article 3 Effective Date

Each of the modifications set forth in Section 2 shall be effective on and after the date of this Amendment.

Article 4 Legal Effect

Except as expressly modified by this Amendment, all of the terms and conditions of the Agreement shall remain unchanged and in full force and effect.

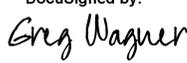
IN WITNESS WHEREOF, the parties hereto have executed this Agreement on the day first mentioned above.

CITY

CONTRACTOR

Recommended by:

Alternative Family Services, Inc

DocuSigned by:

 28527524752949F...

 Grant Colfax, MD
 Director of Health
 Department of Public Health

4/29/2021 | 9:38 AM PDT

Date

DocuSigned by:

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 Jay A. Berlin
 Executive Director
 1421 Guerneville Road, Suite 218
 Santa Rosa, CA 94503

4/28/2021 | 5:27 PM PDT

Date

Approved as to Form:

Dennis J. Herrera
City Attorney

Supplier ID: 00000025708

DocuSigned by:

 05D9A4F256D042E...

 By: Henry Lifton
 Deputy City Attorney

4/29/2021 | 8:54 AM PDT

Date

Approved:

DocuSigned by:

 9AEA44694D514E7...

 Sailaja Kurella
 Acting Director, Office of Contract
 Administration, and Purchaser

4/29/2021 | 10:41 AM PDT

Date

Appendix A Scope of Services – DPH Behavioral Health Services

1. Terms

- | | |
|--|---|
| <ul style="list-style-type: none"> A. Contract Administrator B. Reports C. Evaluation D. Possession of Licenses/Permits E. Adequate Resources F. Admission Policy G. San Francisco Residents Only H. Grievance Procedure I. Infection Control, Health and Safety J. Aerosol Transmissible Disease Program, Health and Safety K. Acknowledgement of Funding L. Client Fees and Third Party Revenue M. DPH Behavioral Health (BHS) Electronic Health Records (EHR) System | <ul style="list-style-type: none"> N. Patients' Rights O. Under-Utilization Reports P. Quality Improvement Q. Working Trial Balance with Year-End Cost Report R. Harm Reduction S. Compliance with Behavioral Health Services Policies and Procedures T. Fire Clearance U. Clinics to Remain Open V. Compliance with Grant Award Notices |
|--|---|

- 2. Description of Services
- 3. Services Provided by Attorneys

1. Terms

A. Contract Administrator:

In performing the Services hereunder, Contractor shall report to **Valerie Wiggins**, Contract Administrator for the City, or his / her designee.

B. Reports:

Contractor shall submit written reports as requested by the City. The format for the content of such reports shall be determined by the City. The timely submission of all reports is a necessary and material term and condition of this Agreement. All reports, including any copies, shall be submitted on recycled paper and printed on double-sided pages to the maximum extent possible.

C. Evaluation:

Contractor shall participate as requested with the City, State and/or Federal government in evaluative studies designed to show the effectiveness of Contractor's Services. Contractor agrees to meet the requirements of and participate in the evaluation program and management information systems of the City. The City agrees that any final written reports generated through the evaluation program shall be made available to Contractor within thirty (30) working days. Contractor may submit a written response within thirty working days of receipt of any evaluation report and such response will become part of the official report.

D. Possession of Licenses/Permits:

Contractor warrants the possession of all licenses and/or permits required by the laws and regulations of the United States, the State of California, and the City to provide the Services. Failure to maintain these licenses and permits shall constitute a material breach of this Agreement.

E. Adequate Resources:

Contractor agrees that it has secured or shall secure at its own expense all persons, employees and equipment required to perform the Services required under this Agreement, and that all such Services shall be performed by Contractor, or under Contractor's supervision, by persons authorized by law to perform such Services.

F. Admission Policy:

Admission policies for the Services shall be in writing and available to the public. Except to the extent that the Services are to be rendered to a specific population as described in the programs listed in Section 2 of Appendix A, such policies must include a provision that clients are accepted for care without discrimination on the basis of race, color, creed, religion, sex, age, national origin, ancestry, sexual orientation, gender identification, disability, or AIDS/HIV status.

G. San Francisco Residents Only:

Only San Francisco residents shall be treated under the terms of this Agreement. Exceptions must have the written approval of the Contract Administrator.

H. Grievance Procedure:

Contractor agrees to establish and maintain a written Client Grievance Procedure which shall include the following elements as well as others that may be appropriate to the Services: (1) the name or title of the person or persons authorized to make a determination regarding the grievance; (2) the opportunity for the aggrieved party to discuss the grievance with those who will be making the determination; and (3) the right of a client dissatisfied with the decision to ask for a review and recommendation from the community advisory board or planning council that has purview over the aggrieved service. Contractor shall provide a copy of this procedure, and any amendments thereto, to each client and to the Director of Public Health or his/her designated agent (hereinafter referred to as "DIRECTOR"). Those clients who do not receive direct Services will be provided a copy of this procedure upon request.

I. Infection Control, Health and Safety:

(1) Contractor must have a Bloodborne Pathogen (BBP) Exposure Control plan as defined in the California Code of Regulations, Title 8, Section 5193, Bloodborne Pathogens (<http://www.dir.ca.gov/title8/5193.html>), and demonstrate compliance with all requirements including, but not limited to, exposure determination, training, immunization, use of personal protective equipment and safe needle devices, maintenance of a sharps injury log, post-exposure medical evaluations, and recordkeeping.

(2) Contractor must demonstrate personnel policies/procedures for protection of staff and clients from other communicable diseases prevalent in the population served. Such policies and procedures shall include, but not be limited to, work practices, personal protective equipment, staff/client Tuberculosis (TB) surveillance, training, etc.

(3) Contractor must demonstrate personnel policies/procedures for Tuberculosis (TB) exposure control consistent with the Centers for Disease Control and Prevention (CDC) recommendations for health care facilities and based on the Francis J. Curry National Tuberculosis Center: Template for Clinic Settings, as appropriate.

(4) Contractor is responsible for site conditions, equipment, health and safety of their employees, and all other persons who work or visit the job site.

(5) Contractor shall assume liability for any and all work-related injuries/illnesses including infectious exposures such as BBP and TB and demonstrate appropriate policies and procedures for reporting such events and providing appropriate post-exposure medical management as required by State workers' compensation laws and regulations.

(6) Contractor shall comply with all applicable Cal-OSHA standards including maintenance of the OSHA 300 Log of Work-Related Injuries and Illnesses.

(7) Contractor assumes responsibility for procuring all medical equipment and supplies for use by their staff, including safe needle devices, and provides and documents all appropriate training.

(8) Contractor shall demonstrate compliance with all state and local regulations with regard to handling and disposing of medical waste.

J. Aerosol Transmissible Disease Program, Health and Safety:

(1) Contractor must have an Aerosol Transmissible Disease (ATD) Program as defined in the California Code of Regulations, Title 8, Section 5199, Aerosol Transmissible Diseases (<http://www.dir.ca.gov/Title8/5199.html>), and demonstrate compliance with all requirements including, but not limited to, exposure determination, screening procedures, source control measures, use of personal protective equipment, referral procedures, training, immunization, post-exposure medical evaluations/follow-up, and recordkeeping.

(2) Contractor shall assume liability for any and all work-related injuries/illnesses including infectious exposures such as Aerosol Transmissible Disease and demonstrate appropriate policies and procedures for reporting such events and providing appropriate post-exposure medical management as required by State workers' compensation laws and regulations.

(3) Contractor shall comply with all applicable Cal-OSHA standards including maintenance of the OSHA 300 Log of Work-Related Injuries and Illnesses.

(4) Contractor assumes responsibility for procuring all medical equipment and supplies for use by their staff, including Personnel Protective Equipment such as respirators, and provides and documents all appropriate training.

K. Acknowledgment of Funding:

Contractor agrees to acknowledge the San Francisco Department of Public Health in any printed material or public announcement describing the San Francisco Department of Public Health-funded Services. Such documents or announcements shall contain a credit substantially as follows: "This program/service/activity/research project was funded through the Department of Public Health, City and County of San Francisco."

L. Client Fees and Third Party Revenue:

(1) Fees required by Federal, state or City laws or regulations to be billed to the client, client's family, Medicare or insurance company, shall be determined in accordance with the client's ability to pay and in conformance with all applicable laws. Such fees shall approximate actual cost. No additional fees may be charged to the client or the client's family for the Services. Inability to pay shall not be the basis for denial of any Services provided under this Agreement.

(2) Contractor agrees that revenues or fees received by Contractor related to Services performed and materials developed or distributed with funding under this Agreement shall be used to increase the gross program funding such that a greater number of persons may receive Services. Accordingly, these revenues and fees shall not be deducted by Contractor from its billing to the City, but will be settled during the provider's settlement process.

M. DPH Behavioral Health Services (BHS) Electronic Health Records (EHR) System

Treatment Service Providers use the BHS Electronic Health Records System and follow data reporting procedures set forth by SFDPH Information Technology (IT), BHS Quality Management and BHS Program Administration.

N. Patients' Rights:

All applicable Patients' Rights laws and procedures shall be implemented.

O. Under-Utilization Reports:

For any quarter that CONTRACTOR maintains less than ninety percent (90%) of the total agreed upon units of service for any mode of service hereunder, CONTRACTOR shall immediately notify the Contract Administrator in writing and shall specify the number of underutilized units of service.

P. Quality Improvement:

CONTRACTOR agrees to develop and implement a Quality Improvement Plan based on internal standards established by CONTRACTOR applicable to the SERVICES as follows:

- (1) Staff evaluations completed on an annual basis.
- (2) Personnel policies and procedures in place, reviewed and updated annually.
- (3) Board Review of Quality Improvement Plan.

Q. Working Trial Balance with Year-End Cost Report

If CONTRACTOR is a Non-Hospital Provider as defined in the State of California Department of Mental Health Cost Reporting Data Collection Manual, it agrees to submit a working trial balance with the year-end cost report.

R. Harm Reduction

The program has a written internal Harm Reduction Policy that includes the guiding principles per Resolution # 10-00 810611 of the San Francisco Department of Public Health Commission.

S. Compliance with Behavioral Health Services Policies and Procedures

In the provision of SERVICES under BHS contracts, CONTRACTOR shall follow all applicable policies and procedures established for contractors by BHS, as applicable, and shall keep itself duly informed of such policies. Lack of knowledge of such policies and procedures shall not be an allowable reason for noncompliance.

T. Fire Clearance

Space owned, leased or operated by San Francisco Department of Public Health **providers**, including satellite sites, and used by CLIENTS or STAFF **shall** meet local fire codes. Providers shall undergo of fire safety inspections at least every three (3) years and documentation of fire safety, or corrections of any deficiencies, shall be made available to reviewers upon request.”

U. Clinics to Remain Open:

Outpatient clinics are part of the San Francisco Department of Public Health Community Behavioral Health Services (CBHS) Mental Health Services public safety net; as such, these clinics are to remain open to referrals from the CBHS Behavioral Health Access Center (BHAC), to individuals requesting services from the clinic directly, and to individuals being referred from institutional care. Clinics serving children, including comprehensive clinics, shall remain open to referrals from the 3632 unit and the Foster Care unit. Remaining open shall be in force for the duration of this Agreement. Payment for SERVICES provided under this Agreement may be withheld if an outpatient clinic does not remain open.

Remaining open shall include offering individuals being referred or requesting SERVICES appointments within 24-48 hours (1-2 working days) for the purpose of assessment and disposition/treatment planning, and for arranging appropriate dispositions.

In the event that the CONTRACTOR, following completion of an assessment, determines that it cannot provide treatment to a client meeting medical necessity criteria, CONTRACTOR shall be responsible for the client until CONTRACTOR is able to secure appropriate services for the client.

CONTRACTOR acknowledges its understanding that failure to provide SERVICES in full as specified in Appendix A of this Agreement may result in immediate or future disallowance of payment for such SERVICES, in full or in part, and may also result in CONTRACTOR'S default or in termination of this Agreement.

V. Compliance with Grant Award Notices:

Contractor recognizes that funding for this Agreement may be provided to the City through federal, State or private grant funds. Contractor agrees to comply with the provisions of the City's agreements with said funding sources, which agreements are incorporated by reference as though fully set forth.

Contractor agrees that funds received by Contractor from a source other than the City to defray any portion of the reimbursable costs allowable under this Agreement shall be reported to the City and deducted by Contractor from its billings to the City to ensure that no portion of the City's reimbursement to Contractor is duplicated.

2. Description of Services

Contractor agrees to perform the following Services:

All written Deliverables, including any copies, shall be submitted on recycled paper and printed on double-sided pages to the maximum extent possible.

Detailed description of services are listed below and are attached hereto

Appendix A-1 AFS Outpatient Behavioral Health Program

Appendix A-2 AFS Therapeutic Visitation Services

Appendix A-3 AFS Treatment Foster Care

3. Services Provided by Attorneys.

Any services to be provided by a law firm or attorney to the City must be reviewed and approved in writing in advance by the City Attorney. No invoices for services provided by law firms or attorneys, including, without limitation, as subcontractors of Contractor, will be paid unless the provider received advance written approval from the City Attorney.

Contractor Name: Alternative Family Services	Appendix A-1
Program Name: AFS Outpatient Behavioral Health Program	Contract Term: 07/01/20-6/30/21

1. Page 1 of 6 Identifiers:

Program Name: AFS Outpatient Behavioral Health Program
Program Address: 250 Executive Park Blvd, Suite 4900
City, State, ZIP: San Francisco, CA 94134
Telephone/FAX: 415-656-0117
Website Address: www.afs4kids.org

Executive Director/Program Director: Jay Berlin / Tricca Leverenz
Telephone: 707-576-7700 x 314
Email Address: jberlin@afs4kids.org
Program Code(s): 38GSOP

2. Nature of Document:

Original Contract Amendment Revision to Program Budgets (RPB)

3. Goal Statement:

The goal of this program is to improve the client(s)' interpersonal, adaptive, and communication skills. Additionally, we strive to improve their connection with their family to support their emotional and psychological well-being. In so doing, our goal is to support permanency and stability for children and families with a special emphasis and expertise to serve children and youth involved with the foster care system by addressing their unique behavioral health needs.

4. Target Population:

The target population for this program is child welfare involved children and youth ages 0 to 20 of San Francisco County. The program meets the unique needs of children and youth involved in or at risk of becoming involved in the foster care system.

AFS will also provide limited non Medi-Cal reimbursable support services to children and families who 1) do not have full scope Medi-Cal or 2) require additional support services per approval of Foster Care Mental Health and Human Services Agency (see description below).

5. Modality(s)/Intervention(s)

See Cost Reporting/Data Collection (CRDC) in FY 20-21 Appendix B-1. Modes of Services include: Case Management Brokerage, Mental Health Services, Community Client Services – Outpatient Services.

Contractor Name: Alternative Family Services	Appendix A-1
Program Name: AFS Outpatient Behavioral Health Program	Contract Term: 07/01/20-6/30/21

6. Methodology:

Indirect Services and Activities (Funded by Work Order)

Permanency Worker (.75 FTE)

- All SF County youth placed in AFS foster homes will receive intensive permanency case planning services, intensified case review and management, and specialized training for social workers managing these placements.

SF Recruitment Program Activities

- AFS will provide foster and kin parent services for perspective San Francisco Resource Parents. Activities will include outreach, recruitment, parent training, and ongoing support during the approval process.

Other Support Services

- AFS may provide limited non Medi-Cal support services to assist clients in reaching their goals, including, but not limited to, progress reporting to PSWs, coordination efforts, and outreach.

Direct Client Services:

A. Outreach, recruitment, promotion, and advertisement:

All referrals are obtained from Foster Care Mental Health (FCMH). AFS will work with FCMH to prioritize any children or youth placed in AFS ISFC homes and in need of mental health services.

B. Admission, enrollment and/or intake criteria and process where applicable:

AFS will obtain all referrals from FCMH. Assessments will take place within the first 30 days of receiving the referral. AFS will work with FCMH to facilitate appropriate referral and linkage to services.

Within 48 hours of receipt of a referral, AFS staff contacts families and referring party to present a brief introduction to AFS and to schedule an intake appointment at the time and location preferred by the client. The intake also marks the beginning of "engagement work" for AFS that includes building rapport.

- #### C. Non EPSDT Services: limited client support services will be provided to current AFS clients and/or SF Dependents placed in AFS homes to increase the likelihood of permanency, safety, and well-being. Support services include, but are not limited to, outreach to legal representatives, engagement prior to a client's opening, transitional support, coordination of systems, facilitating appropriate community resources for SF Dependents, and transportation. These services will be funded by a work order and monitored by the AFS Program Director. All services will be documented and tracked in the AFS Electronic Health Record.

D. Mental Health Service delivery model:

Contractor Name: Alternative Family Services	Appendix A-1
Program Name: AFS Outpatient Behavioral Health Program	Contract Term: 07/01/20-6/30/21

- a) Assessment & Early Identification: Ideally, youth are assessed immediately upon entry into the foster care system and at any transition point thereafter (i.e., before and after placement change and system exit). For AFS clients, every case receives a formal comprehensive psychosocial assessment using the Child and Adolescent Strengths and Needs (CANS) assessment system. Youth and caregivers are active participants in the collection, review and prioritization of data.
- b) Assessment Only. For clients referred for assessment only, AFS clinicians will complete an initial Assessment and Brief CANS within 30 days of episode opening. The AFS clinician will provide a written summary of needs, strengths and recommendations for mental health services. Based on client needs and FCMH authorization, the AFS clinician may provide ongoing services in order to coordinate care and participate on the Child and Family Team.
- c) Treatment Planning: Clients, clinicians and other key individuals develop a treatment plan of care to prioritize client needs, goals and service strategies. As assessment information changes, treatment planning will change accordingly.
- d) Service Provision and Appropriateness Monitoring:
- i. Immediately following the assessment and treatment planning phases the clinician will work with the client to address goals. For the general target population described in Item #4, planned services may include a combination of individual therapy, family therapy, individual rehabilitation, and/or case management. For clients in the priority population (ISFC clients) planned services may also include intensive care coordination (ICC) and intensive home based services (IHBS) to focus on restoring, improving or maintaining daily living skills, functional skills, social skills and support resources. IR, ICC and IHBS services may be provided by a Mental Health Rehab Specialist (MHRS) who will coordinate and collaborate with the clinical team.
 - ii. A great deal of attention is placed on ensuring that the intensity and frequency of services are appropriate to meet the needs of clients and their families. AFS matches interventions and practices to the needs of clients. Services are closely monitored for appropriateness through supervision and CQI processes. AFS Quality Management will monitor the provision of IR Services at the child- and program-level for clients in ITFC placements via an internal monthly report submitted to the Program Director and Mental Health Director.
- e) Service Coordination and Collaboration: Coordination and collaboration is a foundational aspect of the AFS clinical model. To achieve client goals, services must be coordinated among all the involved stakeholders such as county case workers, probation officers, FFA workers, lawyers, schools, foster families, and biological families.
- f) Community Linkage: A critical aspect of treatment is working to create a network of natural and formal supports in the clients' lives to reinforce and maintain treatment gains and increase the likelihood of successful outcomes. AFS consistently partners with multiple other providers to ensure continuity of service during the referral process, as well as to ensure coordinated care. AFS has worked closely with A Better Way, Seneca, and Fred Finch, all whom provide Mental Health Services to children who are Dependents of San Francisco. Additionally, we also have partnered with First Stop, Horizon's, La Casa de Las Madres, and Urban Services YMCA.

Contractor Name: Alternative Family Services	Appendix A-1
Program Name: AFS Outpatient Behavioral Health Program	Contract Term: 07/01/20-6/30/21

E. Discharge Planning and exit criteria and process:

As mentioned above, a critical aspect of all services is discharge planning and linkages to formal and informal services and supports. At service initiation, service providers in collaboration with the client and family create a discharge plan to identify and begin to link clients and their families to community supports, and to outline resources for clients following service completion. Common community support agencies are First Stop, Horizon's, La Casa de Las Madres, and Urban Services YMCA.

Data from the Child and Adolescent Needs and Strength Assessment (CANS) (collected every 6 months and during any transition points) helps to monitor and match service needs to client and family needs. This allows for systematic monitoring of service appropriateness. Clients are discharged when treatment goals are achieved, or when a less intensive service may be more appropriate.

F. Program staffing:

All services will be provided by staff that is qualified to deliver EPSDT services. Overall program responsibility is given to Mental Health Director, Tricca Leverenz, LCSW. Specific day to day program responsibility is vested in Program Director, Kimberly Porter-Leite, LMFT. Clinical supervision of staff is shared by Kimberly Porter-Leite and licensed Clinical Supervisors. Services are delivered by a team of master's level clinicians, MHRS qualified staff, and Quality Management Associates.

7. Objectives and Measurements:

All objectives, and descriptions of how objectives will be measured, are contained in the BHS document entitled BHS Children, Youth, and Families Performance Objectives FY 20-21 located at www.sfdph.org/cdta.

8. Continuous Quality Improvement:

The overall program quality is guided by the agency's Continuous Quality Improvement (CQI) Structure, which is documented in the AFS CQI Plan, and led by the CQI Steering Committee and the CQI Working Committees. The CQI working committees are: AFS Program Quality & Compliance Committee led by the Compliance Officer/CFO; the Program Outcomes Committee led by the Chief Program Officer, The Staff Development & Safety Committee led by the CFO; and, the Information Systems Committee led by the Director of Special Projects. The CQI Oversight Committee is led by the CEO and includes the agency's leadership team. The CQI Steering Committee meets on a regular basis and the Working Committee meets, at a minimum, on a quarterly basis.

Program-level quality initiatives are addressed in bi-weekly meeting between program and QM management staff, and implemented by program supervisors and managers. In addition, structured activities (e.g., utilization review; clinical review; etc.) function as CQI methods for the program.

Contractor Name: Alternative Family Services	Appendix A-1
Program Name: AFS Outpatient Behavioral Health Program	Contract Term: 07/01/20-6/30/21

- A. Performance-Contract & Productivity: Contract performance is monitored at various levels in the agency: (a) monthly during the Mental Health Management meeting; (b) bi-monthly during the Program CQI Management meeting; (c) quarterly at the agency CQI Steering Committee. The Program Compliance Committee reviews specific contractual obligations while staff productivity is reviewed monthly by Management. Program managers and Quality Management staff look at service intensity issues (e.g., looking at levels of Collateral contacts, a key indicator of collaboration and coordination for AFS' population children in the foster care system) during their biweekly meetings. Clinical Supervisors and Program Directors meet on a weekly basis to review clinician caseload, service intensity and care coordination.

AFS generates a report at opening for each client through our internal data base, which allows us to track due dates and ensure timely submission of Assessments, Treatment Plans and service delivery.

- B. Documentation Quality, including a description of internal audits: Service quality is monitored at various levels of the agency: (a) program supervision; (b) peer-review (monthly review of charts by peers); (c) utilization review (monthly review of charts by external agency); (d) internal Medi-Cal audits. AFS will continue to utilize internal Quality Management and Clinical Managers to review documentation quality and seek outside consultation as needed to identify best practices, internal review and auditing tools, methods and infrastructure development, as well as, conduct quarterly documentation trainings.

AFS internal audits are as follows:

- a. Utilization Review (UR): Under the direction of the AFS SF Program Director and QM Associates. The QM Unit-collates data on UR outcomes (i.e., number of charts identified as conditional, passing, failing) and compares with the benchmark (95% passing or conditional).
 - b. Clinical Case Peer Review: Will be in conjunction with the Level 2 PURQC process. Is a Peer Review in the format of a live case-consultation. Cases are selected based on length of service, level of service, and level of Clinical need.
 - c. Level 2 PURQC: AFS will participate in the pilot project to further solidify expectations and procedures for this higher level clinical review of all charts open longer than 36 months of service.
- C. Cultural Competency: Cultural competence is monitored at the local level: (a) supervision and (b) trainings (for managers and clinicians). The Program Director works closely with the Human Resources Department to review hiring and advertising practices to ensure that newly hired staff consistently meets our client's cultural and language needs. AFS also utilizes contractors and/or The Department of Public Health Language Access Services when interpreter services are needed in languages outside of the language capacity of AFS staff. AFS conducts three Cultural Competency trainings per year, tailoring trainings to match clientele backgrounds, ethnicities and languages.
- D. Client Satisfaction: Client satisfaction is measured through State-administered and/or AFS-administered satisfaction surveys. AFS conducts a San Francisco County client survey twice a year. Additionally, AFS is looking to implement an internal pre/post client survey. AFS has also implemented a survey via Survey Monkey, which targets County Social Workers to gather data for

Contractor Name: Alternative Family Services	Appendix A-1
Program Name: AFS Outpatient Behavioral Health Program	Contract Term: 07/01/20-6/30/21

the purpose of enhancing the quality of our services, and maintaining/improving our relationship with our referral source.

- E. Measurement, analysis, and use of CANS data: Program (a) participates in Super User calls on a monthly basis, (b) utilizes SF county reports (Pivot Charts) when available to evaluate treatment, and (c) created and analyzed our Theory of Change Clinical Formulation. AFS is also in the process of implementing “Using CANS in Supervision” and the TCOM strategies created by John Lyons.

9. Required Language: N/A

Contractor Name: Alternative Family Services	Appendix A-2
Program Name: AFS Therapeutic Visitation	Contract Term: 07/01/20-06/30/21

1. Identifiers:

Program Name: AFS Therapeutic Visitation
Program Address: 250 Executive Park Blvd, Suite 4900
City, State, ZIP: San Francisco, CA 94134
Telephone/FAX: 415-656-0117
Website Address: www.afs4kids.org

Executive Director/Program Director: Jay Berlin
Telephone: 707-576-7700 x 314
Email Address: jberlin@afs4kids.org
Program Code(s): 38GS01

2. Nature of Document:

3. Original Contract Amendment Revision to Program Budgets (RPB)

4. Goal Statement:

AFS Therapeutic Visitation (TVS) program is specifically designed to bring targeted, time-limited, and evidenced-informed mental health services with a special emphasis on San Francisco's foster youth and their families, of all ethnicities and populations, who are separated due to allegations of abuse and neglect and currently in the reunification process. The program is organized to reduce traditional barriers to service provisions, which provide clients, their families and foster families with highly coordinated, flexible, convenient, and culturally and linguistically competent services. We believe that by integrating our longstanding expertise in the field of foster care with well-chosen evidence based mental health practices we can:

- Maintain and strengthen family connections
- Enhance and strengthen family-child relationships
- Reduce youth emotional/behavioral problems that hinder their ability to live in a family environment

5. Target Population:

The target population for this program is San Francisco County child welfare involved children and youth ages 2 to 17, of all ethnicities and populations. The program is designed with a focused emphasis and expertise to meet the unique needs of children and youth involved or at risk for becoming involved in the foster care system. Limited supervised visitation services are provided to children and families who do not have full scope Medi-Cal (see Supervised Visitation Services description below).

Contractor Name: Alternative Family Services	Appendix A-2
Program Name: AFS Therapeutic Visitation	Contract Term: 07/01/20-06/30/21

6. Modality(s)/Intervention(s)

See Cost Reporting/Data Collection (CRDC), FY 20-21 Appendix B-2. Mode of Services will include the following: Mental Health Services include Assessment, Plan Development, Individual Therapy, Individual Rehabilitation (IR), Intensive Home Based Services, (IHBS) Family Therapy, Group Therapy, and Collateral. AFS will also provide Case Management, Intensive Care Coordination (ICC).

7. Methodology:

Direct client services

- A. Outreach, Recruitment, Promotion, and Advertisement: All referrals will be received from Foster Care Mental Health.
- B. Admission and Intake Process: AFS will obtain all referrals from Foster Care Mental Health. Assessments for services will be conducted within the first 30 days. AFS will work with Foster Care mental health to facilitate appropriate referrals.

Within 48 hours of receipt of referral, AFS staff contacts families and referring party to present a brief introduction to AFS and to schedule an intake appointment at the time and location preferred by the client. The intake also marks the beginning of "engagement work" for AFS that includes building rapport.

- C. Service delivery model: Program phases, Location, Length of Stay, and Hours of Operation Intake:

Assessment & Early Identification: Ideally, youth are assessed immediately upon entry into the foster care system and at any transition point; thereafter (i.e., before and after placement change and system exit). For AFS clients, every case receives a formal comprehensive psychosocial assessment using the Child and Adolescent Strengths and Needs (CANS) assessment. Youth and caregivers are active participants in the collection, review and prioritization of data.

Treatment Planning: Clients, clinicians and other key individuals develop a treatment plan of care to prioritize client needs, goals and service strategies. As assessment information changes, treatment planning will change accordingly.

Service Provision and Appropriateness Monitoring: A great deal of attention is placed on ensuring that the intensity and frequency of services are appropriate to meet the needs of clients and their families. AFS matches interventions and practices to the needs of clients. Services are closely monitored for appropriateness through supervision and CQI processes.

Service Coordination and Collaboration: Coordination and collaboration is a foundational aspect of the AFS clinical model. To achieve client goals, services must be coordinated among all the involved stakeholders such as county case workers, probation officers, FFA workers, lawyers, schools, foster families, and biological families.

Contractor Name: Alternative Family Services	Appendix A-2
Program Name: AFS Therapeutic Visitation	Contract Term: 07/01/20-06/30/21

Community Linkage: A critical aspect of treatment is working to create a network of natural and formal supports in the clients' lives to reinforce and maintain treatment gains and increase the likelihood of successful outcomes. AFS consistently partners with multiple other providers to ensure continuity of service during the referral process, as well as to ensure coordinated care. AFS has worked closely with A Better Way, Seneca, and Fred Finch, all of which provide Mental Health Services to children who are Dependents of San Francisco. Additionally, we also have partnered with First Stop, Horizon's, La Casa de Las Madres, and Urban Services YMCA.

Location: Locations and times of service delivery will be flexible and planned to meet clients' needs as much as possible. Both programs are community based; services will be, whenever clinically and logistically possible, delivered to clients in the least restrictive and most therapeutically appropriate environment possible. The continuum of visitation sites may vary from tightly supervised, in-office sessions to less structured community venues and client homes.

Length of Stay: Treatment planning will be organized to allow clients to move to lower levels of services or a step-down plan within six to nine months of service initiation.

Hours of Operation: Services will be provided to clients' and their families from the hours of 9:00 to 8:00 p.m. and weekends as needed and when possible.

Supervised Visitation Service and other Support Services (Funded by Work Order): At AFS, Supervised Visitation Services are provided on a limited basis for six to nine months. These services are managed by trained staff who are present at all times to ensure visits are safe and aligned with the Visitation Plan. The primary focus of the visits is to promote safety and well-being for children and youth. To promote safe and positive family interactions, families may receive parent coaching and/or support from the AFS staff. Families are referred directly from Protective Social Workers. AFS may also provide additional support services in order to help families reach their goals, including, but not limited to, progress updates to PSWs, debrief meetings with families, and coordination with other providers. Upon receiving the referrals, AFS conducts a Risk and Safety Assessment to determine whether the Supervised Visitation Services are suitable for the referred parent(s), caregiver(s), and child (ren). If accepted, the AFS staff obtains initial paperwork from the PSW, and contacts the family to schedule the first visit.

- D. **Discharge Process:** As mentioned above, a critical aspect of all services is discharge planning and linkages to formal and informal services and supports. At service initiation, service providers in collaboration with the client and family create a discharge plan to identify and begin to link clients and their families to community supports, and to outline resources for clients following service completion. Common community support agencies are First Stop, Horizon's, La Casa de Las Madres, and Urban Services YMCA.

Data from the Child and Adolescent Needs and Strength Assessment (CANS) (collected every 6 months and during any transition points) helps to monitor and match service needs to client and family needs. This allows for systematic monitoring of service appropriateness. Clients are discharged when treatment goals are achieved, or when a less intensive service may be more appropriate.

Contractor Name: Alternative Family Services	Appendix A-2
Program Name: AFS Therapeutic Visitation	Contract Term: 07/01/20-06/30/21

E. Program Staffing: All services will be provided by staff that is qualified to deliver EPSDT services. Overall program responsibility is given to Tricca Leverenz, LCSW, Mental Health Director. Specific day to day program responsibility is vested in Kimberly Porter-Leite, LMFT, Program Director. Clinical supervision of staff is shared by Ms. Porter-Leite and licensed Clinical Supervisors. Services are delivered by a team of master's level clinicians, MHRS qualified staff, and Quality Management Associates.

8. Objectives and Measurements:

All objectives, and descriptions of how objectives will be measured, are contained in the BHS document entitled BHS Children, Youth, and Families Performance Objectives FY 20-21 located at www.sfdph.org/cdta.

9. Continuous Quality Improvement:

The overall program quality is guided by the agency's Continuous Quality Improvement (CQI) Structure which is documented in the AFS CQI Plan, and led by the CQI Steering Committee and the CQI Working Committees. The CQI working committees are: AFS Program Quality & Compliance Committee led by the Compliance Officer/CFO; the Program Outcomes Committee led by the Chief Program Officer, The Staff Development & Safety Committee led by the CFO; and, the Information Systems Committee led by the Director of Special Projects. The CQI Oversight Committee is led by the CEO and includes the agency's leadership team. The CQI Steering Committee meets on a regular basis and the Working Committee meets, at a minimum, on a quarterly basis.

Program-level quality initiatives are addressed in bi-weekly meeting between program and QM management staff, and implemented by program supervisors and managers. In addition, structured activities (e.g., utilization review; clinical review; etc.) function as CQI methods for the program.

A. Performance-Contract & Productivity: Contract performance is monitored at various levels in the agency: (a) monthly during the Mental Health Management meeting; (b) bi-monthly during the Program CQI Management meeting; (c) quarterly at the agency CQI Steering Committee. The Program Compliance Committee reviews specific contractual obligations while staff productivity is reviewed monthly by Management. Program managers and Quality Management staff look at service intensity issues (e.g., looking at levels of Collateral contacts, a key indicator of collaboration and coordination for AFS' population children in the foster care system) during their biweekly meetings. Clinical Supervisors and Program Directors meet on a weekly basis to review clinician caseload, service intensity and care coordination.

AFS generates a report at opening for each client through our internal data base, which allows us to track due dates and ensure timely submission of Assessments, Treatment Plans and service delivery.

B. Documentation Quality, including a description of internal audits: Service quality is monitored at various levels of the agency: (a) program supervision; (b) peer-review (monthly review of charts by peers); (c) utilization review (monthly review of charts by external agency); (d) internal Medi-Cal audits. AFS will continue to utilize internal Quality Management and Clinical Managers to review documentation quality and seek outside consultation as needed to identify best practices, internal review and auditing tools, methods and infrastructure development, as well as, conduct quarterly documentation trainings.

Contractor Name: Alternative Family Services	Appendix A-2
Program Name: AFS Therapeutic Visitation	Contract Term: 07/01/20-06/30/21

AFS internal audits are as follows:

- a. Utilization Review (UR): Under the direction of the AFS SF Program Director and QM Associates. The QM Unit-collates data on UR outcomes (i.e., number of charts identified as conditional, passing, failing) and compares with the benchmark (95% passing or conditional).
 - b. Critical Case Peer Review: Will be in conjunction with the Level 2 PURQC process. Is a Peer Review in the format of a live case-consultation. Cases are selected based on length of service, level of service, and level of Clinical need.
 - c. Level 2 PURQC: AFS will participate in the pilot project to further solidify expectations and procedures for this higher level clinical review of all charts open longer than 36 months of service.
- C. Cultural Competency: Cultural competence is monitored at the local level: (a) supervision and (b) trainings (for managers and clinicians). The Program Director works closely with the Human Resources Department to review hiring and advertising practices to ensure that newly hired staff consistently meets our client's cultural and language needs. AFS also utilizes contractors and/or The Department of Public Health Language Access Services when interpreter services are needed in languages outside of the language capacity of AFS staff. AFS conducts three Cultural Competency trainings per year, tailoring trainings to match clientele backgrounds, ethnicities and languages.
- D. Client Satisfaction: Client satisfaction is measured through State-administered and/or AFS-administered satisfaction surveys. AFS conducts a San Francisco County client survey twice a year. Additionally, AFS is looking to implement an internal pre/post client survey. AFS has also implemented a survey via Survey Monkey, which targets County Social Workers to gather data for the purpose of enhancing the quality of our services, and maintaining/improving our relationship with our referral source.
- E. Measurement, analysis, and use of CANS data: Program (a) participates in Super User calls on a monthly basis, (b) utilizes SF county reports (Pivot Charts) when available to evaluate treatment, and (c) created and analyzed our Theory of Change Clinical Formulation. AFS is also in the process of implementing "Using CANS in Supervision" and the TCOM strategies created by John Lyons.

10. Required Language:

None

Contractor Name: Alternative Family Services	Appendix A-3
Program Name: AFS Treatment Foster Care	Contract Term: 07/01/20-06/30/21

1. Identifiers:

Program Name: AFS Treatment Foster Care
Program Address: 250 Executive Park Blvd, Suite 4900
City, State, ZIP: San Francisco, CA 94134
Telephone/FAX: 415-656-0117
Website Address: www.afs4kids.org

Executive Director/Program Director: Jay Berlin
Telephone: 707-576-7700 x 314
Email Address: jberlin@afs4kids.org
Program Code(s): 38GSTF

2. Nature of Document:

3. Original Contract Amendment Revision to Program Budgets (RPB)

4. Goal Statement:

AFS Therapeutic Foster Care program is specifically designed to bring targeted Specialty Mental Health Services to San Francisco Dependents placed in qualified AFS TFC Resource Parent homes.

Contractor shall provide services to help clients accomplish the following goals:

- Assist clients in moving to a lower level of care;
- Assist clients in avoiding a higher level of care;
- Reduce psychiatric hospitalizations;
- Continue to enhance the quality of client/family life and community functioning; and
- Improve each Resource Parents' ability to support the client's mental health needs and reduce mental health barriers to success through training and close supervision.

5. Target Population:

Contractor shall serve youth under the age of 21 who are San Francisco County Dependents and are placed in AFS TFC Resource Parent homes who meet medical necessity for Specialty Mental Health Services (SMHS), and are at risk of entering, or are stepping down from, a higher level of care. A subset of these children and youth may be eligible for Katie A. services. Contractor shall notify all Katie A. eligible children and youth of additional services that can be requested.

Contractor Name: Alternative Family Services	Appendix A-3
Program Name: AFS Treatment Foster Care	Contract Term: 07/01/20-06/30/21

6. Modality(s)/Intervention(s)

Modes of Services will include the following Specialty Mental Health Services based on the needs of the client: Therapeutic Foster Care services, Assessment, Plan Development, Individual Therapy, Individual Rehabilitation (IR), Intensive Care Coordination (ICC), Intensive Home Based Services (IHBS), Family Therapy, Case Management and Collateral services.

7. Methodology:

Direct client services

- A. Outreach, Recruitment, Promotion, and Advertisement: Youth referred for AFS TFC services will be identified by San Francisco Human Services MAST team as being at risk for higher level of care, or as being in need for support in transitioning from a Short Term Residential Treatment Program to a Resource Family home. All referrals will then be initiated and managed by Foster Care Mental Health, (FCMH).
- B. Admission and Intake Process: AFS Intake Coordinator will process referrals from Foster Care Mental Health according to all guidelines.

Within 48 hours of receipt of referral from FCMH, AFS Mental Health staff will contact all important parties: PSW, AFS Case Manager, AFS TFC Resource Parent(s) and client. Initial appointment will be scheduled and services will commence.

- C. Service delivery model: Program phases, Location, Length of Stay, and Hours of Operation Intake:

Assessment & Early Identification: A comprehensive Mental Health CANS Assessment will be completed to confirm medical necessity and to determine service intensity. Youth and Caregivers are active participants in the collection, review and prioritization of information pertaining to client's medical needs.

Treatment Planning: Clients, Clinicians and other key individuals develop a Treatment Plan of Care to prioritize client needs, goals and service strategies.

Service Provision and Appropriateness Monitoring: AFS Mental Health staff will ensure that the intensity and frequency of services are appropriate to meet client need. AFS matches interventions and practices to the needs of clients. Services are closely monitored for appropriateness through supervision and the Continuous Quality Improvement (CQI) processes.

Service Coordination and Collaboration: Coordination and collaboration is a foundational aspect of the AFS clinical model. To achieve client goals, services must be coordinated among all the involved stakeholders such as PSW's, probation officers, FFA workers, lawyers, schools, Resource Families, and biological family members.

Community Linkage: A critical aspect of treatment is working to create a network of natural and formal supports in the clients' lives to reinforce and maintain treatment gains and increase the likelihood of successful outcomes. AFS consistently partners with multiple other providers to ensure continuity of service during the referral process, as well as to ensure coordinated care. AFS has

Contractor Name: Alternative Family Services	Appendix A-3
Program Name: AFS Treatment Foster Care	Contract Term: 07/01/20-06/30/21

worked closely with Comprehensive Crisis Services, CA Better Way, Seneca, and Fred Finch, all of which provide Mental Health Services to children who are Dependents of San Francisco. Additionally, we also have partnered with First Stop, Horizon's, La Casa de Las Madres, and Urban Services YMCA.

Location: Locations and times of service delivery will be flexible and planned to meet clients' needs as much as possible. Both programs are community based; services will be, whenever clinically and logistically possible, delivered to clients in the least restrictive and most therapeutically appropriate environment possible. The continuum of visitation sites may vary from tightly supervised, in-office sessions to less structured community venues and client homes.

Length of Stay: Treatment planning will be organized to allow clients to move to lower levels of services or a step-down plan within six to nine months of service initiation.

Hours of Operation: Services will be provided to clients' and their families from the hours of 9:00 a.m. to 8:00 p.m. and weekends as needed and when possible.

- D. Discharge Process: As mentioned above, a critical aspect of all services is discharge planning and linkages to formal and informal services and supports. At service initiation, service providers in collaboration with the client and family create a discharge plan to identify and begin to link clients and their families to community supports, and to outline resources for clients following service completion. Common community support agencies are First Stop, Horizon's, La Casa de Las Madres, and Urban Services YMCA.

Data from the Child and Adolescent Needs and Strength Assessment (CANS) (collected every 6 months and during any transition points) helps to monitor and match service needs to client and family needs. This allows for systematic monitoring of service appropriateness. Clients are discharged when treatment goals are achieved, or when a less intensive service may be more appropriate.

- E. Program Staffing: All services will be provided by staff that is qualified to deliver EPSDT services. Overall program responsibility is given to Patricia Leverenz, LCSW, Mental Health Director. Specific day to day program responsibility is vested in Kimberly Porter-Leite, LMFT, Program Director. Clinical supervision of staff is shared by Ms. Porter-Leite and licensed Clinical Supervisors. Services are delivered by a team of master's level clinicians, MHRS qualified staff, and Quality Management Associates.

8. Objectives and Measurements:

All objectives, and descriptions of how objectives will be measured, are contained in the BHS document entitled BHS Children, Youth, and Families Performance Objectives FY20-21 located at www.sfdph.org/cdta.

9. Continuous Quality Improvement:

The overall program quality is guided by the agency's Continuous Quality Improvement (CQI) Structure, which is documented in the AFS CQI Plan, and led by the CQI Steering Committee and the CQI Working Committees. The CQI working committees are: AFS Program Quality & Compliance

Contractor Name: Alternative Family Services	Appendix A-3
Program Name: AFS Treatment Foster Care	Contract Term: 07/01/20-06/30/21

Committee led by the Compliance Officer/CFO: the Program Outcomes Committee led by the Chief Program Officer, The Staff Development & Safety Committee led by the CFO; and, the Information Systems Committee led by the Director of Special Projects. The CQI Oversight Committee is led by the CEO and includes the agency's leadership team. The CQI Steering Committee meets on a regular basis and the Working Committee meets, at a minimum, on a quarterly basis.

Program-level quality initiatives are addressed in bi-weekly meeting between program and QM management staff and implemented by program supervisors and managers. In addition, structured activities (e.g., utilization review; clinical review; etc.) function as CQI methods for the program.

- A. Performance-Contract & Productivity: Contract performance is monitored at various levels in the agency: (a) monthly during the Mental Health Management meeting; (b) bi-monthly during the Program CQI Management meeting; (c) quarterly at the agency CQI Steering Committee. The Program Compliance Committee reviews specific contractual obligations while staff productivity is reviewed monthly by Management. Program managers and Quality Management staff look at service intensity issues (e.g., looking at levels of Collateral contacts, a key indicator of collaboration and coordination for AFS' population children in the foster care system) during their biweekly meetings. Clinical Supervisors and Program Directors meet on a weekly basis to review clinician caseload, service intensity and care coordination.

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- B. Documentation Quality, including a description of internal audits: Service quality is monitored at various levels of the agency: (a) program supervision; (b) peer-review (monthly review of charts by peers); (c) utilization review (monthly review of charts by external agency); (d) internal Medi-Cal audits. AFS will continue to utilize internal Quality Management and Clinical Managers to review documentation quality and seek outside consultation as needed to identify best practices, internal review and auditing tools, methods and infrastructure development, as well as, conduct quarterly documentation trainings.

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 - b. Critical Case Peer Review: Will be in conjunction with the Level 2 PURQC process. Is a Peer Review in the format of a live case-consultation. Cases are selected based on length of service, level of service, and level of Clinical need.
- C. Cultural Competency: Cultural competence is monitored at the local level: (a) supervision and (b) trainings (for managers and clinicians). The Program Director works closely with the Human Resources Department to review hiring and advertising practices to ensure that newly hired staff consistently meets our client's cultural and language needs. AFS also utilizes contractors and/or The Department of Public Health Language Access Services when interpreter services are needed in

Contractor Name: Alternative Family Services	Appendix A-3
Program Name: AFS Treatment Foster Care	Contract Term: 07/01/20-06/30/21

languages outside of the language capacity of AFS staff. AFS conducts three Cultural Competency trainings per year, tailoring trainings to match clientele backgrounds, ethnicities and languages.

- D. Client Satisfaction: Client satisfaction is measured through State-administered and/or AFS-administered satisfaction surveys. AFS conducts a San Francisco County client survey twice a year. Additionally, AFS is looking to implement an internal pre/post client survey. AFS has also implemented a survey via Survey Monkey, which targets County Social Workers to gather data for the purpose of enhancing the quality of our services, and maintaining/improving our relationship with our referral source.
- E. Measurement, analysis, and use of CANS data: Program (a) participates in Super User calls on a monthly basis, (b) utilizes SF county reports (Pivot Charts) when available to evaluate treatment, and (c) created and analyzed our Theory of Change Clinical Formulation. AFS is also in the process of implementing "Using CANS in Supervision" and the TCOM strategies created by John Lyons.

10. Required Language:

None

Appendix B Calculation of Charges

1. Method of Payment

A. Invoices furnished by CONTRACTOR under this Agreement must be in a form acceptable to the Contract Administrator and the CONTROLLER and must include the Contract Progress Payment Authorization number or Contract Purchase Number. All amounts paid by CITY to CONTRACTOR shall be subject to audit by CITY. The CITY shall make monthly payments as described below. Such payments shall not exceed those amounts stated in and shall be in accordance with the provisions of Section 3.3, COMPENSATION, of this Agreement.

Compensation for all SERVICES provided by CONTRACTOR shall be paid in the following manner. For the purposes of this Section, "General Fund" shall mean all those funds which are not Work Order or Grant funds. "General Fund Appendices" shall mean all those appendices which include General Fund monies.

(1) Fee For Service (Monthly Reimbursement by Certified Units at Budgeted Unit Rates)

CONTRACTOR shall submit monthly invoices in the format attached, Appendix F, and in a form acceptable to the Contract Administrator, by the fifteenth (15th) calendar day of each month, based upon the number of units of service that were delivered in the preceding month. All deliverables associated with the SERVICES defined in Appendix A times the unit rate as shown in the appendices cited in this paragraph shall be reported on the invoice(s) each month. All charges incurred under this Agreement shall be due and payable only after SERVICES have been rendered and in no case in advance of such SERVICES.

(2) Cost Reimbursement (Monthly Reimbursement for Actual Expenditures within Budget):

CONTRACTOR shall submit monthly invoices in the format attached, Appendix F, and in a form acceptable to the Contract Administrator, by the fifteenth (15th) calendar day of each month for reimbursement of the actual costs for SERVICES of the preceding month. All costs associated with the SERVICES shall be reported on the invoice each month. All costs incurred under this Agreement shall be due and payable only after SERVICES have been rendered and in no case in advance of such SERVICES.

B. Final Closing Invoice

(1) Fee For Service Reimbursement:

A final closing invoice, clearly marked "FINAL," shall be submitted no later than forty-five (45) calendar days following the closing date of each fiscal year of the Agreement, and shall include only those SERVICES rendered during the referenced period of performance. If SERVICES are not invoiced during this period, all unexpended funding set aside for this Agreement will revert to CITY. CITY'S final reimbursement to the CONTRACTOR at the close of the Agreement period shall be adjusted to conform to actual units certified multiplied by the unit rates identified in Appendix B attached hereto, and shall not exceed the total amount authorized and certified for this Agreement.

(2) Cost Reimbursement:

A final closing invoice, clearly marked "FINAL," shall be submitted no later than forty-five (45) calendar days following the closing date of each fiscal year of the Agreement, and shall include only those costs incurred during the referenced period of performance. If costs are not invoiced during this period, all unexpended funding set aside for this Agreement will revert to CITY.

C. Payment shall be made by the CITY to CONTRACTOR at the address specified in the section entitled "Notices to Parties."

D. Upon **the effective date** of this Agreement, contingent upon prior approval by the CITY'S Department of Public Health **of an invoice or claim submitted by Contractor, and** of each year's revised Appendix A (Description of Services) and each year's revised Appendix B (Program Budget and Cost Reporting Data Collection Form), and within each fiscal year, the CITY agrees to make an initial payment to CONTRACTOR not to exceed twenty-five per cent (25%) of the General Fund and MHSA Fund portion of the CONTRACTOR'S allocation for the applicable fiscal year.

CONTRACTOR agrees that within that fiscal year, this initial payment shall be recovered by the CITY through a reduction to monthly payments to CONTRACTOR during the period of October 1 through March 31 of the applicable fiscal year, unless and until CONTRACTOR chooses to return to the CITY all or part of the initial payment for that fiscal year.. The amount of the initial payment recovered each month shall be calculated by dividing the total initial payment for the fiscal year by the total number of months for recovery. Any termination of this Agreement, whether for cause or for convenience, will result in the total outstanding amount of the initial payment for that fiscal year being due and payable to the CITY within thirty (30) calendar days following written notice of termination from the CITY.

2. Program Budgets and Final Invoice

A. Program Budgets are listed below and are attached hereto.

Budget Summary
CRDC B1 – B2
Appendix B-1 AFS Outpatient Behavioral Health Program
AFS Treatment Foster Care
Appendix B-2 AFS Therapeutic Visitation Services

B. Compensation

Compensation shall be made in monthly payments on or before the 30th day after the DIRECTOR, in his or her sole discretion, has approved the invoice submitted by CONTRACTOR. The breakdown of costs and sources of revenue associated with this Agreement appears in Appendix B, Cost Reporting/Data Collection (CR/DC) and Program Budget, attached hereto and incorporated by reference as though fully set forth herein. The maximum dollar obligation of the CITY under the terms of this Agreement shall not exceed **Nine Million Nine Hundred Ninety-Eight Thousand Nine Hundred Six Dollars (\$9,998,906)** for the period of **July 1, 2018 through June 30, 2022.**

CONTRACTOR understands that, of this maximum dollar obligation, **\$527,839** is included as a contingency amount and is neither to be used in Appendix B, Budget, or available to CONTRACTOR without a modification to this Agreement executed in the same manner as this Agreement or a revision to Appendix B, Budget, which has been approved by the Director of Health. CONTRACTOR further understands that no payment of any portion of this contingency amount will be made unless and until such modification or budget revision has been fully approved and executed in accordance with applicable CITY and Department of Public Health laws, regulations and policies/procedures and certification as to the availability of funds by the Controller. CONTRACTOR agrees to fully comply with these laws, regulations, and policies/procedures.

(1) For each fiscal year of the term of this Agreement, CONTRACTOR shall submit for approval of the CITY's Department of Public Health a revised Appendix A, Description of

Services, and a revised Appendix B, Program Budget and Cost Reporting Data Collection form, based on the CITY's allocation of funding for SERVICES for the appropriate fiscal year. CONTRACTOR shall create these Appendices in compliance with the instructions of the Department of Public Health. These Appendices shall apply only to the fiscal year for which they were created. These Appendices shall become part of this Agreement only upon approval by the CITY.

(2) CONTRACTOR understands that, of the maximum dollar obligation stated above, the total amount to be used in Appendix B, Budget and available to CONTRACTOR for the entire term of the contract is as follows, notwithstanding that for each fiscal year, the amount to be used in Appendix B, Budget and available to CONTRACTOR for that fiscal year shall conform with the Appendix A, Description of Services, and a Appendix B, Program Budget and Cost Reporting Data Collection form, as approved by the CITY's Department of Public Health based on the CITY's allocation of funding for SERVICES for that fiscal year.

July 1, 2018 through June 30, 2019	\$1,598,083
July 1, 2019 through June 30, 2020	\$2,624,328
July 1, 2020 through June 30, 2021	\$2,624,328
July 1, 2021 through June 30 , 2022	<u>\$2,624,328</u>
Subtotal - July 1, 2018 through June 30 , 2022	\$9,471,067
Contingency	<u>\$527,839</u>
TOTAL - July 1, 2018 through June 30 , 2022	\$9,998,906

(3) CONTRACTOR understands that the CITY may need to adjust sources of revenue and agrees that these needed adjustments will become part of this Agreement by written modification to CONTRACTOR. In event that such reimbursement is terminated or reduced, this Agreement shall be terminated or proportionately reduced accordingly. In no event will CONTRACTOR be entitled to compensation in excess of these amounts for these periods without there first being a modification of the Agreement or a revision to Appendix B, Budget, as provided for in this section of this Agreement.

3. Services of Attorneys

No invoices for Services provided by law firms or attorneys, including, without limitation, as subcontractors of Contractor, will be paid unless the provider received advance written approval from the City Attorney.

4. State or Federal Medi-Cal Revenues

A. CONTRACTOR understands and agrees that should the CITY'S maximum dollar obligation under this Agreement include State or Federal Medi-Cal revenues, CONTRACTOR shall expend such revenues in the provision of SERVICES to Medi-Cal eligible clients in accordance with CITY, State, and Federal Medi-Cal regulations. Should CONTRACTOR fail to expend budgeted Medi-Cal revenues herein, the CITY'S maximum dollar obligation to CONTRACTOR shall be proportionally

reduced in the amount of such unexpended revenues. In no event shall State/Federal Medi-Cal revenues be used for clients who do not qualify for Medi-Cal reimbursement.

B. CONTRACTOR further understands and agrees that any State or Federal Medi-Cal funding in this Agreement subject to authorized Federal Financial Participation (FFP) is an estimate, and actual amounts will be determined based on actual services and actual costs, subject to the total compensation amount shown in this Agreement.”

5. Reports and Services

No costs or charges shall be incurred under this Agreement nor shall any payments become due to CONTRACTOR until reports, SERVICES, or both, required under this Agreement are received from CONTRACTOR and approved by the DIRECTOR as being in accordance with this Agreement. CITY may withhold payment to CONTRACTOR in any instance in which CONTRACTOR has failed or refused to satisfy any material obligation provided for under this Agreement.

Appendix B - DPH 1: Department of Public Health Contract Budget Summary

DHCS Legal Entity Number 00510
 Legal Entity Name/Contractor Name ALTERNATIVE FAMILY SERVICES, INC.
 Contract ID Number 1000010827

Summary Page: 1 of 1
 Fiscal Year 2020-2021
 Funding Notification Date 10/6/2020

Appendix Number	B-1/A-1	B-1/A-3	B-2/A-2	
Provider Number	38GS	38GS	38GS	
Program Name	Outpatient Behavioral Health	Treatment Foster Care	Therapeutic Visitation Services	
Program Code	38GSOP	38GSTF	38GS01	
Funding Term	7/1/2020-6/30/2021	7/1/2020-6/30/2021	7/1/2020-6/30/2021	
FUNDING USES				TOTAL
Salaries	\$ 935,207	\$ 57,710	\$ 401,675	\$ 1,394,592
Employee Benefits	\$ 243,154	\$ 15,004	\$ 104,435	\$ 362,593
Subtotal Salaries & Employee Benefits	\$ 1,178,361	\$ 72,714	\$ 506,110	\$ 1,757,185
Operating Expenses	\$ 326,769	\$ 57,723	\$ 140,350	\$ 524,842
Capital Expenses	\$ -	\$ -	\$ -	\$ -
Subtotal Direct Expenses	\$ 1,505,130	\$ 130,437	\$ 646,460	\$ 2,282,027
Indirect Expenses	\$ 225,770	\$ 19,563	\$ 96,968	\$ 342,301
Indirect %	15%	15%	15%	15%
TOTAL FUNDING USES	\$ 1,730,900	\$ 150,000	\$ 743,428	\$ 2,624,328
	Employee Benefits Rate			27%
MH CYF Fed SDMC FFP (50%)	\$ 681,239	\$ 75,000	\$ 277,223	\$ 1,033,462
MH CYF State 2011 PSR-EPSDT	\$ 453,762	\$ 75,000	\$ 277,223	\$ 805,985
MH WO HSA GF Match	\$ 133,565			\$ 133,565
MH CYF County General Fund	\$ 93,912			\$ 93,912
MH WO HSA CWS Non-IVE Overmatch	\$ 120,150		\$ 41,177	\$ 161,327
MH WO HSA CWS Permanency	\$ 67,568			\$ 67,568
MH CYF County General Fund	\$ 180,704		\$ 147,805	\$ 328,509
TOTAL BHS MENTAL HEALTH FUNDING SOURCES	\$ 1,730,900	\$ 150,000	\$ 743,428	\$ 2,624,328
TOTAL DPH FUNDING SOURCES	\$ 1,730,900	\$ 150,000	\$ 743,428	\$ 2,624,328
TOTAL NON-DPH FUNDING SOURCES	\$ -	\$ -	\$ -	\$ -
TOTAL FUNDING SOURCES (DPH AND NON-DPH)	\$ 1,730,900	\$ 150,000	\$ 743,428	\$ 2,624,328
Prepared By	Martha E. Duarte, CFO		707-529-5670	

Appendix B - DPH 3: Salaries & Employee Benefits Detail

Contract ID Number <u>1000010827</u>											Appendix Number <u>B-1</u>											
Program Name <u>OUTPATIENT SERVICES/TFC</u>											Page Number <u>2</u>											
Program Code <u>38GSOP/38GSTF</u>											Fiscal Year <u>2020-2021</u>											
											Funding Notification Date <u>10/6/20</u>											
	TOTAL		251962-10000-10001670-0001 (A-1) Mode 15		251962-10000-10001670-0001 (A-1) Mode 45		251962-10000-10001670-0001 (A-3)		251962-10002-10001803-0002 (A-1) Mode 45		251962-10002-10001803-0006 (A-1) Mode 15		251962-10002-10001803-0018 (A-1) Mode 45									
Funding Term:											7/1/2020-6/30/2021		7/1/2020-6/30/2021		7/1/2020-6/30/2021		7/1/2020-6/30/2021		7/1/2020-6/30/2021		7/1/2020-6/30/2021	
Position Title	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries								
Mental Health Clinicians	8.90	\$ 640,780	5.95	\$ 428,501	0.88	\$ 63,010	0.52	\$ 37,242	0.58	\$ 41,894	0.65	\$ 46,572	0.33	\$ 23,560								
MHRS/Parent Partner	0.36	\$ 19,992	0.24	\$ 13,369	0.04	\$ 1,966	0.02	\$ 1,162	0.02	\$ 1,307	0.03	\$ 1,453	0.01	\$ 735								
Clinical Supervisor	1.57	\$ 133,139	1.05	\$ 89,033	0.15	\$ 13,092	0.09	\$ 7,738	0.10	\$ 8,705	0.11	\$ 9,677	0.06	\$ 4,895								
Program Director	0.71	\$ 69,418	0.48	\$ 46,421	0.07	\$ 6,826	0.04	\$ 4,035	0.05	\$ 4,539	0.05	\$ 5,045	0.03	\$ 2,552								
Intake Coordinator /Admin Support	0.00	\$ -	0.00	\$ -	0.00	\$ -	0.00	\$ -	0.00	\$ -	0.00	\$ -	0.00	\$ -								
Mental Health Director	0.22	\$ 26,885	0.15	\$ 17,979	0.02	\$ 2,644	0.01	\$ 1,563	0.01	\$ 1,758	0.02	\$ 1,954	0.01	\$ 988								
Chief Program Officer	0.10	\$ 7,476	0.07	\$ 4,999	0.01	\$ 735	0.01	\$ 435	0.01	\$ 489	0.01	\$ 543	0.00	\$ 275								
Quality Management Associates	1.42	\$ 59,237	0.95	\$ 39,613	0.14	\$ 5,825	0.08	\$ 3,443	0.09	\$ 3,873	0.10	\$ 4,305	0.05	\$ 2,178								
Compliance Manager	0.25	\$ 20,505	0.17	\$ 13,712	0.02	\$ 2,016	0.01	\$ 1,192	0.02	\$ 1,341	0.02	\$ 1,490	0.01	\$ 754								
Information System Coordinator	0.20	\$ 15,485	0.13	\$ 10,355	0.02	\$ 1,523	0.01	\$ 900	0.01	\$ 1,012	0.01	\$ 1,125	0.01	\$ 569								
Totals:	13.73	992,917	9.18	663,982	1.35	97,636	0.79	57,710	0.90	64,917	1.00	72,165	0.51	36,507								
Employee Benefits:	26%	258,158	26%	172,635	26%	25,385	26%	15,004	26%	16,878	26%	18,763	26%	9,493								
TOTAL SALARIES & BENEFITS		\$ 1,251,075		836,617		123,021		\$ 72,714		81,795		90,928		46,000								

Appendix B - DPH 4: Operating Expenses Detail

Contract ID Number <u>1000010827</u>		Appendix Number <u>B-1</u>					
Program Name <u>OUTPATIENT SERVICES</u>		Page Number <u>3</u>					
Program Code <u>38GSOP</u>		Fiscal Year <u>2020-2021</u>					
		Funding Notification Date <u>10/6/2020</u>					
Expense Categories & Line Items	TOTAL	251962-10000-10001670-0001 (A-1) Mode 15	251962-10000-10001670-0001 (A-1) Mode 45	251962-10000-10001670-0001 (A-3)	251962-10002-10001803-0002 (A-1) Mode 45	251962-10002-10001803-0006 (A-1) Mode 15	251962-10002-10001803-0018 (A-1) Mode 45
Funding Term	7/1/2020-6/30/2021	7/1/2020-6/30/2021	7/1/2020-6/30/2021	7/1/2020-6/30/2021	7/1/2020-6/30/2021	7/1/2020-6/30/2021	7/1/2020-6/30/2021
Rent	\$ 79,330	\$ 53,456	\$ 7,952	\$ 3,705	\$ 5,356	\$ 5,940	\$ 2,921
Utilities (telephone, electricity, water, gas)	\$ 35,313	\$ 23,658	\$ 3,548	\$ 1,700	\$ 2,386	\$ 2,718	\$ 1,303
Building Repair/Maintenance	\$ 36,257	\$ 25,093	\$ 3,562	\$ 1,107	\$ 2,399	\$ 2,788	\$ 1,308
Occupancy Total:	\$ 150,900	\$ 102,207	\$ 15,062	\$ 6,512	\$ 10,140	\$ 11,446	\$ 5,533
Office Supplies	\$ 10,275	\$ 6,318	\$ 1,357	\$ 550	\$ 626	\$ 702	\$ 722
Program Supplies	\$ 20,647	\$ 13,777	\$ 2,028	\$ 1,200	\$ 1,366	\$ 1,531	\$ 745
Computer Hardware/Software	\$ 42,992	\$ 29,587	\$ 4,223	\$ 1,500	\$ 2,844	\$ 3,287	\$ 1,551
Materials & Supplies Total:	\$ 73,914	\$ 49,682	\$ 7,608	\$ 3,250	\$ 4,836	\$ 5,520	\$ 3,018
Training/Staff Development	\$ 27,230	\$ 18,169	\$ 2,675	\$ 1,583	\$ 1,801	\$ 2,019	\$ 983
Insurance	\$ 7,582	\$ 5,059	\$ 745	\$ 440	\$ 502	\$ 562	\$ 274
Professional License	\$ 3,318	\$ 2,214	\$ 326	\$ 193	\$ 219	\$ 246	\$ 120
Equipment Lease & Maintenance	\$ 1,593	\$ 1,063	\$ 156	\$ 93	\$ 105	\$ 118	\$ 58
General Operating Total:	\$ 39,723	\$ 26,505	\$ 3,902	\$ 2,309	\$ 2,628	\$ 2,945	\$ 1,434
Local Travel	\$ 62,525	\$ 43,520	\$ 6,142	\$ 1,634	\$ 4,137	4,836	\$ 2,256
Staff Travel Total:	\$ 62,525	\$ 43,520	\$ 6,142	\$ 1,634	\$ 4,137	\$ 4,836	\$ 2,256
Consultant/Subcontractor (TSL Consulting, Database Maintenance & Support for CANS & Medi-Cal Billing, rate \$ 95 hr. X 149.90 hrs)	\$ 14,240	\$ 9,501	\$ 1,399	\$ 828	\$ 942	\$ 1,056	\$ 514
Consultant/Subcontractor Total:	\$ 14,240	\$ 9,501	\$ 1,399	\$ 828	\$ 942	\$ 1,056	\$ 514
Resource Family Pass-Through	\$ 43,190	\$ -	\$ -	\$ 43,190	\$ -	\$ -	\$ -
Other Total:	\$ 43,190	\$ -	\$ -	\$ 43,190	\$ -	\$ -	\$ -
TOTAL OPERATING EXPENSE	\$ 384,492	\$ 231,416	\$ 34,113	\$ 57,723	\$ 22,683	\$ 25,802	\$ 12,755

Appendix B - DPH 2: Department of Public Health Cost Reporting/Data Collection (CRDC)

DHCS Legal Entity Number **00510**Provider Name **ALTERNATIVE FAMILY SERVICES, INC.**Provider Number **38GS****THERAPEUTIC VISITATION**Contract ID Number **100010827**

B-2

Page: **1**Fiscal Year **2020-2021**Funding Notification Date **10/6/2020**

Program Name	THERAPEUTIC VISITATION	THERAPEUTIC VISITATION	THERAPEUTIC VISITATION	THERAPEUTIC VISITATION	
Program Code	38GS01	38GS01	38GS01	38GS01	
Mode/SFC (MH) or Modality (SUD)	15/01-09	15/10-57	45/20-29	45/20-29	
Service Description	Case Mgt Brokerage	Mental Health Services	Mode 45 Fee for Service	Mode 45 Fee for Service	
Funding Term (07/01/2020-06/30/2021):	07/01/2020-06/30/2021	07/01/2020-06/30/2021	07/01/2020-06/30/2021	07/01/2020-06/30/2021	
FUNDING USES					TOTAL
Salaries & Employee Benefits	56,617	320,837	28,034	100,622	506,110
Operating Expenses	15,701	88,974	7,773	27,902	140,350
Subtotal Direct Expenses	72,318	409,811	35,807	128,524	646,460
Indirect Expenses	10,848	61,469	5,370	19,281	96,968
TOTAL FUNDING USES	83,166	471,280	41,177	147,805	743,428
BHS MENTAL HEALTH FUNDING SOURCES	Dept-Auth-Proj-Activity				
MH CYF Fed SDMC FFP (50%)	251962-10000-10001670-0001	41,583	235,640		277,223
MH CYF State 2011 PSR-EPST	251962-10000-10001670-0001	41,583	235,640		277,223
MH WO HSA CWS Non-IVE Overmatch	251962-10002-10001803-0002			41,177	41,177
MH CYF County General Fund	251962-10000-10001670-0001			147,805	147,805
TOTAL DPH FUNDING SOURCES		83,166	471,280	41,177	743,428
TOTAL FUNDING SOURCES (DPH AND NON-DPH)	\$	83,166	471,280	41,177	743,428
BHS UNITS OF SERVICE AND UNIT COST					
Number of Beds Purchased					
SUD Only - Number of Outpatient Group Counseling Sessions					
SUD Only - Licensed Capacity for Narcotic Treatment Programs					
Payment Method	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	
DPH Units of Service	38,682	117,820	196	704	157,402
Unit Type	Staff Minute	Staff Minute	Staff Hours	Staff Hours	
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES Only)	\$ 2.15	\$ 4.00	\$ 210.05	\$ 210.05	
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)	\$ 2.15	\$ 4.00	\$ 210.05	\$ 210.05	
Published Rate (Medi-Cal Providers Only)	\$ 6.00	\$ 7.00	N/A	N/A	Total UDC
Unduplicated Clients (UDC)	11	32	16	16	60

Appendix B - DPH 4: Operating Expenses Detail

Contract ID Number <u>1000010827</u>		Appendix Number <u>B-2</u>		
Program Name <u>THERAPEUTIC VISITATION</u>		Page Number <u>3</u>		
Program Code <u>38GS01</u>		Fiscal Year <u>2020-2021</u>		
		Funding Notification Date <u>10/6/2020</u>		
Expense Categories & Line Items	TOTAL	251962-10000-10001670-0001 (A-2) Mode 15	251962-10000-10001670-0001 (A-2) Mode 45	251962-10002-10001803-0002 (A-2) Mode 45
Funding Term	7/1/2020-6/30/2021	7/1/2020-6/30/2021	7/1/2020-6/30/2021	7/1/2020-6/30/2021
Rent	\$ 34,373	\$ 26,047	\$ 6,494	\$ 1,832
Utilities (telephone, electricity, water, gas)	\$ 14,217	\$ 10,488	\$ 2,897	\$ 817
Building Repair/Maintenance	\$ 14,668	\$ 10,939	\$ 2,909	\$ 820
Occupancy Total:	\$ 63,258	\$ 47,474	\$ 12,300	\$ 3,469
Office Supplies	\$ 4,225	\$ 2,857	\$ 1,154	\$ 229
Program Supplies	\$ 8,352	\$ 6,229	\$ 1,656	\$ 467
Computer Hardware/Software	\$ 17,392	\$ 12,971	\$ 3,448	\$ 973
Materials & Supplies Total:	\$ 29,969	\$ 22,057	\$ 6,258	\$ 1,669
Training/Staff Development	\$ 11,015	\$ 8,215	\$ 2,184	\$ 616
Insurance	\$ 3,067	\$ 2,287	\$ 608	\$ 172
Professional License	\$ 1,342	\$ 1,001	\$ 266	\$ 75
Equipment Lease & Maintenance	\$ 645	\$ 481	\$ 128	\$ 36
General Operating Total:	\$ 16,069	\$ 11,984	\$ 3,186	\$ 899
Local Travel	\$ 25,294	\$ 18,864	\$ 5,015	\$ 1,415
Staff Travel Total:	\$ 25,294	\$ 18,864	\$ 5,015	\$ 1,415
Consultant/Subcontractor (TSL Consulting, Database Maintenance & Support for CANS & Medi-Cal Billing, rate \$ 95 hr. X 60.63 hrs)	\$ 5,760	\$ 4,296	\$ 1,142	\$ 322
Consultant/Subcontractor Total:	\$ 5,760	\$ 4,296	\$ 1,142	\$ 322
COVID Supplies	\$ -	\$ -	\$ -	\$ -
Resource Family Pass-Through	\$ -	\$ -	\$ -	\$ -
Other Total:	\$ -	\$ -	\$ -	\$ -
TOTAL OPERATING EXPENSE	\$ 140,350	\$ 104,675	\$ 27,902	\$ 7,773

Appendix E
Alternative Family Services, Inc.(Contract ID: 1000010827)

Appendix E

HIPAA Business Associate Agreement

APPENDIX E



San Francisco Department of Public Health
Business Associate Agreement

This Business Associate Agreement (“BAA”) supplements and is made a part of the contract by and between the City and County of San Francisco, the Covered Entity (“CE”), and Contractor, the Business Associate (“BA”) (the “Agreement”). To the extent that the terms of the Agreement are inconsistent with the terms of this BAA, the terms of this BAA shall control.

RECITALS

- A. CE, by and through the San Francisco Department of Public Health (“SFDPH”), wishes to disclose certain information to BA pursuant to the terms of the Agreement, some of which may constitute Protected Health Information (“PHI”) (defined below).
- B. For purposes of the Agreement, CE requires Contractor, even if Contractor is also a covered entity under HIPAA, to comply with the terms and conditions of this BAA as a BA of CE.
- C. CE and BA intend to protect the privacy and provide for the security of PHI disclosed to BA pursuant to the Agreement in compliance with the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 (“HIPAA”), the Health Information Technology for Economic and Clinical Health Act, Public Law 111-005 (“the HITECH Act”), and regulations promulgated there under by the U.S. Department of Health and Human Services (the “HIPAA Regulations”) and other applicable laws, including, but not limited to, California Civil Code §§ 56, et seq., California Health and Safety Code § 1280.15, California Civil Code §§ 1798, et seq., California Welfare & Institutions Code §§5328, et seq., and the regulations promulgated there under (the “California Regulations”).
- D. As part of the HIPAA Regulations, the Privacy Rule and the Security Rule (defined below) require CE to enter into a contract containing specific requirements with BA prior to the disclosure of PHI, as set forth in, but not limited to, Title 45, Sections 164.314(a), 164.502(a) and (e) and 164.504(e) of the Code of Federal Regulations (“C.F.R.”) and contained in this BAA.
- E. BA enters into agreements with CE that require the CE to disclose certain identifiable health information to BA. The parties desire to enter into this BAA to permit BA to have access to such information and comply with the BA requirements of HIPAA, the HITECH Act, and the corresponding Regulations.

In consideration of the mutual promises below and the exchange of information pursuant to this BAA, the parties agree as follows:

1. Definitions.

a. Breach means the unauthorized acquisition, access, use, or disclosure of PHI that compromises the security or privacy of such information, except where an unauthorized person to whom such information is disclosed would not reasonably have been able to retain such information, and shall have the meaning given to such term under the HITECH Act and HIPAA Regulations [42 U.S.C. Section 17921 and 45 C.F.R. Section 164.402], as well as California Civil Code Sections 1798.29 and 1798.82.

APPENDIX E



San Francisco Department of Public Health
Business Associate Agreement

b. Breach Notification Rule shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and D.

c. Business Associate is a person or entity that performs certain functions or activities that involve the use or disclosure of protected health information received from a covered entity, but other than in the capacity of a member of the workforce of such covered entity or arrangement, and shall have the meaning given to such term under the Privacy Rule, the Security Rule, and the HITECH Act, including, but not limited to, 42 U.S.C. Section 17938 and 45 C.F.R. Section 160.103.

d. Covered Entity means a health plan, a health care clearinghouse, or a health care provider who transmits any information in electronic form in connection with a transaction covered under HIPAA Regulations, and shall have the meaning given to such term under the Privacy Rule and the Security Rule, including, but not limited to, 45 C.F.R. Section 160.103.

e. Data Aggregation means the combining of Protected Information by the BA with the Protected Information received by the BA in its capacity as a BA of another CE, to permit data analyses that relate to the health care operations of the respective covered entities, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

f. Designated Record Set means a group of records maintained by or for a CE, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

g. Electronic Protected Health Information means Protected Health Information that is maintained in or transmitted by electronic media and shall have the meaning given to such term under HIPAA and the HIPAA Regulations, including, but not limited to, 45 C.F.R. Section 160.103. For the purposes of this BAA, Electronic PHI includes all computerized data, as defined in California Civil Code Sections 1798.29 and 1798.82.

h. Electronic Health Record means an electronic record of health-related information on an individual that is created, gathered, managed, and consulted by authorized health care clinicians and staff, and shall have the meaning given to such term under the HITECH Act, including, but not limited to, 42 U.S.C. Section 17921.

i. Health Care Operations shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

j. Privacy Rule shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and E.

k. Protected Health Information or PHI means any information, including electronic PHI, whether oral or recorded in any form or medium: (i) that relates to the past, present or future physical or mental condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual; and (ii) that identifies the individual or

APPENDIX E



San Francisco Department of Public Health

Business Associate Agreement

with respect to which there is a reasonable basis to believe the information can be used to identify the individual, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Sections 160.103 and 164.501. For the purposes of this BAA, PHI includes all medical information and health insurance information as defined in California Civil Code Sections 56.05 and 1798.82.

l. Protected Information shall mean PHI provided by CE to BA or created, maintained, received or transmitted by BA on CE's behalf.

m. Security Incident means the attempted or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system, and shall have the meaning given to such term under the Security Rule, including, but not limited to, 45 C.F.R. Section 164.304.

n. Security Rule shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and C.

o. Unsecured PHI means PHI that is not secured by a technology standard that renders PHI unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute, and shall have the meaning given to such term under the HITECH Act and any guidance issued pursuant to such Act including, but not limited to, 42 U.S.C. Section 17932(h) and 45 C.F.R. Section 164.402.

2. Obligations of Business Associate.

a. Attestations. Except when CE's data privacy officer exempts BA in writing, the BA shall complete the following forms, attached and incorporated by reference as though fully set forth herein, SFDPH Attestations for Privacy (Attachment 1) and Data Security (Attachment 2) within sixty (60) calendar days from the execution of the Agreement. If CE makes substantial changes to any of these forms during the term of the Agreement, the BA will be required to complete CE's updated forms within sixty (60) calendar days from the date that CE provides BA with written notice of such changes. BA shall retain such records for a period of seven years after the Agreement terminates and shall make all such records available to CE within 15 calendar days of a written request by CE.

b. User Training. The BA shall provide, and shall ensure that BA subcontractors, provide, training on PHI privacy and security, including HIPAA and HITECH and its regulations, to each employee or agent that will access, use or disclose Protected Information, upon hire and/or prior to accessing, using or disclosing Protected Information for the first time, and at least annually thereafter during the term of the Agreement. BA shall maintain, and shall ensure that BA subcontractors maintain, records indicating the name of each employee or agent and date on which the PHI privacy and security trainings were completed. BA shall retain, and ensure that BA subcontractors retain, such records for a period of seven years after the Agreement terminates and shall make all such records available to CE within 15 calendar days of a written request by CE.

APPENDIX E



San Francisco Department of Public Health
Business Associate Agreement

c. Permitted Uses. BA may use, access, and/or disclose Protected Information only for the purpose of performing BA's obligations for, or on behalf of, the City and as permitted or required under the Agreement and BAA, or as required by law. Further, BA shall not use Protected Information in any manner that would constitute a violation of the Privacy Rule or the HITECH Act if so used by CE. However, BA may use Protected Information as necessary (i) for the proper management and administration of BA; (ii) to carry out the legal responsibilities of BA; (iii) as required by law; or (iv) for Data Aggregation purposes relating to the Health Care Operations of CE [45 C.F.R. Sections 164.502, 164.504(e)(2), and 164.504(e)(4)(i)].

d. Permitted Disclosures. BA shall disclose Protected Information only for the purpose of performing BA's obligations for, or on behalf of, the City and as permitted or required under the Agreement and BAA, or as required by law. BA shall not disclose Protected Information in any manner that would constitute a violation of the Privacy Rule or the HITECH Act if so disclosed by CE. However, BA may disclose Protected Information as necessary (i) for the proper management and administration of BA; (ii) to carry out the legal responsibilities of BA; (iii) as required by law; or (iv) for Data Aggregation purposes relating to the Health Care Operations of CE. If BA discloses Protected Information to a third party, BA must obtain, prior to making any such disclosure, (i) reasonable written assurances from such third party that such Protected Information will be held confidential as provided pursuant to this BAA and used or disclosed only as required by law or for the purposes for which it was disclosed to such third party, and (ii) a written agreement from such third party to immediately notify BA of any breaches, security incidents, or unauthorized uses or disclosures of the Protected Information in accordance with paragraph 2 (n) of this BAA, to the extent it has obtained knowledge of such occurrences [42 U.S.C. Section 17932; 45 C.F.R. Section 164.504(e)]. BA may disclose PHI to a BA that is a subcontractor and may allow the subcontractor to create, receive, maintain, or transmit Protected Information on its behalf, if the BA obtains satisfactory assurances, in accordance with 45 C.F.R. Section 164.504(e)(1), that the subcontractor will appropriately safeguard the information [45 C.F.R. Section 164.502(e)(1)(ii)].

e. Prohibited Uses and Disclosures. BA shall not use or disclose Protected Information other than as permitted or required by the Agreement and BAA, or as required by law. BA shall not use or disclose Protected Information for fundraising or marketing purposes. BA shall not disclose Protected Information to a health plan for payment or health care operations purposes if the patient has requested this special restriction, and has paid out of pocket in full for the health care item or service to which the Protected Information solely relates [42 U.S.C. Section 17935(a) and 45 C.F.R. Section 164.522(a)(1)(vi)]. BA shall not directly or indirectly receive remuneration in exchange for Protected Information, except with the prior written consent of CE and as permitted by the HITECH Act, 42 U.S.C. Section 17935(d)(2), and the HIPAA regulations, 45 C.F.R. Section 164.502(a)(5)(ii); however, this prohibition shall not affect payment by CE to BA for services provided pursuant to the Agreement.

f. Appropriate Safeguards. BA shall take the appropriate security measures to protect the confidentiality, integrity and availability of PHI that it creates, receives, maintains, or transmits on behalf

APPENDIX E



San Francisco Department of Public Health
Business Associate Agreement

of the CE, and shall prevent any use or disclosure of PHI other than as permitted by the Agreement or this BAA, including, but not limited to, administrative, physical and technical safeguards in accordance with the Security Rule, including, but not limited to, 45 C.F.R. Sections 164.306, 164.308, 164.310, 164.312, 164.314 164.316, and 164.504(e)(2)(ii)(B). BA shall comply with the policies and procedures and documentation requirements of the Security Rule, including, but not limited to, 45 C.F.R. Section 164.316, and 42 U.S.C. Section 17931. BA is responsible for any civil penalties assessed due to an audit or investigation of BA, in accordance with 42 U.S.C. Section 17934(c).

g. Business Associate's Subcontractors and Agents. BA shall ensure that any agents and subcontractors that create, receive, maintain or transmit Protected Information on behalf of BA, agree in writing to the same restrictions and conditions that apply to BA with respect to such PHI and implement the safeguards required by paragraph 2.f. above with respect to Electronic PHI [45 C.F.R. Section 164.504(e)(2) through (e)(5); 45 C.F.R. Section 164.308(b)]. BA shall mitigate the effects of any such violation.

h. Accounting of Disclosures. Within ten (10) calendar days of a request by CE for an accounting of disclosures of Protected Information or upon any disclosure of Protected Information for which CE is required to account to an individual, BA and its agents and subcontractors shall make available to CE the information required to provide an accounting of disclosures to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.528, and the HITECH Act, including but not limited to 42 U.S.C. Section 17935 (c), as determined by CE. BA agrees to implement a process that allows for an accounting to be collected and maintained by BA and its agents and subcontractors for at least seven (7) years prior to the request. However, accounting of disclosures from an Electronic Health Record for treatment, payment or health care operations purposes are required to be collected and maintained for only three (3) years prior to the request, and only to the extent that BA maintains an Electronic Health Record. At a minimum, the information collected and maintained shall include: (i) the date of disclosure; (ii) the name of the entity or person who received Protected Information and, if known, the address of the entity or person; (iii) a brief description of Protected Information disclosed; and (iv) a brief statement of purpose of the disclosure that reasonably informs the individual of the basis for the disclosure, or a copy of the individual's authorization, or a copy of the written request for disclosure [45 C.F.R. 164.528(b)(2)]. If an individual or an individual's representative submits a request for an accounting directly to BA or its agents or subcontractors, BA shall forward the request to CE in writing within five (5) calendar days.

i. Access to Protected Information. BA shall make Protected Information maintained by BA or its agents or subcontractors in Designated Record Sets available to CE for inspection and copying within (5) days of request by CE to enable CE to fulfill its obligations under state law [Health and Safety Code Section 123110] and the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.524 [45 C.F.R. Section 164.504(e)(2)(ii)(E)]. If BA maintains Protected Information in electronic format, BA shall provide such information in electronic format as necessary to enable CE to fulfill its obligations

APPENDIX E



San Francisco Department of Public Health
Business Associate Agreement

under the HITECH Act and HIPAA Regulations, including, but not limited to, 42 U.S.C. Section 17935(e) and 45 C.F.R. 164.524.

j. Amendment of Protected Information. Within ten (10) days of a request by CE for an amendment of Protected Information or a record about an individual contained in a Designated Record Set, BA and its agents and subcontractors shall make such Protected Information available to CE for amendment and incorporate any such amendment or other documentation to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R Section 164.526. If an individual requests an amendment of Protected Information directly from BA or its agents or subcontractors, BA must notify CE in writing within five (5) days of the request and of any approval or denial of amendment of Protected Information maintained by BA or its agents or subcontractors [45 C.F.R. Section 164.504(e)(2)(ii)(F)].

k. Governmental Access to Records. BA shall make its internal practices, books and records relating to the use and disclosure of Protected Information available to CE and to the Secretary of the U.S. Department of Health and Human Services (the "Secretary") for purposes of determining BA's compliance with HIPAA [45 C.F.R. Section 164.504(e)(2)(ii)(I)]. BA shall provide CE a copy of any Protected Information and other documents and records that BA provides to the Secretary concurrently with providing such Protected Information to the Secretary.

l. Minimum Necessary. BA, its agents and subcontractors shall request, use and disclose only the minimum amount of Protected Information necessary to accomplish the intended purpose of such use, disclosure, or request. [42 U.S.C. Section 17935(b); 45 C.F.R. Section 164.514(d)]. BA understands and agrees that the definition of "minimum necessary" is in flux and shall keep itself informed of guidance issued by the Secretary with respect to what constitutes "minimum necessary" to accomplish the intended purpose in accordance with HIPAA and HIPAA Regulations.

m. Data Ownership. BA acknowledges that BA has no ownership rights with respect to the Protected Information.

n. Notification of Breach. BA shall notify CE within 5 calendar days of any breach of Protected Information; any use or disclosure of Protected Information not permitted by the BAA; any Security Incident (except as otherwise provided below) related to Protected Information, and any use or disclosure of data in violation of any applicable federal or state laws by BA or its agents or subcontractors. The notification shall include, to the extent possible, the identification of each individual whose unsecured Protected Information has been, or is reasonably believed by the BA to have been, accessed, acquired, used, or disclosed, as well as any other available information that CE is required to include in notification to the individual, the media, the Secretary, and any other entity under the Breach Notification Rule and any other applicable state or federal laws, including, but not limited, to 45 C.F.R. Section 164.404 through 45 C.F.R. Section 164.408, at the time of the notification required by this paragraph or promptly thereafter as information becomes available. BA shall take (i) prompt corrective action to cure any deficiencies and (ii) any action pertaining to unauthorized uses or disclosures required

APPENDIX E



San Francisco Department of Public Health
Business Associate Agreement

by applicable federal and state laws. [42 U.S.C. Section 17921; 42 U.S.C. Section 17932; 45 C.F.R. 164.410; 45 C.F.R. Section 164.504(e)(2)(ii)(C); 45 C.F.R. Section 164.308(b)]

o. Breach Pattern or Practice by Business Associate's Subcontractors and Agents.

Pursuant to 42 U.S.C. Section 17934(b) and 45 C.F.R. Section 164.504(e)(1)(iii), if the BA knows of a pattern of activity or practice of a subcontractor or agent that constitutes a material breach or violation of the subcontractor or agent's obligations under the Contract or this BAA, the BA must take reasonable steps to cure the breach or end the violation. If the steps are unsuccessful, the BA must terminate the contractual arrangement with its subcontractor or agent, if feasible. BA shall provide written notice to CE of any pattern of activity or practice of a subcontractor or agent that BA believes constitutes a material breach or violation of the subcontractor or agent's obligations under the Contract or this BAA within five (5) calendar days of discovery and shall meet with CE to discuss and attempt to resolve the problem as one of the reasonable steps to cure the breach or end the violation.

3. Termination.

a. Material Breach. A breach by BA of any provision of this BAA, as determined by CE, shall constitute a material breach of the Agreement and this BAA and shall provide grounds for immediate termination of the Agreement and this BAA, any provision in the AGREEMENT to the contrary notwithstanding. [45 C.F.R. Section 164.504(e)(2)(iii).]

b. Judicial or Administrative Proceedings. CE may terminate the Agreement and this BAA, effective immediately, if (i) BA is named as defendant in a criminal proceeding for a violation of HIPAA, the HITECH Act, the HIPAA Regulations or other security or privacy laws or (ii) a finding or stipulation that the BA has violated any standard or requirement of HIPAA, the HITECH Act, the HIPAA Regulations or other security or privacy laws is made in any administrative or civil proceeding in which the party has been joined.

c. Effect of Termination. Upon termination of the Agreement and this BAA for any reason, BA shall, at the option of CE, return or destroy all Protected Information that BA and its agents and subcontractors still maintain in any form, and shall retain no copies of such Protected Information. If return or destruction is not feasible, as determined by CE, BA shall continue to extend the protections and satisfy the obligations of Section 2 of this BAA to such information, and limit further use and disclosure of such PHI to those purposes that make the return or destruction of the information infeasible [45 C.F.R. Section 164.504(e)(2)(ii)(J)]. If CE elects destruction of the PHI, BA shall certify in writing to CE that such PHI has been destroyed in accordance with the Secretary's guidance regarding proper destruction of PHI.

d. Civil and Criminal Penalties. BA understands and agrees that it is subject to civil or criminal penalties applicable to BA for unauthorized use, access or disclosure of Protected Information in accordance with the HIPAA Regulations and the HITECH Act including, but not limited to, 42 U.S.C. 17934 (c).

APPENDIX E



San Francisco Department of Public Health
Business Associate Agreement

e. Disclaimer. CE makes no warranty or representation that compliance by BA with this BAA, HIPAA, the HITECH Act, or the HIPAA Regulations or corresponding California law provisions will be adequate or satisfactory for BA's own purposes. BA is solely responsible for all decisions made by BA regarding the safeguarding of PHI.

4. Amendment to Comply with Law.

The parties acknowledge that state and federal laws relating to data security and privacy are rapidly evolving and that amendment of the Agreement or this BAA may be required to provide for procedures to ensure compliance with such developments. The parties specifically agree to take such action as is necessary to implement the standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations and other applicable state or federal laws relating to the security or confidentiality of PHI. The parties understand and agree that CE must receive satisfactory written assurance from BA that BA will adequately safeguard all Protected Information. Upon the request of either party, the other party agrees to promptly enter into negotiations concerning the terms of an amendment to this BAA embodying written assurances consistent with the updated standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations or other applicable state or federal laws. CE may terminate the Agreement upon thirty (30) days written notice in the event (i) BA does not promptly enter into negotiations to amend the Agreement or this BAA when requested by CE pursuant to this section or (ii) BA does not enter into an amendment to the Agreement or this BAA providing assurances regarding the safeguarding of PHI that CE, in its sole discretion, deems sufficient to satisfy the standards and requirements of applicable laws.

5. Reimbursement for Fines or Penalties.

In the event that CE pays a fine to a state or federal regulatory agency, and/or is assessed civil penalties or damages through private rights of action, based on an impermissible access, use or disclosure of PHI by BA or its subcontractors or agents, then BA shall reimburse CE in the amount of such fine or penalties or damages within thirty (30) calendar days from City's written notice to BA of such fines, penalties or damages.

Attachment 1 – SFDPH Privacy Attestation, version 6-7-2017

Attachment 2 – SFDPH Data Security Attestation, version 6-7-2017

Office of Compliance and Privacy Affairs
San Francisco Department of Public Health
101 Grove Street, Room 330, San Francisco, CA 94102
Email: compliance.privacy@sfdph.org
Hotline (Toll-Free): 1-855-729-6040

Contractor Name:	Alternative Family Services	Contractor City Vendor ID	0000025708
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PRIVACY ATTESTATION

INSTRUCTIONS: Contractors and Partners who receive or have access to health or medical information or electronic health record systems maintained by SFPDH must complete this form. Retain completed Attestations in your files for a period of 7 years. Be prepared to submit completed attestations, along with evidence related to the following items, if requested to do so by SFPDH.

Exceptions: If you believe that a requirement is Not Applicable to you, see instructions below in Section IV on how to request clarification or obtain an exception.

I. All Contractors.

DOES YOUR ORGANIZATION...							Yes	No*
A	Have formal Privacy Policies that comply with the Health Insurance Portability and Accountability Act (HIPAA)?						<input type="checkbox"/>	<input type="checkbox"/>
B	Have a Privacy Officer or other individual designated as the person in charge of investigating privacy breaches or related incidents?						<input type="checkbox"/>	<input type="checkbox"/>
	If yes:	Name & Title:		Phone #		Email:		
C	Require health information Privacy Training upon hire and annually thereafter for all employees who have access to health information? [Retain documentation of trainings for a period of 7 years.] [SFPDH privacy training materials are available for use; contact OCPA at 1-855-729-6040.]						<input type="checkbox"/>	<input type="checkbox"/>
D	Have proof that employees have signed a form upon hire and annually thereafter, with their name and the date, acknowledging that they have received health information privacy training? [Retain documentation of acknowledgement of trainings for a period of 7 years.]						<input type="checkbox"/>	<input type="checkbox"/>
E	Have (or will have if/when applicable) Business Associate Agreements with subcontractors who create, receive, maintain, transmit, or access SFPDH's health information?						<input type="checkbox"/>	<input type="checkbox"/>
F	Assure that staff who create, or transfer health information (via laptop, USB/thumb-drive, handheld), have prior supervisory authorization to do so AND that health information is only transferred or created on encrypted devices approved by SFPDH Information Security staff?						<input type="checkbox"/>	<input type="checkbox"/>

II. Contractors who serve patients/clients and have access to SFPDH PHI, must also complete this section.

If Applicable: DOES YOUR ORGANIZATION...							Yes	No*
G	Have (or will have if/when applicable) evidence that SFPDH Service Desk (628-206-SERV) was notified to de-provision employees who have access to SFPDH health information record systems within 2 business days for regular terminations and within 24 hours for terminations due to cause?						<input type="checkbox"/>	<input type="checkbox"/>
H	Have evidence in each patient's / client's chart or electronic file that a Privacy Notice that meets HIPAA regulations was provided in the patient's / client's preferred language? (English, Cantonese, Vietnamese, Tagalog, Spanish, Russian forms may be required and are available from SFPDH.)						<input type="checkbox"/>	<input type="checkbox"/>
I	Visibly post the Summary of the Notice of Privacy Practices in all six languages in common patient areas of your treatment facility?						<input type="checkbox"/>	<input type="checkbox"/>
J	Document each disclosure of a patient's/client's health information for purposes <u>other than</u> treatment, payment, or operations?						<input type="checkbox"/>	<input type="checkbox"/>
K	When required by law, have proof that signed authorization for disclosure forms (that meet the requirements of the HIPAA Privacy Rule) are obtained PRIOR to releasing a patient's/client's health information?						<input type="checkbox"/>	<input type="checkbox"/>

III. ATTEST: Under penalty of perjury, I hereby attest that to the best of my knowledge the information herein is true and correct and that I have authority to sign on behalf of and bind Contractor listed above.

ATTESTED by Privacy Officer or designated person	Name: (print)		Signature		Date	
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IV. *EXCEPTIONS: If you have answered "NO" to any question or believe a question is Not Applicable, please contact OCPA at **1-855-729-6040** or compliance.privacy@sfdph.org for a consultation. All "No" or "N/A" answers must be reviewed and approved by OCPA below.

EXCEPTION(S) APPROVED by OCPA	Name (print)		Signature		Date	
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Contractor Name:	Alternative Family Services	Contractor City Vendor ID	0000025708
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DATA SECURITY ATTESTATION

INSTRUCTIONS: Contractors and Partners who receive or have access to health or medical information or electronic health record systems maintained by SFDPH must complete this form. Retain completed Attestations in your files for a period of 7 years. Be prepared to submit completed attestations, along with evidence related to the following items, if requested to do so by SFDPH.

Exceptions: If you believe that a requirement is Not Applicable to you, see instructions in Section III below on how to request clarification or obtain an exception.

I. All Contractors.

DOES YOUR ORGANIZATION...						Yes	No*
A	Conduct assessments/audits of your data security safeguards to demonstrate and document compliance with your security policies and the requirements of HIPAA/HITECH at least every two years? [Retain documentation for a period of 7 years]						
B	Use findings from the assessments/audits to identify and mitigate known risks into documented remediation plans?						
	Date of last Data Security Risk Assessment/Audit:						
	Name of firm or person(s) who performed the Assessment/Audit and/or authored the final report:						
C	Have a formal Data Security Awareness Program?						
D	Have formal Data Security Policies and Procedures to detect, contain, and correct security violations that comply with the Health Insurance Portability and Accountability Act (HIPAA) and the Health Information Technology for Economic and Clinical Health Act (HITECH)?						
E	Have a Data Security Officer or other individual designated as the person in charge of ensuring the security of confidential information?						
	If yes:	Name & Title:	Phone #	Email:			
F	Require Data Security Training upon hire and annually thereafter for all employees who have access to health information? [Retain documentation of trainings for a period of 7 years.] [SFDPH data security training materials are available for use; contact OCPA at 1-855-729-6040.]						
G	Have proof that employees have signed a form upon hire and annually, or regularly, thereafter, with their name and the date, acknowledging that they have received data security training? [Retain documentation of acknowledgement of trainings for a period of 7 years.]						
H	Have (or will have if/when applicable) Business Associate Agreements with subcontractors who create, receive, maintain, transmit, or access SFDPH's health information?						
I	Have (or will have if/when applicable) a diagram of how SFDPH data flows between your organization and subcontractors or vendors (including named users, access methods, on-premise data hosts, processing systems, etc.)?						

II. ATTEST: Under penalty of perjury, I hereby attest that to the best of my knowledge the information herein is true and correct and that I have authority to sign on behalf of and bind Contractor listed above.

ATTESTED by Data Security Officer or designated person	Name: (print)		Signature		Date	
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III. *EXCEPTIONS: If you have answered "NO" to any question or believe a question is Not Applicable, please contact OCPA at **1-855-729-6040** or compliance.privacy@sfdph.org for a consultation. All "No" or "N/A" answers must be reviewed and approved by OCPA below.

EXCEPTION(S) APPROVED by OCPA	Name (print)		Signature		Date	
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Appendix F
Alternative Family Services, ID#1000010827
2/1/2021

Appendix F
Invoice

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
COST REIMBURSEMENT INVOICE**

Appendix F
PAGE A

Contract ID#
100010827

Contractor: Alternative Family Services, Inc.

Address: 1421 Guerneville Road, Suite 218, Santa Rosa, CA 95403

Tel. No.: (707) 576-7700
Fax No.:



Funding Term: 07/01/2020 - 06/30/2021

PHP Division: Behavioral Health Services

INVOICE NUMBER:	M01 JL 20
Contract ID #	N/A
Ct. PO No.: POHM	TBD
Fund Source:	MH CYF Fed/ State/ Cnty GF/ WO HSA GF Match
Invoice Period:	July 2020
Final Invoice:	(Check if Yes)

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
B-1 Outpatient PC# - 38KY0P 251962-10000-1001670-0001												
15/ 01 - 09 OP - Case Mgt Brokerage	1,193	5			-	-	0%	0%	1,193	5	100%	100%
15/ 10 - 57, 59 OP - MH Svcs	169,806	59			-	-	0%	0%	169,806	59	100%	100%

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 793,857.00	\$ -	\$ -	0.00%	\$ 793,857.00
Fringe Benefits	\$ 206,402.00	\$ -	\$ -	0.00%	\$ 206,402.00
Total Personnel Expenses	\$ 1,000,259.00	\$ -	\$ -	0.00%	\$ 1,000,259.00
Operating Expenses:					
Occupancy	\$ 120,165.00	\$ -	\$ -	0.00%	\$ 120,165.00
Materials and Supplies	\$ 58,452.00	\$ -	\$ -	0.00%	\$ 58,452.00
General Operating	\$ 31,759.00	\$ -	\$ -	0.00%	\$ 31,759.00
Staff Travel	\$ 49,990.00	\$ -	\$ -	0.00%	\$ 49,990.00
Consultant/Subcontractor	\$ 11,385.00	\$ -	\$ -	0.00%	\$ 11,385.00
Other: Resource Family Pass-Through	\$ 43,190.00	\$ -	\$ -	0.00%	\$ 43,190.00
	\$ -	\$ -	\$ -	0.00%	\$ -
Total Operating Expenses	\$ 314,941.00	\$ -	\$ -	0.00%	\$ 314,941.00
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
TOTAL DIRECT EXPENSES	\$ 1,315,200.00	\$ -	\$ -	0.00%	\$ 1,315,200.00
Indirect Expenses e	\$ 197,278.00	\$ -	\$ -	0.00%	\$ 197,278.00
TOTAL EXPENSES	\$ 1,512,478.00	\$ -	\$ -	0.00%	\$ 1,512,478.00
Less: Initial Payment Recovery					
Other Adjustments (DPH use only)					
REIMBURSEMENT		\$ -			

NOTES:
MH CYF Fed/State/Cnty GF 251962-10000-10001670-0001 \$1,378,913.00
MH WO HSA GF Match 251962-10002-10001803-0006 \$133,565.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____
Printed Name: _____
Title: _____

Date: _____
Phone: _____

Send to:
Behavioral Health Services-Budget/ Invoice Analyst
1380 Howard St., 4th Floor
San Francisco, CA 94103

Or email at:
cbhsinvoices@sfdph.org

DPH Authorization for Payment

Authorized Signatory

Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
COST REIMBURSEMENT INVOICE**

Appendix F
PAGE A

Contract ID#

1000010827

Contractor: Alternative Family Services, Inc.

Address: 1421 Guerneville Road, Suite 218, Santa Rosa, CA 95403

Tel. No.: (707) 576-7700

Fax No.:

BHS

Funding Term: 07/01/2020 - 06/30/2021

PHP Division: Behavioral Health Services

INVOICE NUMBER: M04 JL 20

Contract ID #: N/A

Ct. PO No.: POHM TBD

Fund Source: MH WO HSA CWS Non-IVE Overmatchb

Invoice Period: July 2020

Final Invoice: (Check if Yes)

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
B-1 Outpatient Services PC# - 38GS0P 251962-10002-1001803-0002												
45/ 20 - 29 OS-Cmnty Client Svcs	572	16			-	-	0%	0%	572	16	100%	100%

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 64,917.00	\$ -	\$ -	0.00%	\$ 64,917.00
Fringe Benefits	\$ 16,878.00	\$ -	\$ -	0.00%	\$ 16,878.00
Total Personnel Expenses	\$ 81,795.00	\$ -	\$ -	0.00%	\$ 81,795.00
Operating Expenses:					
Occupancy	\$ 10,140.00	\$ -	\$ -	0.00%	\$ 10,140.00
Materials and Supplies	\$ 4,836.00	\$ -	\$ -	0.00%	\$ 4,836.00
General Operating	\$ 2,628.00	\$ -	\$ -	0.00%	\$ 2,628.00
Staff Travel	\$ 4,137.00	\$ -	\$ -	0.00%	\$ 4,137.00
Consultant/Subcontractor	\$ 942.00	\$ -	\$ -	0.00%	\$ 942.00
Other:	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
Total Operating Expenses	\$ 22,683.00	\$ -	\$ -	0.00%	\$ 22,683.00
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
TOTAL DIRECT EXPENSES	\$ 104,478.00	\$ -	\$ -	0.00%	\$ 104,478.00
Indirect Expenses	\$ 15,672.00	\$ -	\$ -	0.00%	\$ 15,672.00
TOTAL EXPENSES	\$ 120,150.00	\$ -	\$ -	0.00%	\$ 120,150.00
Less: Initial Payment Recovery					
Other Adjustments (DPH use only)					
REIMBURSEMENT		\$ -			

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____
 Printed Name: _____
 Title: _____

Date: _____
 Phone: _____

Send to:
 Behavioral Health Services-Budget/ Invoice Analyst
 1380 Howard St., 4th Floor
 San Francisco, CA 94103
 Or email at:
cbhsinvoices@sfdph.org

DPH Authorization for Payment

 Authorized Signatory

 Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
COST REIMBURSEMENT INVOICE**

Appendix F
PAGE A

Contract ID#

1000010827

INVOICE NUMBER: M05 JL 20

Contractor: Alternative Family Services, Inc.

Contract ID # N/A

Address: 1421 Guerneville Road, Suite 218, Santa Rosa, CA 95403

Ct. PO No.: POHM User Cd

Tel. No.: (707) 576-7700

Fax No.:

BHS

TBD

Fund Source: MH WO HSA CWS Permanency

Invoice Period: July 2020

Final Invoice: (Check if Yes)

Funding Term: 07/01/2020 - 06/30/2021

PHP Division: Behavioral Health Services

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
B-1 Outpatient Services PC# - 38GS0P 251962-10002-1001803-0018												
45/ 20 - 29 OS-Cmnty Client Svcs	322	16			-	-	0%	0%	322	16	100%	100%

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 36,507.00	\$ -	\$ -	0.00%	\$ 36,507.00
Fringe Benefits	\$ 9,493.00	\$ -	\$ -	0.00%	\$ 9,493.00
Total Personnel Expenses	\$ 46,000.00	\$ -	\$ -	0.00%	\$ 46,000.00
Operating Expenses:					
Occupancy	\$ 5,533.00	\$ -	\$ -	0.00%	\$ 5,533.00
Materials and Supplies	\$ 3,018.00	\$ -	\$ -	0.00%	\$ 3,018.00
General Operating	\$ 1,434.00	\$ -	\$ -	0.00%	\$ 1,434.00
Staff Travel	\$ 2,256.00	\$ -	\$ -	0.00%	\$ 2,256.00
Consultant/Subcontractor	\$ 514.00	\$ -	\$ -	0.00%	\$ 514.00
Other:	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
Total Operating Expenses	\$ 12,755.00	\$ -	\$ -	0.00%	\$ 12,755.00
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
TOTAL DIRECT EXPENSES	\$ 58,755.00	\$ -	\$ -	0.00%	\$ 58,755.00
Indirect Expenses	\$ 8,813.00	\$ -	\$ -	0.00%	\$ 8,813.00
TOTAL EXPENSES	\$ 67,568.00	\$ -	\$ -	0.00%	\$ 67,568.00
Less: Initial Payment Recovery					
Other Adjustments (DPH use only)					
REIMBURSEMENT		\$ -			

NOTES:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____
 Printed Name: _____
 Title: _____

Date: _____
 Phone: _____

Send to:
 Behavioral Health Services-Budget/ Invoice Analyst
 1380 Howard St., 4th Floor
 San Francisco, CA 94103
 Or email at:
 cbhsinvoices@sfdph.org

DPH Authorization for Payment

 Authorized Signatory

 Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
COST REIMBURSEMENT INVOICE**

Appendix F
PAGE A

Contract ID#

1000010827

Contractor: Alternative Family Services, Inc.

Address: 1421 Guerneville Road, Suite 218, Santa Rosa, CA 95403

Tel. No.: (707) 576-7700

Fax No.:

Funding Term: 07/01/2020 - 06/30/2021

PHP Division: Behavioral Health Services

BHS

INVOICE NUMBER: M06 JL 20

Contract ID #: N/A

Ct. PO No.: POHM TBD

Fund Source: MH CYF County General Fund

Invoice Period: July 2020

Final Invoice: (Check if Yes)

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
B-1 Outpatient Services PC# - 38GS0P 251962-10000-10001670-0001												
45/ 20 - 29 OS-Cmnty Client Svcs	322	16			-	-	0%	0%	322	16	100%	100%

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 97,636.00	\$ -	\$ -	0.00%	\$ 97,636.00
Fringe Benefits	\$ 25,385.00	\$ -	\$ -	0.00%	\$ 25,385.00
Total Personnel Expenses	\$ 123,021.00	\$ -	\$ -	0.00%	\$ 123,021.00
Operating Expenses:					
Occupancy	\$ 15,062.00	\$ -	\$ -	0.00%	\$ 15,062.00
Materials and Supplies	\$ 7,608.00	\$ -	\$ -	0.00%	\$ 7,608.00
General Operating	\$ 3,902.00	\$ -	\$ -	0.00%	\$ 3,902.00
Staff Travel	\$ 6,142.00	\$ -	\$ -	0.00%	\$ 6,142.00
Consultant/Subcontractor	\$ 1,399.00	\$ -	\$ -	0.00%	\$ 1,399.00
Other:	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
Total Operating Expenses	\$ 34,113.00	\$ -	\$ -	0.00%	\$ 34,113.00
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
TOTAL DIRECT EXPENSES	\$ 157,134.00	\$ -	\$ -	0.00%	\$ 157,134.00
Indirect Expenses	\$ 23,570.00	\$ -	\$ -	0.00%	\$ 23,570.00
TOTAL EXPENSES	\$ 180,704.00	\$ -	\$ -	0.00%	\$ 180,704.00

Less: Initial Payment Recovery		NOTES:
Other Adjustments (DPH use only)		
REIMBURSEMENT	\$ -	

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____
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 Title: _____

Date: _____
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 San Francisco, CA 94103
 Or email at:
 cbhsinvoices@sfdph.org

DPH Authorization for Payment

 Authorized Signatory

 Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
COST REIMBURSEMENT INVOICE**

Appendix F
PAGE A

Contract ID#

1000010827

Contractor: Alternative Family Services, Inc.

Address: 1421 Guerneville Road, Suite 218, Santa Rosa, CA 95403

Tel. No.: (707) 576-7700

Fax No.:

BHS

Funding Term: 07/01/2020 - 06/30/2021

PHP Division: Behavioral Health Services

INVOICE NUMBER: M07 JL 20

Contract ID #: N/A

Ct. PO No.: POHM TBD

Fund Source: MH CYF Fed SDMC/ State 2011 PSR-EPSDT

Invoice Period: July 2020

Final Invoice: (Check if Yes)

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
B-2 Therapeutic Visitation PC# - 38GS01 251962-10000-10001670-0001												
15/ 01 - 09 Case Mgt Brokerage	38,682	11			-	-	0%	0%	38,682	11	100%	100%
15/ 10 - 57 Mental Health Services	117,820	32			-	-	0%	0%	117,820	32	100%	100%

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 299,567.00	\$ -	\$ -	0.00%	\$ 299,567.00
Fringe Benefits	\$ 77,887.00	\$ -	\$ -	0.00%	\$ 77,887.00
Total Personnel Expenses	\$ 377,454.00	\$ -	\$ -	0.00%	\$ 377,454.00
Operating Expenses:					
Occupancy	\$ 47,474.00	\$ -	\$ -	0.00%	\$ 47,474.00
Materials and Supplies	\$ 22,057.00	\$ -	\$ -	0.00%	\$ 22,057.00
General Operating	\$ 11,984.00	\$ -	\$ -	0.00%	\$ 11,984.00
Staff Travel	\$ 18,864.00	\$ -	\$ -	0.00%	\$ 18,864.00
Consultant/Subcontractor	\$ 4,296.00	\$ -	\$ -	0.00%	\$ 4,296.00
Other:	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
Total Operating Expenses	\$ 104,675.00	\$ -	\$ -	0.00%	\$ 104,675.00
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
TOTAL DIRECT EXPENSES	\$ 482,129.00	\$ -	\$ -	0.00%	\$ 482,129.00
Indirect Expenses	\$ 72,317.00	\$ -	\$ -	0.00%	\$ 72,317.00
TOTAL EXPENSES	\$ 554,446.00	\$ -	\$ -	0.00%	\$ 554,446.00

Less: Initial Payment Recovery		NOTES:
Other Adjustments (DPH use only)		
REIMBURSEMENT	\$ -	

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____
 Printed Name: _____
 Title: _____

Date: _____
 Phone: _____

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 San Francisco, CA 94103
 Or email at:
cbhsinvoices@sfdph.org

DPH Authorization for Payment

 Authorized Signatory

 Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
COST REIMBURSEMENT INVOICE**

Appendix F
PAGE A

Contract ID#

1000010827

Contractor: Alternative Family Services, Inc.

Address: 1421 Guerneville Road, Suite 218, Santa Rosa, CA 95403

Tel. No.: (707) 576-7700

Fax No.:

Funding Term: 07/01/2020 - 06/30/2021

PHP Division: Behavioral Health Services

BHS

INVOICE NUMBER: M08 JL 20

Contract ID #: N/A

Ct. PO No.: POHM TBD

Fund Source: MH CYF WO HSA CWS Non-IVE Overmatch

Invoice Period: July 2020

Final Invoice: (Check if Yes)

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
B-2 Therapeutic Visitation PC# - 38GS01 251962-10002-10001803-0002												
45/ 20 - 29 Mode 45 Fee For Service	196	16			-	-	0%	0%	196	16	100%	100%
											#DIV/0!	#VALUE!

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 22,249.00	\$ -	\$ -	0.00%	\$ 22,249.00
Fringe Benefits	\$ 5,785.00	\$ -	\$ -	0.00%	\$ 5,785.00
Total Personnel Expenses	\$ 28,034.00	\$ -	\$ -	0.00%	\$ 28,034.00
Operating Expenses:					
Occupancy	\$ 3,469.00	\$ -	\$ -	0.00%	\$ 3,469.00
Materials and Supplies	\$ 1,669.00	\$ -	\$ -	0.00%	\$ 1,669.00
General Operating	\$ 898.00	\$ -	\$ -	0.00%	\$ 898.00
Staff Travel	\$ 1,415.00	\$ -	\$ -	0.00%	\$ 1,415.00
Consultant/Subcontractor	\$ 322.00	\$ -	\$ -	0.00%	\$ 322.00
Other:	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
Total Operating Expenses	\$ 7,773.00	\$ -	\$ -	0.00%	\$ 7,773.00
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
TOTAL DIRECT EXPENSES	\$ 35,807.00	\$ -	\$ -	0.00%	\$ 35,807.00
Indirect Expenses	\$ 5,370.00	\$ -	\$ -	0.00%	\$ 5,370.00
TOTAL EXPENSES	\$ 41,177.00	\$ -	\$ -	0.00%	\$ 41,177.00

Less: Initial Payment Recovery		NOTES:
Other Adjustments (DPH use only)		
REIMBURSEMENT	\$ -	

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____
 Printed Name: _____
 Title: _____

Date: _____
 Phone: _____

Send to:
 Behavioral Health Services-Budget/ Invoice Analyst
 1380 Howard St., 4th Floor
 San Francisco, CA 94103
 Or email at:
cbhsinvoices@sfdph.org

DPH Authorization for Payment

 Authorized Signatory

 Date

**DEPARTMENT OF PUBLIC HEALTH CONTRACTOR
COST REIMBURSEMENT INVOICE**

Appendix F
PAGE A

Contract ID#

1000010827

Contractor: Alternative Family Services, Inc.

Address: 1421 Guerneville Road, Suite 218, Santa Rosa, CA 95403

Tel. No.: (707) 576-7700

Fax No.:

Funding Term: 07/01/2020 - 06/30/2021

PHP Division: Behavioral Health Services

BHS

INVOICE NUMBER: M09 JL 20

Contract ID #: N/A

Ct. PO No.: POHM TBD

Fund Source: MH CYF County General Fund

Invoice Period: July 2020

Final Invoice: (Check if Yes)

Program/Exhibit	TOTAL CONTRACTED		DELIVERED THIS PERIOD		DELIVERED TO DATE		% OF TOTAL		REMAINING DELIVERABLES		% OF TOTAL	
	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC	UOS	UDC
B-2 Therapeutic Visitation PC# - 38GS01 251962-10000-10001670-0001												
45/ 20 - 29 Mode 45 Fee For Service	704	16			-	-	0%	0%	704	16	100%	100%
											#DIV/0!	#VALUE!

Unduplicated Counts for AIDS Use Only.

Description	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Total Salaries	\$ 79,859.00	\$ -	\$ -	0.00%	\$ 79,859.00
Fringe Benefits	\$ 20,763.00	\$ -	\$ -	0.00%	\$ 20,763.00
Total Personnel Expenses	\$ 100,622.00	\$ -	\$ -	0.00%	\$ 100,622.00
Operating Expenses:					
Occupancy	\$ 12,300.00	\$ -	\$ -	0.00%	\$ 12,300.00
Materials and Supplies	\$ 6,258.00	\$ -	\$ -	0.00%	\$ 6,258.00
General Operating	\$ 3,187.00	\$ -	\$ -	0.00%	\$ 3,187.00
Staff Travel	\$ 1,142.00	\$ -	\$ -	0.00%	\$ 1,142.00
Consultant/Subcontractor	\$ 5,015.00	\$ -	\$ -	0.00%	\$ 5,015.00
Other:	\$ -	\$ -	\$ -	0.00%	\$ -
	\$ -	\$ -	\$ -	0.00%	\$ -
Total Operating Expenses	\$ 27,902.00	\$ -	\$ -	0.00%	\$ 27,902.00
Capital Expenditures	\$ -	\$ -	\$ -	0.00%	\$ -
TOTAL DIRECT EXPENSES	\$ 128,524.00	\$ -	\$ -	0.00%	\$ 128,524.00
Indirect Expenses	\$ 19,281.00	\$ -	\$ -	0.00%	\$ 19,281.00
TOTAL EXPENSES	\$ 147,805.00	\$ -	\$ -	0.00%	\$ 147,805.00

Less: Initial Payment Recovery		NOTES:
Other Adjustments (DPH use only)		
REIMBURSEMENT	\$ -	

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____
 Printed Name: _____
 Title: _____

Date: _____
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 Behavioral Health Services-Budget/ Invoice Analyst
 1380 Howard St., 4th Floor
 San Francisco, CA 94103
 Or email at:
cbhsinvoices@sfdph.org

DPH Authorization for Payment

 Authorized Signatory

 Date



San Francisco Ethics Commission

25 Van Ness Avenue, Suite 220, San Francisco, CA 94102

Phone: 415.252.3100 . Fax: 415.252.3112

ethics.commission@sfgov.org . www.sfethics.org

Received On:

File #: 220317

Bid/RFP #:

Notification of Contract Approval

SFEC Form 126(f)4

(S.F. Campaign and Governmental Conduct Code § 1.126(f)4)

A Public Document

Each City elective officer who approves a contract that has a total anticipated or actual value of \$100,000 or more must file this form with the Ethics Commission within five business days of approval by: (a) the City elective officer, (b) any board on which the City elective officer serves, or (c) the board of any state agency on which an appointee of the City elective officer serves. For more information, see: <https://sfethics.org/compliance/city-officers/contract-approval-city-officers>

1. FILING INFORMATION

TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
Original	
AMENDMENT DESCRIPTION – Explain reason for amendment	

2. CITY ELECTIVE OFFICE OR BOARD

OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT

NAME OF FILER'S CONTACT	TELEPHONE NUMBER
Angela Calvillo	415-554-5184
FULL DEPARTMENT NAME	EMAIL
office of the clerk of the Board	Board.of.Supervisors@sfgov.org

4. CONTRACTING DEPARTMENT CONTACT

NAME OF DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Kelly Hiramoto	415-255-3492
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
DPH Department of Public Health	kelly.hiramoto@sfdph.org

5. CONTRACTOR	
NAME OF CONTRACTOR Alternative Family Services, Inc.	TELEPHONE NUMBER 707-576-7700
STREET ADDRESS (including City, State and Zip Code) 131B Stony Circle, Suite 1200, Santa Rosa, CA 95401	EMAIL mduarte@afs4kids.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 220317
DESCRIPTION OF AMOUNT OF CONTRACT Not to Exceed \$24,959,253		
NATURE OF THE CONTRACT (Please describe) services to support permanency and stability for children and youth involved with the foster care system and their families		

7. COMMENTS

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Lipkin	Nathan	Board of Directors
2	Mitchell	Maurice	Board of Directors
3	Wentworth	Peter	Board of Directors
4	Reiner	Adam	Board of Directors
5	Mabadeje	Bukola	Board of Directors
6	Fruci	Inverleith	Board of Directors
7	Ford	Jeffrey	Board of Directors
8	Flores	Julio	Board of Directors
9	Toubba	Karim	Board of Directors
10	Davalos	Michelle	Board of Directors
11	Lelicoff	Nancy	Board of Directors
12	Bosin	Oriana	Board of Directors
13	Bafna	Rohan	Board of Directors
14	Lewis	Marsha	CEO
15	Johnson	Beverly	COO
16	Duarte	Martha	CFO
17	Barton	Craig	Other Principal Officer
18	Rath	Don	Board of Directors
19			

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor’s board of directors; (B) the contractor’s principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
31			
32			
33			
34			
35			
36			
37			
38			

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor’s board of directors; (B) the contractor’s principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
39			
40			
41			
42			
43			
44			
45			
46			
47			
48			
49			
50			

Check this box if you need to include additional names. Please submit a separate form with complete information. Select “Supplemental” for filing type.

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

<p>SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK</p> <p>BOS Clerk of the Board</p>	<p>DATE SIGNED</p>
---	---------------------------

From: [Hiramoto, Kelly \(DPH\)](#)
To: [Calvillo, Angela \(BOS\); BOS Legislation, \(BOS\)](#)
Cc: [Colfax, Grant \(DPH\); Wagner, Greg \(DPH\); Ruggels, Michelle \(DPH\); Hale, Jacquie \(DPH\)](#)
Subject: Request for Approval of Resolution Approving Amendment to Agreement between DPH and Alternative Family Services, Inc.
Date: Monday, March 28, 2022 11:31:11 AM
Attachments: [1. DPH-AFS Resolution Proposed Amd 2.pdf](#)
[2. DPH-AFS Resolution Proposed Amd 2.docx](#)
[3. AFS Proposed Amendment 2.pdf](#)
[4. AFS Original Agreement-signed.pdf](#)
[5. AFS Amendment 1.pdf](#)
[6. AFS Form 126f4 2-23-2022.pdf](#)

Dear Ms. Calvillo/BOS Legislation Staff:

Please find attached a proposed resolution for Board of Supervisors approval of an amendment to the agreement between the Department of Public Health and Alternative Family Systems, Inc., in the amount of \$24,959,253.

This contract agreement requires Board of Supervisors approval under San Francisco Charter Section 9.118.

The following is a list of accompanying documents:

- Proposed resolution
- Proposed Amendment 2
- Original Agreement and Amendment 1
- Form SFEC-126

For questions on this matter, please contact me at (415) 255-3492, kelly.hiramoto@sfdph.org.

Thank you for your time and consideration.

Sincerely,

Kelly

Kelly Hiramoto, LCSW
Acting PSC Coordinator
SF Department of Public Health Business Office
Special Projects Manager
SF Department of Public Health

This message and any attachments are solely for the intended recipient and may contain confidential or privileged information. If you are not the intended recipient, any disclosure, copying, use or distribution of the information included in this message and any attachments is prohibited. If you have received this communication in error, please notify me by reply e-mail and immediately and permanently delete this message and any attachments. Thank you.