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

Second Amendment

THIS **SECOND** AMENDMENT ("Amendment") is made as of **November 1, 2025**, in San Francisco, California, by and between **Hyde Street Community 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 herein to extend the contract term, increase the contract amount and update standard contractual clauses; and

WHEREAS, City and Contractor desire to modify the Agreement on the terms and conditions set forth herein to extend the term of the original agreement as allowed in the original solicitation; and

WHEREAS, City and Contractor desire to modify the Agreement on the terms and conditions set forth herein to increase the Compensation of the agreement; and

WHEREAS, City and Contractor desire to modify the Agreement on the terms and conditions set forth herein to replace Appendices A through A-2 of the original Agreement with the attached Appendices A through A-2; and

WHEREAS, City and Contractor desire to modify the Agreement on the terms and conditions set forth herein to replace Appendices B through B-2 of the original Agreement with the attached Appendices B through B-2; and

WHEREAS, City and Contractor desire to modify the Agreement on the terms and conditions set forth herein to add Appendix D entitled, "Third Party Computer System Access Agreement (SAA)", and dated January 8, 2025 to the Agreement; and

WHEREAS, City and Contractor desire to modify the Agreement on the terms and conditions set forth herein to add Appendix E entitled, "Business Associate Agreement (BAA)"; and

WHEREAS, Contractor was competitively selected pursuant to Request for Proposals entitled RFP 8-2017 issued on August 23, 2017 and RFP 11-2017 issued on June 12, 2017 and this Amendment is consistent with the terms of the RFP's and the awarded Contract; and

WHEREAS, this Contract is deemed exempt from Chapter 14B of the San Francisco Administrative Code because funding involves state and federal funding and, as such, there is no Local Business Enterprise ("LBE") subcontracting participation requirement for this Agreement; and

WHEREAS, this Amendment is consistent with an approval obtained on 02/05/2024 from the
Department of Human Resources on behalf of the Civil Service Commission under PSC number
40587-17/18 in the amount of \$438,051,000 for the period of 13 years 2 days; and
WHEREAS, this Amendment is consistent with an approval obtained from the City's Board of Supervisors under approved on in the amount of \$38,789,762 for the period commencing July 1, 2018 and ending June 30, 2028; and Now, THEREFORE, the parties 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 between Contractor and City, as amended by the:

First Amendment, dated July 1, 2020, and

- 1.2 San Francisco Labor and Employment Code. As of January 4, 2024, San Francisco Administrative Code Chapters 21C (Miscellaneous Prevailing Wage Requirements), 12B (Nondiscrimination in Contracts), 12C (Nondiscrimination in Property Contracts), 12K (Salary History), 12P (Minimum Compensation), 12Q (Health Care Accountability), 12T (City Contractor/Subcontractor Consideration of Criminal History in Hiring and Employment Decisions), and 12U (Sweatfree Contracting) are redesignated as Articles 102 (Miscellaneous Prevailing Wage Requirements), 131 (Nondiscrimination in Contracts), 132 (Nondiscrimination in Property Contracts), 141 (Salary History), 111 (Minimum Compensation), 121 (Health Care Accountability), 142 (City Contractor/Subcontractor Consideration of Criminal History in Hiring and Employment Decisions), and 151 (Sweatfree Contracting) of the San Francisco Labor and Employment Code, respectively. Wherever this Agreement refers to San Francisco Administrative Code Chapters 21C, 12B, 12C, 12K, 12P, 12Q, 12T, and 12U, it shall be construed to mean San Francisco Labor and Employment Code Articles 102, 131, 132, 141, 111, 121, 142, and 151, respectively.
- 1.3 **Other Terms.** Terms used and not defined in this Amendment shall have the meanings assigned to such terms in the Agreement.

Article 2 Modifications of Scope to the Agreement

The Agreement is hereby modified as follows:

- 2.1 **Term of the Agreement.** Article 2 Term of the Agreement of the First Amendment 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, 2026, unless earlier terminated as otherwise provided herein.

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

- 2.1 **Term.** The term of this Agreement shall commence on July 1, 2018 and expire on June 30, 2028, unless earlier terminated as otherwise provided herein
- 2.2 **Financial Matters**. Section 3.3.1 Calculation of Charges and Contract Not to Exceed Amount of the Original 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 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 Seven Million Thirty Hundred Thousand Nine Hundred Ninety Seven Dollars (\$27,030,997).** 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 Calculation of Charges and Contract Not to Exceed Amount. The amount of this Agreement shall not exceed THIRTY EIGHT MILLION SEVEN HUNDRED EIGHTY NINE THOUSAND SEVEN HUNDRED SIXTY TWO DOLLARS (\$38,789,762), the breakdown of which appears in Appendix B, "Calculation of Charges." City shall not be liable for interest or late charges for any late payments. City will not honor minimum service order charges for any Services covered by this Agreement.
- 2.3 **Appendix.** Appendix A: A-1, A-2 and B: B-1, B-2 is hereby replaced in its entirety by Appendix A: A-1, A-2 and B: B-1, B-2, attached to this Amendment and fully incorporated within the Agreement. To the extent the Agreement refers to Appendix A: A-1, A-2 and B: B-1, B-2 in any place, the true meaning shall be Appendix A: A-1, A-2 and B: B-1, B-2, which is a correct and updated version.
- 2.4 **Appendix D.** Appendix D is hereby added to this Amendment and fully incorporated within the Agreement.
- 2.5 **Appendix D.** Appendix D is hereby replaced in its entirety by Appendix D, attached to this Amendment and fully incorporated within the Agreement. To the extent the Agreement refers to Appendix D in any place, the true meaning shall be Appendix D, which is a correct and updated version.
- 2.6 **Appendix E.** Appendix E is hereby replaced in its entirety by Appendix E Dated: OCPA & CAT v1/10/2024, and Attestation forms 06-07-2017, and Protected Information Destruction Order Purge Certification 01-10-2024, attached to this Amendment and incorporated within the Agreement.

Article 3 Updates of Standard Terms to the Agreement

The Agreement is hereby modified as follows:

- 3.1 **Section 1.10 Confidential Information.** The following Section 1.10 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).
- 3.2 **Section 3.7.2 City Revisions to Program Budgets.** Section 3.7.2 of the Agreement is replaced in its entirety to read as follows:
- 3.7.2 City Revisions to Program Budgets: The City shall have authority, without the execution of a Formal Amendment, to (1) purchase additional Services within the Statement of Work or (2) reallocate funding among the Services within the Statement of Work. Any change made under this Subsection 3.7.2 must not involve an increase in the Maximum Cost or Amount Not to Exceed or a change to the Term of this Agreement, and must be approved in writing by both Parties, by a person with legal authority to bind their respective Party to its terms. Contractor shall not proceed with any work contemplated in any revision to program budget until Contractor receives written notification from City to commence such work. All revisions to program budget will become part of this Agreement, after written execution by the Parties, which will then form the new baseline upon which future changes will be measured.
- 3.3 **Section 3.7.3 Reserved.** *Section 3.7.3 of the Agreement is replaced in its entirety to read as follows:*

3.7.3 Reserved.

- 3.4 **Section 4.2 Qualified Personnel.** Section 4.2 of the Agreement is replaced in its entirety to read as follows:
- **4.2 Qualified Personnel.** Contractor represents and warrants that it is qualified to perform the Services required by City, and that all Services will be performed by competent personnel with the degree of skill and care required by current and sound professional procedures and practices. 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 sufficient resources for timely completion within the project schedule.
- 3.5 **Section 4.5 Assignment.** Section 4.5 of the Agreement is replaced in its entirety to read as follows:

- **4.5 Assignment.** Services to be performed by Contractor are personal in character. This Agreement may not be directly or indirectly assigned, novated, or otherwise transferred 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.
- 3.6 **Section 7.3 Withholding.** Section 7.3 of the Agreement is replaced in its entirety to read as follows:
- 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.
- 3.7 **Section 10.4 Consideration of Salary History.** Section 10.4 of the Agreement is replaced in its entirety to read as follows:
- 3.1 10.4 Consideration of Salary History. Contractor shall comply with San Francisco Labor and Employment Code Article 141, 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 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 Article 141. Information about and the text of Article 141 is available on the web at https://sfgov.org/olse/consideration-salaryhistory. Contractor is required to comply with all of the applicable provisions of Article 141, irrespective of the listing of obligations in this Section.
- 3.8 **Section 10.11 Limitations on Contributions**. Section 10.11 of the Agreement is replaced in its entirety to read as follows:
- **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

3.9 **Section 10.15 Public Access to Nonprofit Records and Meetings.** Section 10.15 of the Agreement is replaced in its entirety to read as follows:

10.15 Nonprofit Contractor Requirements.

- 10.15.1 Good Standing. If Contractor is a nonprofit organization, Contractor represents that it is in good standing with the California Attorney General's Registry of Charitable Trusts and will remain in good standing during the term of this Agreement. Contractor shall immediately notify City of any change in its eligibility to perform under the Agreement. Upon City's request, Contractor shall provide documentation demonstrating its compliance with applicable legal requirements. If Contractor will use any subcontractors to perform the Agreement, Contractor is responsible for ensuring they are also in compliance with the California Attorney General's Registry of Charitable Trusts for the duration of the Agreement. Any failure by Contractor or its subcontractors to remain in good standing with applicable requirements shall be a material breach of this Agreement.
- 10.15.2 Public Access to Nonprofit Records and Meetings. If Contractor is a nonprofit organization; provides Services that do not include services or benefits to City employees (and/or to their family members, dependents, or their other designated beneficiaries); and receives a cumulative total per year of at least \$250,000 in City funds or City-administered funds, 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.
- 3.10 **Section 10.17 Distribution of Beverages and Water.** Section 10.17 of the Agreement is replaced in its entirety to read as follows:

10.17 Distribution of Beverages and Water.

10.17.1 **Sugar-Sweetened Beverage Prohibition**. The scope of Services in this Agreement includes the sale, provision, or distribution of beverages to or on behalf of City. 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.** The scope of Services includes the sale, provision, or distribution of water to or on behalf of City. 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.
- 3.11 **Section 11.14 Notification of Legal Requests.** *The following section is hereby added and incorporated in 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.
- 3.12 **Section 12.3 Prevention of Fraud, Waste and Abuse.** *The following section is hereby added and incorporated in Article 12 of the Agreement:*
- **12.3 Prevention of Fraud, Waste and Abuse.** Contractor shall comply with all laws designed to prevent fraud, waste, and abuse, including, but not limited to, provisions of state and Federal law applicable to healthcare providers and transactions, such as the False Claims Act (31 U.S.C. § 3729 et seq.), the Anti-Kickback Statute (42 U.S.C. § 1320a-7b(b)), the Physician Self-Referral Law (Stark Law, 42 U.S.C. § 1395nn), and California Business & Professions Code § 650. Contractor shall immediately notify City of any suspected fraud, waste, and abuse under state or federal law.
- 3.13 **Article 13 Data and Security.** *Article 13 is hereby replaced in its entirety to read as follows:*
 - 13.1 Nondisclosure of Private, Proprietary or Confidential Information.
 - 13.1.1 Protection of Private Information. 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 City Data; Confidential Information. In the performance of Services, Contractor may have access to, or collect on City's behalf, City Data, which may include proprietary or Confidential Information that if disclosed to third parties may damage City. If City discloses proprietary or Confidential Information to Contractor, or Contractor collects such information on City's behalf, 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 designated as a Hybrid Entity as defined in the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), and all Health Care Components of the City, including a City department involved in this Agreement, are required to comply with the HIPAA rules governing the access, use, disclosure, transmission, storage, and security of protected health information (PHI).
- 3.14 For purposes of this Agreement, Parties agree that if Contractor is performing a service or function for or on behalf of a City department that is a Health Care Component, where such service or function makes Contractor a Business Associate of City, Contractor must comply with the obligations and conditions contained in the Business Associate Agreement ("BAA") that shall be attached to this Agreement as Appendix E, and incorporated as though fully set forth herein. Parties agree that if Contractor is not performing a service or function that makes Contractor a Business Associate of City, a BAA is not required and will not be attached to this Agreement. Appendix E will be reserved if a BAA is not required. Contractor, however, must still comply with any data privacy and security laws that apply to Contractor, including, but not limited to, HIPAA, CMIA (Cal. Civ. Code Sec. 56 et.seq.), Cal. Welf. & Inst. Code Sec. 5328, and 42 CFR Part 2.

13.4 Management of City Data.

- **13.4.1** Use of City Data. Contractor agrees to hold City Data received from, or created or collected on behalf of, City, in strictest confidence. Contractor shall not use or disclose City Data except as permitted or required by the Agreement or as otherwise authorized in writing by City. Any work by Contractor or its authorized subcontractors using, or sharing or storage of, City Data outside the continental United States is prohibited, absent prior written authorization by City. Access to City Data must be strictly controlled and limited to Contractor's staff assigned to this project on a need-to-know basis only. City Data shall not be distributed, repurposed or shared across other applications, environments, or business units of Contractor. Contractor is provided a limited non-exclusive license to use City Data 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 City Data, by implication, estoppel or otherwise, under copyright or other intellectual property rights, to any third-party. Unauthorized use of City Data 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 other than security or service delivery analysis.
- 13.4.2 Disposition of City Data. Upon request of City or termination or expiration of this Agreement, Contractor shall promptly, but in no event later than thirty (30) calendar days, return all City Data given to, or collected or created by Contractor on City's behalf, which includes all original media. Once Contractor has received written confirmation from City that City Data has been successfully transferred to City, Contractor shall within ten (10)

business days clear or purge all City Data from its servers, any hosted environment Contractor has used in performance of this Agreement, including its subcontractor's environment(s), 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. Secure disposal shall be accomplished by "clearing," "purging" or "physical destruction," in accordance with National Institute of Standards and Technology (NIST) Special Publication 800-88 or most current industry standard.

- **13.5.** Ownership of City Data. The Parties agree that as between them, all rights, including all intellectual property rights, in and to City Data and any derivative works of City Data is the exclusive property of City.
- 13.6 Loss or Unauthorized Access to City's Data; Security Breach Notification. Contractor shall comply with all applicable laws that require the notification to individuals in the event of unauthorized release of PII, PHI, or other event requiring notification. Contractor shall notify City of any actual or potential exposure or misappropriation of City Data (any "Leak") within twenty-four (24) hours of the discovery of such, but within twelve (12) hours if the Data Leak involved PII or PHI. Contractor, at its own expense, will reasonably cooperate with City and law enforcement authorities to investigate any such Leak and to notify injured or potentially injured parties. Contractor shall pay for the provision to the affected individuals of twenty-four (24) months of free credit monitoring services, if the Leak involved information of a nature reasonably necessitating such credit monitoring. The remedies and obligations set forth in this subsection are in addition to any other City may have. City shall conduct all media communications related to such Leak.
- 13.7 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 4 Effective Date

Each of the modifications set forth in Articles 2 and 3 shall be effective on and after the date of this Amendment.

Article 5 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, Contractor and City have executed this Amendment as of the date first referenced above.

CITY	CONTRACTOR
Recommended by:	Hyde Street Community Services, Inc. Joanne Lyway/2/2025 9:58 AM PST
Daniel Tsai Director of Health San Francisco Department of Public Health	Dr. Joanne Azulay Chief Executive Officer City Supplier number: 0000018587
Approved as to Form:	
David Chiu City Attorney	
By:	
Deputy City Attorney	
Approved:	
Sailaja Kurella Director of the Office of Contract Administration, and Purchaser	
By:	
Name:	

Appendix A Scope of Services – DPH Behavioral Health Services

1. Terms

A. Contract Administrator:

In performing the Services hereunder, Contractor shall report to **Janis O'Meara**, Program Manager, 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. <u>Possession of Licenses/Permits</u>:

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:

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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. <u>Infection Control, Health and Safety</u>:

- (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. <u>Aerosol Transmissible Disease Program, Health and Safety:</u>
- (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.

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- (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. <u>DPH Behavioral Health Services (BHS) Electronic Health Records (EHR) System</u>

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. <u>Patients' Rights</u>:

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

O. <u>Under-Utilization Reports</u>:

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.

Appendix A CID#: 1000010833

- 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. <u>Clinics to Remain Open:</u>

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, CONTACTOR 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.

Appendix A CID#: 1000010833

V. <u>Compliance with Grant Award Notices</u>:

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.

The detailed description of services is listed below and are attached hereto:

Appendix A-1 – Hyde Street Community Services - Outpatient

Appendix A-2 – Full Service Partnership (FSP)

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.

Appendix A CID#: 1000010833

Contractor Name: Hyde Street Community Services, Inc.	Appendix A-1, A-2 (Tentative)			
Program Name: Hyde Street Outpatient & Hyde Street FSP	Funding Term: 07/01/25-06/30/26			
	Funding Source: See Appendix B			

1. Identifiers:

Hyde Street Community Services – Outpatient and Full-Service Partnership (FSP)

815 Hyde Street, Suite 100, San Francisco, CA 94109 415-673-5700, fax: 415-292-7140, www: hscssf.org

Executive Director: **Dr. J. Azulay**

Telephone: 628-215-0440

Email Address: drazulay@hscssf.org Program Code(s): 38BR3/38BRA3

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Z.	Nature	01 170	cumen	1 3

☐ Original ☐ Contract Amendment ☐	☐ Revision to Program Bu	idgets (RPB)
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3. Goal Statement:

The mission of Hyde Street Community Services, Inc. is to provide comprehensive behavioral health and rehabilitation services to residents of San Francisco who need these services to achieve and maintain the maximum quality of life and greatest degree of independence possible. These services will be sensitive to the cultural, racial, and sexual diversity of the populations served and responsive to community input, adapting to the changing needs of the community and consumers.

4. Target Population:

HSCS strives to serve all San Franciscans in need. Where a particular program is not the best fit, the clinical staff will make an appropriate referral, either internally or with our many co-service providers in San Francisco. The target population of the Tenderloin Clinic of HSCS provides a continuum of behavioral health services to an adult population primarily residing in the Central City of San Francisco, although it serves residents throughout the City. Individuals present with a wide array of situational, acute and chronic behavioral, emotional, cognitive and physical health issues. These are often complicated by social, economic, housing, and substance abuse problems.

HSCS is committed to providing culturally relevant services San Francisco residents regardless of race, ethnicity, or national origin. HSCS has experience and expertise providing services designed to meet the unique cultural and linguistic needs of African American, Arab speaking/Muslim, and Southeast Asian communities. HSCS will continue to outreach to and serve these communities, but no one who otherwise qualifies for services under this Agreement, will be turned away due to their race, ethnicity, or national origin.

5. Modality(s)/Intervention(s): OPTIONAL for MHSA contracts:

6. Methodology:

Hours of operation for the Outpatient Clinic are 9:00 AM to 5:00 PM, Monday through Friday. The FSP Team of Hyde Street is available for emergencies 24/7 via cell phone.

The Full-Service Partnership Program (FSP), an intensive case management team, will target adult residents of San Francisco who have been identified to address their multiple and complex issues that require more intensive and frequent service than can be addressed in standard outpatient programs. Often these individuals are high users of acute services and have difficulty linking to traditional services. Complicating issues include: 1) homelessness or risk of homelessness, 2) history of criminal

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Contractor Name: Hyde Street Community Services, Inc.	Appendix A-1, A-2 (Tentative)
Program Name: Hyde Street Outpatient & Hyde Street FSP	Funding Term: 07/01/25-06/30/26
	Funding Source: See Appendix B

justice involvement, 3) inability to maintain stable interpersonal relationships or employment due to emotional dysregulation and poor impulse control, 4) self-destructive behaviors including suicidal impulses or behaviors likely to result in harm, 5) history of physical (brain trauma) and/or emotional trauma, and 6) lack entitlements or stable income.

A. Outreach, recruitment, promotion, and advertisement

HSCS is an equal opportunity employer and makes every effort to attract qualified staff and interns who are bi-cultural and/ or bi-lingual. Hiring and promotion are conducted in accordance with HSCS polices and state guidelines.

B. Admission, enrollment and/or intake criteria and process where applicable
Hyde Street Community Services will participate in the BHS Advanced Access initiative, including
timely measurement of data at the site and reporting of data to BHS as required, which may be
changed from time to time with prior notice from BHS.

HSCS will provide services to those individuals who are eligible for System of Care services, following the admission criteria specified by BHS guidelines. HSCS will accept referrals authorized by Central Access, inpatient units, sheriff department/incarceration and other BHS programs that meet medical necessity and authorization criteria. In addition, individuals residing in the community, who drop in, will be assessed for admission according to the same criteria.

The HSCS guidelines regarding assessment and treatment of indigent clients and will participate in the CMHS Advanced Access initiative and is committed to providing an initial assessment as needed, within 24 to 48 hours of request.

The FSP Team of Hyde Street accepts referrals that are approved for Intensive Case management services of up to 50 new cases per year. Cases are assigned to team members to contact the referring source and begin the linkage process as soon as possible depending on the length of the wait list and caseload.

C. Service delivery model

Hyde Street Outpatient (the Tenderloin Clinic) provides comprehensive Outpatient Behavioral Health services to an adult population of San Francisco residents. These services include:

Crisis Intervention

"Crisis Intervention" means a service, lasting less than 24 hours, to or on behalf of a beneficiary for a condition that requires more timely response than a regularly scheduled visit. Service activities may include, but are not limited to, assessment, collateral and therapy. A unit of service is 1 minute of direct contact with a client toward resolution of the crisis.

Medication Support Services.

"Medication Support Services" means those services which include prescribing, administering, dispensing, and monitoring of psychiatric medications or biologicals which are necessary to alleviate the symptoms of mental illness. The services may include evaluation of the need for medication, evaluation of clinical effectiveness and side effects, the obtaining of informed consent, medication education and plan development related to the delivery of the service and/or assessment of the beneficiary.

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Last Revised: 7/31/2025

Contractor Name: Hyde Street Community Services, Inc.	Appendix A-1, A-2 (Tentative)
Program Name: Hyde Street Outpatient & Hyde Street FSP	Funding Term: 07/01/25-06/30/26
	Funding Source: See Appendix B

A Unit of Service is one minute of contact directly with a client, or with others on behalf of the client regarding evaluation and management of medications.

Mental Health Services.

"Mental Health Services" are those individual or group therapies and interventions that are designed to provide reduction of mental disability and improvement or maintenance of functioning consistent with the goals of learning, development, independent living and enhanced selfsufficiency which are not provided as a component of adult residential services, crisis residential treatment services, crisis intervention, crisis stabilization, day rehabilitation, or day treatment intensive. Service activities may include but are not limited to assessment, plan development, therapy, cognitive rehabilitation and collateral.

Assessment.

"Assessment" means a service activity which may include a clinical analysis of the history and status of a beneficiary's mental, emotional, cognitive, or behavioral disorder; relevant cultural issues and history; diagnosis; and the use of psychological and neuropsychological testing procedures.

A Unit of Service is one minute of time providing a face-to-face clinical assessment, scoring, interpretation, report writing, feedback of an individual directly, or indirectly in consultation with another provider.

Collateral.

"Collateral" means a service activity to a significant support person in a beneficiary's life with the intent of improving or maintaining the mental health status of the beneficiary. The beneficiary may or may not be present for this service activity.

A Unit of Service is one minute of contact with an individual, outside of the agency, who is engaged with the client's care.

"Therapy" means a service activity which is a therapeutic intervention that focuses primarily on symptom reduction to improve functional impairments. Therapy may be delivered to an individual or group of beneficiaries and may include family therapy at which the beneficiary is present.

A Unit of Service is one minute of contact with an individual (or a group) addressing management of symptoms and behaviors.

Targeted Case Management.

"Targeted Case Management" means services that assist a beneficiary to access needed medical, educational, social, prevocational, vocational, rehabilitative, or other community services. The service activities may include, but are not limited to, communication, coordination, and referral; monitoring service delivery to ensure beneficiary access to service and the service delivery system; monitoring of the beneficiary's progress; and plan development.

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Contractor Name: Hyde Street Community Services, Inc.	Appendix A-1, A-2 (Tentative)			
Program Name: Hyde Street Outpatient & Hyde Street FSP	Funding Term: 07/01/25-06/30/26			
	Funding Source: See Appendix B			

A Unit of Service is one minute of contact with a client or on behalf of a client to stabilize functioning in the community.

D. Discharge Planning and exit criteria and process

Clients of the Outpatient clinic are discharged when it is deemed they no longer require services, when they, themselves, request discharge or they have dropped out of services for a period of 60 days without contact.

The length of stay of clients falls into three groups: those that have received less than 6 months, those that have remained in treatment for from 2 to 4 years and those that continue to receive services for longer than 5 years. The last group are generally receiving medication management and group therapy. Clients are often discharged to self, primary care or a non-specialty mental health service.

Clients of the FSP are discharged according to the new criteria identifying those that no longer require intensive services. These clients are discharged to outpatient clinics in a "step-down" transition process or to other social, residential, or medical services.

E. Program staffing

The staff of Hyde Street is multidisciplinary and are on several teams:

Administrative Team: Executive Director, Financial Manager, HR/Operations Manager, Receptionist, and compliance support staff;

Clinical Team: Executive Director, Training Directors, Neuropsychologists, Clinical Program Manager, Supervising Clinicians, licensed and waiver Therapists, Peer Counselors and the Nurse Clinical Compliance Coordinator;

Medication Team: Medical Director/Staff Psychiatrist, Nurse Practitioners and Psych Tech;

FSP Team: Therapist/ Case Managers; Peer Counselors and Supervisor

Rehab Team: Program Director, Clinician and Peer Counselors including Vocational Specialists and Arabic-speaking Counselors.

F. Vouchers

7. Objectives and Measurements:

All objectives and descriptions of how objectives will be measured, are contained in the BHS document entitled BHS AOA Performance Objective FY 2023-2024.

8. Continuous Quality Improvement (CQI):

A. Achievement of contract performance objectives:

The Clinical Director maintains oversite of all open cases to insure:

- 1. Completion of a Risk Assessment upon opening.
- 2. Completion of a Data Base Assessment within 60 days of opening.
- 3. Completion of an Initial Problem List and CSA within 60 days of opening or before the first planned service.

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Contractor Name: Hyde Street Community Services, Inc.	Appendix A-1, A-2 (Tentative)
Program Name: Hyde Street Outpatient & Hyde Street FSP	Funding Term: 07/01/25-06/30/26
	Funding Source: See Appendix B

- 4. Nurse Program Compliance Coordinator-Completion of annual documents: Consent of Treatment, Consent for medications, HIPAA, Acknowledgement of Receipt of Materials in a timely manner.
- 5. Executive Director-Staff Productivity

The PURQC committee is composed of the Supervising therapists and the Clinical Program Manager. Therapists reviews all POC's and CSA's and presents for discussion cases that exceed 25 hours of requested services. The Nurse Program Coordinator maintains a record of all requests for information regarding SSI applications as an indicator of assistance in obtaining SSI linked Medi-Cal. The Medical Director monitors the completion of Metabolic Monitoring and vital signs for all clients prescribed medications.

The Director of Training oversees adherence to all required trainings and certifications by BHS, schedules the weekly in-service training and supervision of interns. The trainings are planned to address current trends in treatment, enhancing cultural sensitivity, community resources, and professional growth.

B. Documentation quality

Initially, all charts submitted for annual CSA will be reviewed by the PURQ analyst for completeness using the PURQC Checklist Review of Documents". Using Avatar, the Quality Assurance Committee which includes line staff as well as the Clinical Program Manager will review all charts submitted requesting more than 15 hours for completeness according to the "PURQC Documentation Compliance". Medical Director will review for compliance with annual reassessment for medications, metabolic monitoring, and Informed Consent for medications. Supervisory staff may also randomly monitor documentation when responding to error or duplicate billing reports.

Intern supervisors, when co-signing all documents, will monitor and provide feedback to students on a regular basis.

Once a year, one chart from each clinician or intern will receive a full chart audit. This review will include monitoring for compliance assessments, Problem List, progress notes and completion of required local, state, and federal documents with client signatures. Feedback will be given to each clinician and corrections, if needed will be monitored.

C. Cultural Competency

Increasing and maintaining awareness of cultural issues and sensitivity to the impact on treatment, Hyde St. engages in the following activities:

- 1. Completion of the annual Cultural Competency Report
- 2. Inclusion of "What are the cultural issues?" in each case presentation at the clinic
- 3. Promotion of hiring culturally or linguistically diverse staff

D. Client Satisfaction

Client satisfaction is monitored through feedback in the mandated Client Satisfaction Survey, through discussion in a group setting, and individually in response to client complaints and suggestions to staff.

E. Measurement, analysis and use of ANSA.

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Contractor Name: Hyde Street Community Services, Inc.	Appendix A-1, A-2 (Tentative)
Program Name: Hyde Street Outpatient & Hyde Street FSP	Funding Term: 07/01/25-06/30/26
	Funding Source: See Appendix B

HSCS will use both ANSA data and internal, program specific data, to measure and analyze outcomes. All clients open for more than 60 days will have a Problem List and ANSA completed and annually from the date of opening. Reports generated by CBHS will be obtained and reviewed on a regular basis. Internally, information will be collected on referrals, show rates and the demographic and clinical profile of consumers. These materials will be reviewed and used to determine appropriate clinical interventions and programmatic changes.

9. Required Language: N/A.

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Appendix B Calculation of Charges

1. Method of Payment

A. 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. Compensation for all SERVICES provided by CONTRACTOR shall be paid in the following manner

(1) For contracted services reimbursable by 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) <u>For contracted services reimbursable by Cost Reimbursement (Monthly Reimbursement for Actual Expenditures within Budget):</u>

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) For contracted services reimbursable by 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) For contracted services reimbursable by 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. All amounts paid by CITY to CONTRACTOR shall be subject to audit by CITY.

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D. Upon the effective date of this Agreement, and 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 Mental Health Service Act (Prop 63) portions 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:

Appendix B-1 Hyde St Appendix B-2 Adult FSP

- B. CONTRACTOR understands that, of this maximum dollar obligation listed in section 3.3.1 of this Agreement, \$1,649,966 is included as a contingency amount and is neither to be used in Program Budgets attached to this Appendix, or available to Contractor without a modification to this Agreement as specified in Section 3.7 Contract Amendments; Budgeting Revisions. 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 Controller. Contractor agrees to fully comply with these laws, regulations, and policies/procedures.
- C. 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.
- D. The amount for each fiscal year, 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 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.

CONTRACTOR understands that the CITY may need to adjust funding sources and funding allocations and agrees that these needed adjustments will be executed in accordance with Section 3.7 of this Agreement. In event that such funding source or funding allocation 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 Section 3.7 section of this Agreement.

(1). Estimated Funding Allocations

July 1, 2018 – June 30, 2019	\$768,481
July 1, 2019 – June 30, 2020	\$3,275,590
July 1, 2020 – June 30, 2021	\$3,396,705
July 1, 2021 – June 30, 2022	\$3,421,237
July 1, 2022 – June 30, 2023	\$4,034,802
July 1, 2023 – June 30, 2024	\$4,114,191
July 1, 2024 – June 30, 2025	\$4,379,071
July 1, 2025 – June 30, 2026	\$4,422,862
July 1, 2026 – June 30, 2027	\$4,593,651
July 1, 2027 – June 30, 2028	\$4,733,206
Subtotal – July 1, 2018 through June 30, 2029	\$37,139,796
Contingency	\$1,649,966
Total – July 1, 2018 through June 30, 2029	\$38,789,762

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	-				<u> </u>	•••••• •		Appe	ndix B, Page 1
Legal Entity Name/Contractor Name	Hyde Street 0	Community Se	rvices, Inc.				Fiscal Year	2025	5-26 (Tentative)
Contract ID Number	1000010833					Funding N	lotification Date	(08/05/2024
Appendix Number	B-1	B-2	B-#		B-#	B-#	B-#		
Provider Number									
Program Name		Adult FSP							
Program Code		38BRA3							
Funding Term	07/01/2024 - 06/30/2025	07/01/2024 - 06/30/2025							
FUNDING USES									TOTAL
	\$ 1,858,697							\$	2,824,546
Employee Benefits								\$	505,781
Subtotal Salaries & Employee Benefits			\$	- \$	-	\$ -	\$ -	\$	3,330,327
Operating Expenses		\$ 170,354						\$	494,148
Capital Expenses								\$	-
Subtotal Direct Expenses		\$ 1,303,679	\$	- \$	-	\$ -	\$ -	\$	3,824,475
Indirect Expenses		\$ 189,628						\$	554,596
Indirect %	14.5%	14.5%	0.0%		0.0%	0.0%	0.0%		14.5%
TOTAL FUNDING USES	\$ 2,885,764	\$ 1,493,307	\$	- \$	-	\$ -	\$ -	\$	4,379,071
						Employe	e Benefits Rate		17.2%
BHS MENTAL HEALTH FUNDING SOURCES									
MH Adult Fed SDMC FFP (50%)	\$ 982,468	\$ 341,702						\$	1,324,170
MH Adult State 1991 MH Realignment	\$ 737,130							\$	737,130
MH Adult County General Fund	\$ 1,108,142	\$ 302,303						\$	1,410,445
MH Adult Medicare	\$ 58,024			_				\$	58,024
MH MHSA (Adult) Match	\$ -	\$ 341,702						\$	341,702
MH MHSA (Adult)	\$ -	\$ 507,600				•		\$	507,600
TOTAL BHS MENTAL HEALTH FUNDING SOURCES	\$ 2,885,764	\$ 1,493,307	\$	- \$	-	\$ -	\$ -	\$	4,379,071
BHS SUD FUNDING SOURCES								<u> </u>	
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TOTAL OTHER DPH FUNDING SOURCES TOTAL DPH FUNDING SOURCES	\$ - \$ 2.885.764	\$ - \$ 1.493.307	\$	·	-	\$ - \$ -	\$ - \$ -	\$	4.379.071
TOTAL DPH FUNDING SOURCES			\$	_	-	\$ - \$ -	\$ -		4,379,071
					-			\$	4,379,071
TOTAL DPH FUNDING SOURCES					-			\$	4,379,071
TOTAL DPH FUNDING SOURCES NON-DPH FUNDING SOURCES	\$ 2,885,764	\$ 1,493,307	\$	- \$	-	\$ -	\$ -	\$ \$ \$	- 4,379,071 - -
TOTAL DPH FUNDING SOURCES	\$ 2,885,764 \$ -		\$	- \$	-		\$ -	\$	- 4,379,071 - - - 4,379,071

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

Appendix B - DPH 2: Depar	unem	OI FUDIIC HE	Jali	COSTINE	portiii	y/D	ita Con	ectioi	וט) וו	(DC)	^	nno	ndiv N	lumbai	_	D 1
DHCS Legal Entity Number 01123			_								P			lumbeı 		B-1
Provider Name Hyde Street Community	Serv	ices, Inc.	-									F	_	lumbei		
Provider Number 38BR	_									_						26 (Tentative
Contract ID Number 1000010833										Fun	ding	Not	iticatio	n Date	;	
Program Name	-	HYDE ST														
Program Code		38BR3														
Mode (MH) or Modality (SUD))	15														
		_														
Service Description																
Funding Term (mm/dd/yy-mm/dd/yy):	07/01/	2024 - 06/30/2025														
FUNDING USES																TOTAL
Salaries & Employee Benefits	\$	2,197,002				\$		-							\$	2,197,002
Operating Expenses		323,794				\$		-							\$	323,794
Capital Expenses		,				•									\$	_
Subtotal Direct Expenses		2,520,796				\$		-	\$		-	\$		_	\$	2,520,796
Indirect Expenses		364,968				•			•			•			\$	364,968
Indirect %	_	14.5%		0.0%			0.0%			0.0%			0.0%	/ 0	+ -	14.5%
TOTAL FUNDING USES		2,885,764		2.270		\$	/ 0		\$			\$	2.47	<u>-</u>	\$	2,885,764
BHS MENTAL HEALTH FUNDING SOURCES		_,555,754				*			¥			*			1	_,555,754
MH Adult Fed SDMC FFP (50%)		000.400													\$	092.460
	\$	982,468	-					+			-+				\$	982,468 737,130
MH Adult State 1991 MH Realignment	φ	737,130													\$	
MH Adult County General Fund	\$	1,108,142														1,108,142
MH Adult Medicare	\$	58,024													\$	58,024
MH MHSA (Adult) Match															\$	
MH MHSA (Adult) Match															\$	
TOTAL DUC MENTAL LICALTIL CUNDING COLIDORS		2.005.764	_			c			•			Φ			\$	2 005 764
TOTAL BHS MENTAL HEALTH FUNDING SOURCES		2,885,764	\$		-	\$		-	\$		-	\$			\$	2,885,764
BHS SUD FUNDING SOURCES																
															\$	
															\$	-
															\$	-
This row left blank for funding sources not in drop-down list															\$	_
TOTAL BHS SUD FUNDING SOURCES		-	\$		-	\$		-	\$		-	\$		-	\$	
OTHER DPH FUNDING SOURCES	5															
															\$	-
This row left blank for funding sources not in drop-down list															\$	-
TOTAL OTHER DPH FUNDING SOURCES	\$	-	\$		-	\$		-	\$		-	\$		-	\$	-
TOTAL DPH FUNDING SOURCES	\$	2,885,764	\$		-	\$		-	\$		-	\$		-	\$	2,885,764
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)	_	2,885,764	Ψ			Ψ			Ψ		- $+$	Ψ			+*	2,885,764
	'	<u> </u>			-			-			-			-		∠,005,764
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	1	N. 1415 - 1- 1														
		Outpatient														
D (14.0)		ended Rate														
Payment Method	_	(FFS)									}					
Unduplicated Clients (UDC)		540 540														
DPH Units of Service		5,100		0						0	}		^			
Unit Type		Hours	Φ.	0		Φ	0		Φ.	0		Φ	0		-	atal UDA
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES Only)		565.81				\$			\$			\$		-	 '	otal UDC
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)) \$	565.81	\$		-	\$		-	\$	-		\$		-		480.00

Appendix B - DPH 3: Salaries & Employee Benefits Detail

Contract ID Number1000010833Appendix NumberB-1Program NameHYDE STPage NumberProgram Code38BR3Fiscal Year2025-26 (Tentative)Funding Notification Date08/05/24

Medical Director Licensed Psychiatric Technician Nurse Practitioner Nurse Program Manager/Director Psychologist Neuropsych/Supervisor Nurse Program Coordinator Nurse Practitioner Nurse Practit	Practitioner	(mm/c FTE 0.81 0.81 0.81 0.81 0.81	\$ 4,944.00	(mm/ FTE 0.81	(dd/yy-mm/dd/yy): Salaries	•	yy-mm/dd/yy):	(mm/dd	/w/ mm/dd/w/	<u> </u>					
Position Title Medical Director Licensed Psychiatric Technician Nurse Practitioner Nur	ed Physician ed Psychiatric Technician Practitioner Practitioner Practitioner (MFT, LCSW, LPCC)/ Intern or Waivered LPHA (MF	0.81 0.81 0.81	Salaries \$ 224,410.00 \$ 4,944.00	FTE	Salaries	Terr I	,,	,, www.	/yy=111111/UU/yy).	(mm/dc	d/yy-mm/dd/yy):	(mm/dd/	yy-mm/dd/yy):	(mm/dd/y	y-mm/dd/yy`
Medical Director Licensed Psychiatric Technician Nurse Practitioner Nurse Program Manager/Director Psychologist Neuropsych/Supervisor Nurse Program Coordinator Nurse Practitioner Nurse Practit	ed Physician ed Psychiatric Technician Practitioner Practitioner Practitioner (MFT, LCSW, LPCC)/ Intern or Waivered LPHA (MF	0.81 0.81	\$ 4,944.00	0.81		FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries Salaries
Lead Nurse Practitioner Nurse Pr	Practitioner Practitioner Practitioner Practitioner (MFT, LCSW, LPCC)/ Intern or Waivered LPHA (MF (MFT, LCSW, LPCC)/ Intern or Waivered LPHA (MF	0.81			\$ 224,410										
Lead Nurse Practitioner Nurse Pr	Practitioner Practitioner (MFT, LCSW, LPCC)/ Intern or Waivered LPHA (MF (MFT, LCSW, LPCC)/ Intern or Waivered LPHA (MF			0.81	\$ 4,944										
Nurse Practit Clinician LPHA (MFT, Therapist Therapist/Supervisor Psychologist Therapist/Supervisor Clinical Program Manager/Director Psychologist Neuropsych/Supervisor Neuropsych/Supervisor Neuropsych/Supervisor Neuropsych/Supervisor Psychologist Neuropsych/Supervisor Neuropsych/Supervisor Psychologist Neuropsych/Supervisor Non Billing S	Practitioner (MFT, LCSW, LPCC)/ Intern or Waivered LPHA (MF (MFT, LCSW, LPCC)/ Intern or Waivered LPHA (MF	0.81	\$ 158,915.00	0.81	\$ 158,915										
Clinician Therapist LPHA (MFT, Therapist/Supervisor Therapist/Supervisor Therapist/Supervisor Clinical Program Manager/Director Psychologist Psychologist Neuropsych/Supervisor Neuropsych/Supervisor Neuropsych/Supervisor Neuropsych/Supervisor Neuropsych/Supervisor Psychologist Neuropsych/Supervisor Psychologist Neuropsych/Supervisor Psychologist Neuropsych/Supervisor Psychologist Neuropsych/Supervisor Psychologist Director of Training LPHA (MFT, Nurse Program Coordinator LVN Receptionist Non Billing S	(MFT, LCSW, LPCC)/ Intern or Waivered LPHA (MF (MFT, LCSW, LPCC)/ Intern or Waivered LPHA (MF		\$ 114,574.00	0.81	\$ 114,574										
Therapist LPHA (MFT, Therapist/Supervisor Psychologist Therapist/Supervisor Mental Healt Clinical Program Manager/Director LPHA (MFT, Psychologist Psychologist Neuropsych/Supervisor Psychologist Neuropsych/Supervisor Psychologist Neuropsych/Supervisor Psychologist Neuropsych/Supervisor Psychologist Director of Training LPHA (MFT, Nurse Program Coordinator LVN Receptionist Non Billing S	(MFT, LCSW, LPCC)/ Intern or Waivered LPHA (MF	0.81	\$ 117,328.00	0.81	\$ 117,328										
Therapist/Supervisor Psychologist Therapist/Supervisor Mental Healt Clinical Program Manager/Director LPHA (MFT, Psychologist Psychologist Neuropsych/Supervisor Psychologist Neuropsych/Supervisor Psychologist Neuropsych/Supervisor Psychologist Neuropsych/Supervisor Psychologist Director of Training LPHA (MFT, Nurse Program Coordinator LVN Receptionist Non Billing S		0.81	\$ 69,065.00	0.81	\$ 69,065										
Therapist/Supervisor Clinical Program Manager/Director Psychologist Neuropsych/Supervisor Neuropsych/Supervisor Neuropsych/Supervisor Psychologist Neuropsych/Supervisor Psychologist Neuropsych/Supervisor Psychologist Director of Training LPHA (MFT, Nurse Program Coordinator Receptionist Mental Healt LPHA (MFT, Psychologist LPHA (MFT, LVN Non Billing S	logist (Licensed or waivered)	1.00	\$ 91,928.00	1.00	\$ 91,928										
Clinical Program Manager/Director Psychologist Neuropsych/Supervisor Neuropsych/Supervisor Neuropsych/Supervisor Neuropsych/Supervisor Psychologist Neuropsych/Supervisor Psychologist Director of Training LPHA (MFT, Nurse Program Coordinator Receptionist Non Billing S		1.00	\$ 97,053.00	1.00	\$ 97,053		-								
Psychologist Neuropsych/Supervisor Neuropsych/Supervisor Neuropsych/Supervisor Neuropsych/Supervisor Psychologist Neuropsych/Supervisor Psychologist Director of Training LPHA (MFT, Nurse Program Coordinator Receptionist Non Billing S	Health Rehab Specialist	0.81	\$ 76,323.00	0.81	\$ 76,323										
Neuropsych/Supervisor Psychologist Neuropsych/Supervisor Psychologist Neuropsych/Supervisor Psychologist Director of Training LPHA (MFT, Nurse Program Coordinator Receptionist Non Billing S	(MFT, LCSW, LPCC)/ Intern or Waivered LPHA (MF	0.81	\$ 51,258.00	0.81	\$ 51,258										
Neuropsych/Supervisor Psychologist Neuropsych/Supervisor Psychologist Director of Training LPHA (MFT, Nurse Program Coordinator LVN Receptionist Non Billing S	ologist (Licensed or waivered)	1.00	\$ 140,039.00	1.00	\$ 140,039										
Neuropsych/Supervisor Psychologist Director of Training LPHA (MFT, Nurse Program Coordinator LVN Receptionist Non Billing S	ologist (Licensed or waivered)	1.00	\$ 146,802.00	1.00	\$ 146,802										
Director of Training LPHA (MFT, Nurse Program Coordinator LVN Receptionist Non Billing S	ologist (Licensed or waivered)	1.00	\$ 128,125.00	1.00	\$ 128,125										
Nurse Program Coordinator LVN Receptionist Non Billing S	ologist (Licensed or waivered)	1.00	\$ 120,000.00	1.00	\$ 120,000										
Receptionist Non Billing S	(MFT, LCSW, LPCC)/ Intern or Waivered LPHA (MF	0.81	\$ 102,892.00	0.81	\$ 102,892										
		0.81	\$ 72,688.00	0.81	\$ 72,688										
Executive Director Psychologist	lling Staffing	0.81	\$ 72,688.00	0.81	\$ 72,688										
	ologist (Licensed or waivered)	0.28	\$ 69,665.00	0.28	\$ 69,665										
		0.00	\$ -												
		0.00	\$ -												
		0.00	•												
		0.00	\$ -												
		0.00	\$ -							\longrightarrow					
		0.00	·							\longrightarrow					
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		0.00													
		0.00								\longrightarrow	 				
		0.00													
		0.00													
Totals:		15.19		15.19	\$ 1,858,697.00	0.00	\$ -	0.00	\$ -	0.00	\$ -	0.00	\$ -	0.00 \$	
· otaloi		. 5. 10	,,555,551.00	.3.13	+ 1,000,001.00	3.00	T	0.00	₹	0.00	1 +	0.00	*	σ.σσ φ	
Employee Benefits:		18.20%	\$ 338,305.00	18.20%	\$ 338,305	0.00%		0.00%		0.00%		0.00%		0.00%	
FOTAL SALARIES & BENEFITS			\$ 2,197,002.00	1	\$ 2,197,002.00	1 '	\$ -		\$ -		\$ -		\$ -		

Appendix B - DPH 4: Operating Expenses Detail

Contract ID Number	1000010833	Appendix Number	B-1
Program Name	HYDE ST	Page Number	
Program Code	38BR3	Fiscal Year	2025-26 (Tentative)
		Funding Notification Date	08/05/24

Expense Categories & Line Items	TOTAL	Outpatient Program	Dept-Auth-Proj- Activity	Dept-Auth-Proj- Activity	Dept-Auth-Proj- Activity	Dept-Auth-Proj- Activity	Dept-Auth-Proj- Activity
Funding Term	07/01/2024 - 06/30/202	7/01/2024 - 06/30/202	2 (mm/dd/yy-mm/dd/yy)	 mm/dd/yy-mm/dd/yy	 mm/dd/yy-mm/dd/yy) (mm/dd/yy-mm/dd/yy)	(mm/dd/yy-mm/dd/yy)
Rent	\$ 190,128.00	\$ 190,128					
Utilities (telephone, electricity, water, gas)	\$ 3,146.00	\$ 3,146					
Building Repair/Maintenance	\$ 451.00	\$ 451					
Pest & Janitorial	\$ 17,983.00	\$ 17,983					
Occupancy Total:	\$ 211,708.00		\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ 478.00	\$ 478					
Printing & Copying	\$ 51.00	·					
General Supplies	\$ 5,254.00						
Office Supplies	\$ 5,376.00						
Materials & Supplies Total				\$ -	\$ -	\$ -	\$ -
Insurance	\$ 22,877.00						
IT Supplies and Services	\$ 8,456.00	· · · · · · · · · · · · · · · · · · ·					
Equipment Lease & Maintenance	\$ 3,300.00						
Security Services	\$ 20,696.00	· · · · · · · · · · · · · · · · · · ·					
Professional Licenses	\$ 8,404.00	·					
Shredding	\$ 2,500.00						
General Operating Total	, , , , , , , , , , , , , , , , , , , ,		- \$	\$ -	-	-	-
Local Travel	\$ 446.00			,		,	,
Out-of-Town Travel	\$ -	Ψ 110					
Field Expenses	\$ -						
Staff Travel Total	\$ 446.00	\$ 446.00	\$ -	\$ -	\$ -	\$ -	\$ -
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate, Amounts, and Practitioner Type if Billable Provider)	\$ -	,	·	·	·	,	·
	\$ -						
Consultant/Subcontractor Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other (provide detail):	\$ -						
Client Related Expenses - includes client food, client activities, client supplies,							
client travel, & rental subsidies	\$ 4,484.00	\$ 4,484.00					
Stipends	\$ 27,675.00						
Job Recruitment	\$ 2,089.00						
Other Total			-	\$ -	\$ -	\$ -	\$ -
TOTAL ODEDATING EVENUE	¢ 222.704.00	¢ 222.704.00	T ¢] ¢	l œ	T ¢	l œ
TOTAL OPERATING EXPENSE	\$ 323,794.00	\$ 323,794.00	-	-	-	-	-

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

Appendix B - DPR 2: Depar	unen	t of r ublic fie	auii	Cost Repo	rting/De	ata Conecti	טוו (כ	(DC)	Λ	andia Nia			D O
DHCS Legal Entity Number 01123	0:	!								endix Nu			B-2
Provider Name Hyde Street Community	Servi	ces, inc.								Page Nu		2005.0	0 /T + 1'
Provider Number 38BRA3	_												6 (Tentativ
Contract ID Number 1000010833								Fundi	ng No	otification	Date	0	8/05/24
Program Name	_		SP				1		1				
Program Code		38BRA3											
Mode (MH) or Modality (SUD))	15											
O amit a Da a situlti a	Outo	ationt Convisos											
Service Description													
Funding Term (mm/dd/yy-mm/dd/yy):	07/01/	2024 - 06/30/2025											OTAL
FUNDING USES													OTAL
Salaries & Employee Benefits		1,133,325			- \$							\$	1,133,325
Operating Expenses		170,354	\$		- \$	•						\$	170,354
Capital Expenses	_											\$	
Subtotal Direct Expenses		1,303,679	\$		- \$. \$	-	\$		-	\$	1,303,679
Indirect Expenses		189,628										\$	189,628
Indirect %		14.5%		0.0%		0.0%		0.0%		0.0%			14.5%
TOTAL FUNDING USES		1,493,307	\$		- \$		• \$	-	\$		-	\$	1,493,307
BHS MENTAL HEALTH FUNDING SOURCES	6												
MH Adult Fed SDMC FFP (50%)	\$	341,702										\$	341,702
MH Adult County General Fund	\$	302,303										\$	302,303
MH MHSA (Adult) Match	\$	341,702										\$	341,702
MH MHSA (Adult)	\$	507,600										\$	507,600
												\$	
												\$	
												\$	
TOTAL BHS MENTAL HEALTH FUNDING SOURCES	\$	1,493,307	\$		- \$. \$	-	\$		-	\$	1,493,307
BHS SUD FUNDING SOURCES	3												
												\$	
												\$	
												\$	
This row left blank for funding sources not in drop-down list												\$	
TOTAL BHS SUD FUNDING SOURCES	\$	-	\$		- \$. \$	-	\$			\$	
OTHER DPH FUNDING SOURCES	3												
												\$	
This row left blank for funding sources not in drop-down list												\$	
TOTAL OTHER DPH FUNDING SOURCES	\$ \$	-	\$		- \$. \$	-	\$		_	\$	
TOTAL DPH FUNDING SOURCES		1,493,307	-		- \$		\$		\$			\$	1,493,307
NON-DPH FUNDING SOURCES	1	1, 100,001	_		+		+		+			<u>*</u>	1, 100,001
NO. D. III ONDING GOOKGEG													
This row left blank for funding courses not in dran down liet	+				-		+		+			\$	
This row left blank for funding sources not in drop-down list TOTAL NON-DPH FUNDING SOURCES	<u> </u>		\$		_ _		. \$		¢			\$	-
	_	4 400 007	Ψ		- \$	•	. φ	-	\$		-	Ψ	4 400 00=
TOTAL FUNDING SOURCES (DPH AND NON-DPH))	1,493,307			-			-			-		1,493,307
BHS UNITS OF SERVICE AND UNIT COST													
Number of Beds Purchased									1				
SUD Only - Number of Outpatient Group Counseling Sessions									1				
SUD Only - Licensed Capacity for Narcotic Treatment Programs									1				
Payment Method	_								1				
Unduplicated Clients (UDC)		50							1				
DPH Units of Service	_	2,459				0			1				
Unit Type		Staff Hour		0		0		0	+-	0			4.1115.3
Cost Per Unit - DPH Rate (DPH FUNDING SOURCES Only)		607.24		-	\$	-	\$	-	\$		-	То	tal UDC
Cost Per Unit - Contract Rate (DPH & Non-DPH FUNDING SOURCES)) \$	607.24	\$	-	\$	-	\$	-	\$		-		50.0

Appendix B - DPH 3: Salaries & Employee Benefits Detail

Contract ID Number1000010833Appendix NumberB-2Program NameHYDE STPage NumberProgram Code38BR3Fiscal Year2025-26 (Tentative)Funding Notification Date08/05/24

Position Title (List all staffing including intern/trainee staff who not part of budget but contributing to units of se		Т	OTAL	Outpa	tient Services	Dept-Aut	th-Proj-Activity	Dept-Au	ıth-Proj-Activity	Dep	ot-Auth-Proj- Activity		-Auth-Proj- Activity		-Auth-Proj- Activity
Funding	g Term	07/01/202	4 - 06/30/2025	07/01/20	24 - 06/30/2025	(mm/dd/	/yy-mm/dd/yy):				d/yy-mm/dd/yy):	(mm/dd	/yy-mm/dd/yy):	(mm/dd/	yy-mm/dd/yy):
Position Title	Pracitioner Type (Select from Drop Down)	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries	FTE	Salaries
Medical Director	Licensed Physician	0.19 \$	52,639.00	0.19	•										
Licensed Psychiatric Technician	Licensed Psychiatric Technician	0.19 \$	5,160.00	0.19											
Lead Nurse Practitioner	Nurse Practitioner	0.19 \$	37,276.00	0.19											
Nurse Practitioner	Nurse Practitioner	0.19 \$	26,875.00	0.19											
Nurse Practitioner	Nurse Practitioner	0.19 \$	27,521.00	0.19	\$ 27,521										
Peer Counselor	Mental Health Rehab Specialist	1.00 \$	79,181.00	1.00	\$ 79,181										
Peer Counselor	Non Billing Staffing	1.00 \$	79,181.00	1.00	\$ 79,181										
Peer Counselor	Peer Support Specialist	1.00 \$	79,181.00	1.00											
Supervising Counselor	LPHA (MFT, LCSW, LPCC)/ Intern or Waivered LPHA (MF	1.00 \$	102,255.00	1.00											
Clinical Program Manager/Director	LPHA (MFT, LCSW, LPCC)/ Intern or Waivered LPHA (MF	0.19 \$	12,023.00	0.19											
Clinician	LPHA (MFT, LCSW, LPCC)/ Intern or Waivered LPHA (MF	0.19 \$	16,200.00	0.19											
Therapist/Supervisor	Mental Health Rehab Specialist	0.19 \$	17,903.00	0.19											
Therapist	LPHA (MFT, LCSW, LPCC)/ Intern or Waivered LPHA (MF	1.00 \$	100,000.00	1.00											
Therapist	Other Qualified Providers - Other Designated MH Staff tha	1.00 \$	92,250.00	1.00	\$ 92,250										
Therapist	Other Qualified Providers - Other Designated MH Staff tha	1.00 \$	92,250.00	1.00											
Therapist	Mental Health Rehab Specialist	1.00 \$	86,719.00	1.00	\$ 86,719										
Director of Training	LPHA (MFT, LCSW, LPCC)/ Intern or Waivered LPHA (MF	0.19 \$	24,135.00	0.19	\$ 24,135										
Nurse Program Coordinator	LVN	0.19 \$	17,050.00	0.19	\$ 17,050										'
Receptionist	Non Billing Staffing	0.19 \$	17,050.00	0.19	\$ 17,050										•
Executive Director	Psychologist (Licensed or waivered)	0.01 \$	1,000.00	0.01	\$ 1,000										
		0.00 \$	-												•
		0.00 \$	-												
		0.00 \$	-												-
		0.00 \$	-												
		0.00 \$	-												
		0.00 \$	_												
		0.00 \$	-												•
		0.00 \$	-												
		0.00 \$	-												
		0.00 \$	-												
	Totals:	10.10 \$	965,849.00	10.10	\$ 965,849.00	0.00	\$ -	0.00	\$ -	0.00	\$ -	0.00	\$ -	0.00	\$ -
Employee Benefits:		17.34% \$	167,476.00	17.34%	\$ 167,476	0.00%		0.00%		0.00%)	0.00%		0.00%	
TOTAL SALARIES & BENEFITS		\$	1,133,325.00]	\$1,133,325.00		\$ -]	\$ -]	\$ -		\$ -		\$ -

Appendix B - DPH 4: Operating Expenses Detail

Contract ID Number	1000010833	Appendix Number	B-2
Program Name	HYDE ST	Page Number	
Program Code	38BR3	Fiscal Year	2025-26 (Tentative)
		Funding Notification Date	08/05/24

Expense Categories & Line Items	TOTAL	Outpatient Program	Dept-Auth-Proj- Activity	Dept-Auth-Proj- Activity	Dept-Auth-Proj- Activity	Dept-Auth-Proj- Activity	Dept-Auth-Proj- Activity
Funding Term	07/01/2024 - 06/30/202	7/01/2024 - 06/30/202	2 (mm/dd/yy-mm/dd/yy)	 mm/dd/yy-mm/dd/yy)	 mm/dd/yy-mm/dd/yy	(mm/dd/yy-mm/dd/yy)	(mm/dd/yy-mm/dd/yy)
Rent	\$ 96,365.00	\$ 96,365					
Utilities (telephone, electricity, water, gas)	\$ 1,716.00	\$ 1,716					
Building Repair/Maintenance	\$ 335.00	\$ 335					
Pest & Janitorial	\$ 11,800.00	\$ 11,800					
Occupancy Total:	\$ 110,216.00		\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ 319.00	\$ 319					
Printing & Copying	\$ 34.00	·					
General Supplies	\$ 3,503.00						
Office Supplies	\$ 3,000.00						
Materials & Supplies Total:	·			\$ -	\$ -	\$ -	\$ -
Insurance	\$ 14,478.00	\$ 14,478					
IT Supplies and Services	\$ 4,613.00						
Equipment Lease & Maintenance	\$ 1,800.00						
Security Services	\$ 16,713.00						
Professional Licenses	\$ 1,971.00	1					
Shredding	\$ 1,300.00						
General Operating Total:	,	· · · · · · · · · · · · · · · · · · ·	\$ -	-	-	-	-
Local Travel	\$ 1,041.00		•		,		,
Out-of-Town Travel	\$ -	Ψ 1,011					
Field Expenses	\$ -						
Staff Travel Total:	\$ 1,041.00	\$ 1,041.00	\$ -	\$ -	\$ -	\$ -	\$ -
Consultant/Subcontractor (Provide Consultant/Subcontracting Agency Name, Service Detail w/Dates, Hourly Rate, Amounts, and Practitioner Type if Billable Provider)	\$ -	,	·	,	·	,	·
	\$ -						
Consultant/Subcontractor Total:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other (provide detail):	\$ -						
Client Related Expenses - includes client food, client activities, client supplies,							
client travel, & rental subsidies	\$ 8,463.00	\$ 8,463.00					
Job Recruitment	\$ 2,903.00						
	\$ -						
Other Total:	\$ 11,366.00	\$ 11,366.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL OPERATING EXPENSE	\$ 170,354.00	\$ 170,354.00	\$ -	-	\$ -	\$ -	\$ -

Appendix B - DPH 5: Capital Expenses Detail

	spondix B Bi ii oi oup	ortan Exponedo Botan			
Contract ID Number			Appendix Number		
Program Name			Page Number		
Program Code			Fiscal Year	2025-26 (Tent	tative)
-		Fundin	g Notification Date:	08/05/24	
1. Equipment					
Item Description	Quantity	Serial #/VIN #	Unit Cost	Total Cos	st
				\$	-
				\$	_
				\$	_
				\$	_
				\$	_
				\$	
				\$	-
					-
<u> </u>				\$	-
Total Equipment Cost				\$	
2. Remodeling					
Description				Total Cos	st
Total Dama dalina Cast				<u></u>	
Total Remodeling Cost				\$	
				•	
Total Capital Expenditure				\$	-
(Equipment plus Remodeling Cost)					

Appendix B - DPH 6: Contract-Wide Indirect Detail

Contractor Name	Hyde Street Community Services, Inc.	Page Number	
Contract ID Number	1000010833	Fiscal Year	2025-26 (Tentative)
		Funding Notification Date	8/5/24

1. SALARIES & EMPLOYEE BENEFITS

Position Title	FTE	Amount
Executive Director	0.71	\$ 175,421.00
HR Manager/Executive Assistant	1.00	\$ 95,018.00
Controller	1.00	\$ 121,125.00

Subtotal: 2.71 \$ 391,564.00

Employee Benefits: 11.8% \$ 46,138.00 **Total Salaries and Employee Benefits:** \$ 437,702.00

2. OPERATING COSTS

2. OPERATING COSTS		
Expenses (Use expense account name in the ledger.)		Amount
6402 Bank Charges (account maintenance fees)	\$	1,255.00
6403 Data Processing Dues and Fees	\$	42,200.00
6410 Legal & Accounting	\$	38,938.00
Professional/Contractual Services	\$	23,086.00
6420 Staff Apreciation and Development	\$	11,415.00
Total Op	perating Costs \$	116,894.00
Total	Indirect Costs \$	554,596.00

BUDGET JUSTIFICATION

Contract ID Number Contractor Name			App	endix Number		B#
Program Name			, , , , ,	Fiscal Year		01/00/00
-				·		
1a) SALARIES						
Staff Position 1:						
Brief description of job duties:						
Minimum qualifications:						
	T		<u> </u>			
		# Months per	Annualized (if less than 12			
Annual Salary:	Level of Effort	Year:	months):	FTE		Amount
			0.00	0.00	\$	-
Staff Position 2:						
Brief description of job duties:						
Minimum qualifications:						
		# Months per	Annualized (if less than 12			_
Annual Salary:	Level of Effort	Year:	months):	FTE		Amount
			0.00	0.00	\$	-
Staff Position 3:						
Brief description of job duties:						
Minimum qualifications:						
		# Months per	Annualized (if less than 12			
Annual Salary:	Level of Effort	Year:	months):	FTE		Amount
			0.00	0.00	\$	-
Claff Danisian A.						
Staff Position 4: Brief description of job duties:						
Minimum qualifications:						
•						
		# Months per	Annualized (if less than 12			
Annual Salary:	Level of Effort	Year:	months):	FTE		Amount
			0.00	0.00	\$	-
Staff Position 5:						
Brief description of job duties:						
Minimum qualifications:						
		# Months per	Annualized (if less than 12			
Annual Salary:	Level of Effort	# Months per Year:	months):	FTE		Amount
,-			0.00	0.00	\$	-
Staff Position 6:						
Brief description of job duties:						
Minimum qualifications:						
1	Т	# Months	Appublized (if less their 40	I		
Annual Salary:	Level of Effort	# Months per Year:	Annualized (if less than 12 months):	FTE		Amount
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	Total FTE:	-	Т	otal Salaries:	\$	-
1b) EMPLOYEE BENEFITS:				-		
*A benefit expense may be added or deleted to	o retiect the compo	osition of the agent	cy's employee benefits. Social Security		mou	nt
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			Medicare		
	Unemployment Insurance				
			Worker's Compensation		
			Health and Dental		
			Retirement Paid Time Off		
			Other (specify)		
			Other (specify)		
			Total Fringe Benefit:		-
			Frin	ge Benefit %:	0'
		TOTAL SALAF	RIES & EMPLOYEE FRING	E BENEFITS:	_
2) OPERATING EXPENSES:					
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	•	Dui of Doconiu	41	Rate	A
Expense Item		Brief Description			Amount
			Total Gener	ral Operating:	-
Staff Travel:					
Purpose of Travel		Location	Expense Item	Rate	Amount
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Consultants/Subcontractors:					
Consultant/Subcontractor Name		Service Description			Amount
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	Total Consultants/Subcontractor	'S:			
Other:					
Other.	•				
Expense Item	Brief Description Rate	Amount			
		<u> </u> er: -			
	Total Other	···			
	TOTAL OPERATING EXPENSES:				
3) CAPITAL EXPENSES: (Remodeling cost of	or purchase of \$5,000 or more per unit)				
Capital Expense Item	Brief Description	Amount			
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	TOTAL CAPITAL EXPENSE	S· -			
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4) INDIRECT EXPENSES					
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Appendix C

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Appendix D

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH THIRD PARTY COMPUTER SYSTEM ACCESS AGREEMENT (SAA)

TABLE OF CONTENTS

SECTION 1 - "THIRD PARTY" CATEGORIES	. 1
SECTION 2 - DEFINITIONS	
SECTION 3 – GENERAL REQUIREMENTS	
SECTION 4 – ADDITIONAL REQUIREMENTS FOR TREATMENT PROVIDERS	
SECTION 5 – ADDITIONAL REQUIREMENTS FOR EDUCATION/TEACHING INSTITUTIONS	4
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SECTION 8 - DATA BREACH; LOSS OF CITY DATA	4

Attachment 1 to SAA - System Specific Requirements

TERMS AND CONDITIONS

The following terms and conditions govern Third Party access to San Francisco Department of Public Health ("Department" and/or "City") Computer Systems. Third Party access to Department Computer Systems and Department Confidential Information is predicated on compliance with the terms and conditions set forth herein.

SECTION 1 - "THIRD PARTY" CATEGORIES

- 1. **Third Party In General**: means an entity seeking to access a Department Computer System. Third Party includes, but is not limited to, Contractors (including but not limited to Contractor's employees, agents, subcontractors), Researchers, and Grantees, as further defined below. Category-specific terms for Treatment Providers, Education Institutions, and Health Insurers are set forth Sections 4 through 6, herein.
- 2. **Treatment Provider**: means an entity seeking access to Department Computer Systems in order to obtain patient information necessary to provide patient treatment, billing, and healthcare operations, including access for Physician Practices, Hospitals, Long Term Care Facilities, and Nursing Homes.
- 3. **Education Institution**: means an entity seeking access to Department Computer Systems to support the training of its students while performing education activities at Department facilities.
- 4. **Health Insurer**: means an entity seeking access to provide health insurance or managed care services for Department patients.

SECTION 2 - DEFINITIONS

- 1. "Agreement" means an Agreement between the Third Party and Department that necessitates Third Party's access to Department Computer System. Agreement includes, but is not limited to, clinical trial agreements, accreditation agreements, affiliation agreements, professional services agreements, no-cost memoranda of understanding, and insurance network agreements.
- 2. "Department Computer System" means an information technology system used to gather and store information, including Department Confidential Information, for the delivery of services to the Department.
- 3. "Department Confidential Information" means information contained in a Department Computer System, including identifiable protected health information ("PHI") or personally identifiable information ("PII") of Department patients.
- 4. "**Third Party**" and/or "**Contractor**" means a Third Party Treatment Provider, Education Institution, and/or Health Insurer, under contract with the City.
- 5. "User" means an individual who is being provided access to a Department Computer Systems on behalf of Third Party. Third Party Users include, but are not limited to, Third Party's employees, students/trainees, agents, and subcontractors.

SECTION 3 – GENERAL REQUIREMENTS

- 1. **Third Party Staff Responsibility**. Third Party is responsible for its work force and each Third Party User's compliance with these Third Party System Access Terms and Conditions.
- 2. **Limitations on Access.** User's access shall be based on the specific roles assigned by Department to ensure that access to Department Computer Systems and Department Confidential Information is limited to the minimum necessary to perform under the Agreement.

- 3. **Qualified Personnel**. Third Party and Department (i.e., training and onboarding) shall ensure that Third Party Users are qualified to access a Department Computer System.
- 4. **Remote Access/Multifactor Authentication**. Department may permit Third Party Users to access a Department Computer System remotely. Third Party User shall use Department's multifactor authentication solution when accessing Department systems remotely or whenever prompted.
- 5. **Issuance of Unique Accounts**. Department will issue a unique user account for each User of a Department Computer System. Third Party User is permitted neither to share such credentials nor use another user's account.
- 6. **Appropriate Use**. Third Party is responsible for the appropriate use and safeguarding of credentials for Department Computer System access issued to Third Party Users. Third Party shall take the appropriate steps to ensure that their employees, agents, and subcontractors will not intentionally seek out, download, transfer, read, use, or disclose Department Confidential Information other than for the use category described in Section 1 "Third Party" Categories.
- 7. **Notification of Change in Account Requirements**. Third Party shall promptly notify Department via Third Party's Report for DPH Service Desk (deph.helpdesk@sfdph.org in the event that Third Party or a Third Party User no longer has a need to use Department Computer Systems(s), or if the Third Party User access requirements change. Such notification shall be made no later than one (1) business day after determination that use is no longer needed or that access requirements have changed.
- 8. **Assistance to Administer Accounts**. The Parties shall provide all reasonable assistance and information necessary for the other Party to administer the Third Party User accounts.
- 9. **Security Controls**. Third Party shall appropriately secure Third Party's computing infrastructure, including but not limited to computer equipment, mobile devices, software applications, and networks, using industry standard tools to reduce the threat that an unauthorized individual could use Third Party's computing infrastructure to gain unauthorized access to a Department Computer System. Third Party shall also take commercially reasonable measures to protect its computing infrastructure against intrusions, viruses, worms, ransomware, or other disabling codes. General security controls include, but are not limited to:
 - a **Password Policy**. All users must be issued a unique username for accessing City Data. Third Party must maintain a password policy based on information security best practices as required by 45 CFR § 164.308 and described in NIST Special Publication 800-63B.
 - b Workstation/Laptop Encryption. All Third Party-owned or managed workstations, laptops, tablets, smart phones, and similar devices that access a Department Computer System must be configured with full disk encryption using a FIPS 140-2 certified algorithm.
 - c **Endpoint Protection Tools**. All Third Party-owned or managed workstations, laptops, tablets, smart phones, and similar devices that access a Department Computer System must maintain a current installation of comprehensive anti-virus, anti-malware, anti-ransomware, desktop firewall, and intrusion prevention software with automatic updates scheduled at least daily.
 - d **Patch Management**. To correct known security vulnerabilities, Third Party shall install security patches and updates in a timely manner on all Third Party-owned workstations, laptops, tablets, smart phones, and similar devices that access Department Computer Systems based on Third Party's risk assessment of such patches and updates, the technical requirements of Third Party's computer systems, and the vendor's written recommendations. If patches and

updates cannot be applied in a timely manner due to hardware or software constraints, mitigating controls must be implemented based upon the results of a risk assessment.

- e **Mobile Device Management**. Third Party shall ensure both corporate-owned and personally owned mobile devices have Mobile Device Management (MDM) installed. Given the prevalence of restricted data in Third Party's environment, all mobile devices used for Third Party's business must be encrypted. This applies to both corporate-owned and privately-owned mobile devices. At a minimum, the MDM should: Enforce an entity's security policies and perform real-time compliance checking and reporting; Enforce strong passwords/passcodes for access to mobile devices; Perform on-demand remote wipe if a mobile device is lost or stolen; Mandate device encryption.
- 10. Auditing Accounts Issued. Department reserves the right to audit the issuance and use of Third Party User accounts. To the extent that Department provides Third Party with access to tools or reports to audit what Department Confidential Information a Third Party User has accessed on a Department Computer System, Third Party must perform audits on a regular basis to determine if a Third Party User has inappropriately accessed Department Confidential Information.
- 11. **Assistance with Investigations**. Third Party must provide all assistance and information reasonably necessary for Department to investigate any suspected inappropriate use of a Department Computer Systems or access to Department Confidential Information. The Department may terminate a Third Party' User's access to a Department Computer System following a determination of inappropriate use of a Department Computer System.
- 12. **Inappropriate Access, Failure to Comply**. If Third Party suspects that a Third Party User has inappropriately accessed a Department Computer System or Department Confidential Information, Third Party must immediately, and within no more than one (1) business day, notify Department.
- 13. **Policies and Training**. Third Party must develop and implement appropriate policies and procedures to comply with applicable privacy, security and compliance rules and regulations. Third Party shall provide appropriate training to Third Party Users on such policies. Access will only be provided to Third Party Users once all required training is completed.
- 14. **Third Party Data User Confidentiality Agreement**. Before Department Computer System access is granted, as part of Department's compliance, privacy, and security training, each Third Party User must complete Department's individual user confidentiality, data security and electronic signature agreement form. The agreement must be renewed annually.
- 15. **Corrective Action**. Third Party shall take corrective action upon determining that a Third Party User may have violated these Third Party System Access Terms and Conditions.
- 16. **No Technical or Administrative Support**. Except as provided herein or otherwise agreed, the Department will provide no technical or administrative support to Third Party or Third Party User(s) for Department Computer System access; provided, however, that the foregoing does not apply to technical or administrative support necessary to fulfill Third Party's contractual and/or legal obligations, or as required to comply with the terms of this Agreement.

SECTION 4 – ADDITIONAL REQUIREMENTS FOR TREATMENT PROVIDERS

1. **Permitted Access, Use and Disclosure**. Treatment Providers and Treatment Provider Users shall access Department Confidential Information of a patient/client in accordance with applicable privacy rules and data protection laws. Requests to obtain data for research purposes require approval from an Institutional Review Board (IRB).

- 2. **Redisclosure Prohibition**. Treatment Providers may not redisclose Department Confidential Information, except as otherwise permitted by law.
- 3. **HIPAA Security Rule**. Under the HIPAA Security Rule, Treatment Providers must implement safeguards to ensure appropriate protection of protected/electronic health information (PHI/EHI), including but not limited to the following:
 - a) Ensure the confidentiality, integrity, and security of all PHI/EHI they create, receive, maintain or transmit when using Department Computer Systems;
 - b) Identify and protect against reasonably anticipated threats to the security or integrity of the information;
 - c) Protect against reasonably anticipated, impermissible uses or disclosures; and
 - d) Ensure compliance by their workforce.

SECTION 5 – ADDITIONAL REQUIREMENTS FOR EDUCATION/TEACHING INSTITUTIONS

- 1. **Education Institution is Responsible for its Users**. Education Institutions shall inform Education Institution Users (including students, staff, and faculty) of their duty to comply with the terms and conditions herein. Department shall ensure that all Education Institution Users granted access to a Department Computer System shall first successfully complete Department's standard staff training for privacy and compliance, information security and awareness, and software-application specific training before being provided User accounts and access to Department Computer Systems.
- 2. **Tracking of Training and Agreements**. Department shall maintain evidence of all Education Institution Users (including students, staff, and faculty) having successfully completed Department's standard staff training for privacy and compliance and information security and awareness. Such evidence shall be maintained for a period of five (5) years from the date of graduation or termination of the Third Party User's access.

SECTION 6 – ADDITIONAL REQUIREMENTS FOR HEALTH INSURERS

- 1. **Permitted Access, Use and Disclosure**. Health Insurers and Health Insurer Users may access Department Confidential Information only as necessary for payment processing and audits, including but not limited to quality assurance activities, wellness activities, care planning activities, and scheduling.
- 2. **Member / Patient Authorization**. Before accessing, using, or further disclosing Department Confidential Information, Health Insurers must secure all necessary written authorizations from the patient / member or such individuals who have medical decision-making authority for the patient / member.

SECTION 7 - DEPARTMENT'S RIGHTS

- 1. **Periodic Reviews**. Department reserves the right to perform regular audits to determine if a Third Party's access to Department Computer Systems complies with these terms and conditions.
- 2. **Revocation of Accounts for Lack of Use**. Department may revoke any account if it is not used for a period of ninety (90) days.
- 3. **Revocation of Access for Cause**. Department and Third Party reserves the right to suspend or terminate a Third Party User's access to Department Computer Systems at any time for cause, i.e., the Parties determined that a Third-Party User has violated the terms of this Agreement and/or Applicable law.
- 4. **Third Party Responsibility for Cost**. Each Third Party is responsible for its own costs incurred in connection with this Agreement or accessing Department Computer Systems.

SECTION 8 - DATA BREACH; LOSS OF CITY DATA.

- 1. **Data Breach Discovery**. Following Third Party's discovery of a breach of City Data disclosed to Third Party pursuant to this Agreement, Third Party shall notify City in accordance with applicable laws. Third Party shall:
 - i. mitigate, to the extent practicable, any risks or damages involved with the breach or security incident and to protect the operating environment; and
 - ii. comply with any requirements of federal and state laws as applicable to Third Party pertaining to the breach of City Data.
- 2. **Investigation of Breach and Security Incidents.** To the extent a breach or security system is identified within Third Party's System that involves City Data provided under this Agreement, Third Party shall investigate such breach or security incident. For the avoidance of doubt, City shall investigate any breach or security incident identified within the City's Data System To the extent of Third Party discovery of information that relates to the breach or security incident of City Data, Third Party User shall inform the City of:
 - i. the City Data believed to have been the subject of breach;
 - ii. a description of the unauthorized persons known or reasonably believed to have improperly used, accessed or acquired the City Data;
 - iii. to the extent known, a description of where the City Data is believed to have been improperly used or disclosed; and
 - iv. to the extent known, a description of the probable and proximate causes of the breach or security incident;
- 3. Written Report. To the extent a breach is identified within Third Party's System, Third Party shall provide a written report of the investigation to the City as soon as practicable; provided, however, that the report shall not include any information protected under the attorney-client privileged, attorney-work product, peer review laws, and/or other applicable privileges. The report shall include, but not be limited to, the information specified above, as well as information on measures to mitigate the breach or security incident.
- 4. **Notification to Individuals.** If notification to individuals whose information was breached is required under state or federal law, Third Party shall cooperate with and assist City in its notification (including substitute notification) to the individuals affected by the breach
- 5. **Sample Notification to Individuals.** If notification to individuals is required, Third Party shall cooperate with and assist City in its submission of a sample copy of the notification to the Attorney General.
- 6. **Media Communications.** The Parties shall together determine any communications related to a Data Breach.
- 7. **Protected Health Information.** Third Party and its subcontractors, agents, and employees shall comply with all federal and state laws regarding the transmission, storage and protection of all PHI disclosed to Third Party by City. 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 PHI given to Third Party by City, Third Party shall indemnify City for the amount of such fine or penalties or damages, including costs of notification, but only in proportion to and to the extent that such fine, penalty or damages are caused by or result from the impermissible acts or omissions of Third Party. This section does not apply to the extent fines or penalties or damages were caused by the City or its officers, agents, subcontractors or employees.

A. Attachment 1 to SAA System Specific Requirements

I. For Access to Department Epic through Care Link the following terms shall apply:

- A. Department Care Link Requirements:
 - 1. Connectivity.
 - a) Third Party must obtain and maintain an Internet connection and equipment in accordance with specifications provided by Epic and/or Department. Technical equipment and software specifications for accessing Department Care Link may change over time. Third Party is responsible for all associated costs. Third Party shall ensure that Third Party Data Users access the System only through equipment owned or leased and maintained by Third Party.
 - 2. Compliance with Epic Terms and Conditions.
 - a) Third Party will at all times access and use the System strictly in accordance with the Epic Terms and Conditions. The following Epic Care Link Terms and Conditions are embedded within the Department Care Link application, and each Data User will need to agree to them electronically upon first sign-in before accessing Department Care Link:
 - **3.** Epic-Provided Terms and Conditions
 - a) Some short, basic rules apply to you when you use your EpicCare Link account. Please read them carefully. The Epic customer providing you access to EpicCare Link may require you to accept additional terms, but these are the rules that apply between you and Epic.
 - b) Epic is providing you access to EpicCare Link, so that you can do useful things with data from an Epic customer's system. This includes using the information accessed through your account to help facilitate care to patients shared with an Epic customer, tracking your referral data, or otherwise using your account to further your business interests in connection with data from an Epic customer's system. However, you are not permitted to use your access to EpicCare Link to help you or another organization develop software that is similar to EpicCare Link. Additionally, you agree not to share your account information with anyone outside of your organization.

II. For Access to Department Epic through Epic Hyperspace the following terms shall apply:

- **B.** Department Epic Hyperspace:
 - 1. Connectivity.
 - a) Third Party must obtain and maintain an Internet connection and required equipment in accordance with specifications provided by Epic and Department. Technical equipment and software specifications for accessing Department Epic Hyperspace will change over time. You may request a copy of required browser, system, and connection requirements from the Department IT division. Third Party is responsible for all associated costs. Third Party shall ensure that Third Party Data Users access the System in accordance with the terms of this agreement.
 - 2. Application For Access and Compliance with Epic Terms and Conditions.
 - a) Prior to entering into agreement with Department to access Department Epic Hyperspace, Third Party must first complete an Application For Access with Epic Systems Corporation of Verona, WI. The Application For Access is found at: https://userweb.epic.com/Forms/AccessApplication. Epic Systems Corporation notifies Department, in writing, of Third Party's permissions to access Department Epic Hyperspace

prior to completing this agreement. Third Party will at all times access and use the system strictly in accordance with the Epic Terms and Conditions.

III. For Access to Department myAvatar the following terms shall apply:

A. Department myAvatar

- 1. Connectivity.
 - a. Third Party must obtain an Internet connection and required equipment in accordance with specifications provided by Department. Technical equipment and software specifications for accessing Department myAvatar will change over time. You may request a copy of required browser, system, and connection requirements from the Department IT division. Third Party is responsible for all associated costs. Third Party shall ensure that Third Party Data Users access the System only through equipment owned or leased and maintained by Third Party.
- 2. Information Technology (IT) Support.
 - a. Third Party must have qualified and professional IT support who will participate in quarterly CBO Technical Workgroups.
- 3. Access Control.
 - a. Access to the BHS Electronic Heath Record is granted based on clinical and business requirements in accordance with the Behavioral Health Services EHR Access Control Policy (6.00-06). The Access Control Policy is found at: https://www.sfdph.org/dph/files/CBHSPolProcMnl/6.00-06.pdf
 - Applicants must complete the myAvatar Account Request Form found at https://www.sfdph.org/dph/files/CBHSdocs/BHISdocs/UserDoc/Avatar_Account_Request_ Form.pdf
 - **c.** All licensed, waivered, registered and/or certified providers must complete the Department credentialing process in accordance with the DHCS MHSUDS Information Notice #18-019.

I. For Access to Department Epic through OutReach

- A. Department OutReach Requirements:
 - 1. Connectivity.
 - d) Third Party Responsibility: The Third Party is required to obtain and maintain an active internet connection and necessary equipment in compliance with the specifications provided by both Epic and the Department.
 - d) Technical Equipment Changes: The specifications for accessing OutReach may be updated over time. Third Party must ensure their equipment and software align with these specifications and bear any related costs.
 - d) Equipment Ownership: Access to the system by Third Party Data Users must occur exclusively through equipment owned, leased, and maintained by the Third Party.
 - d) Equipment Purchase: Compatible equipment required for use with OutReach is the responsibility of the Third Party.
 - 2. Compliance with Epic Terms and Conditions
 - a) Obligations: The Third Party will access and use the system strictly according to Epic's Terms and Conditions. Data Users must electronically accept these terms during their initial login to OutReach.
 - 3. Epic-Provided Terms and Conditions
 - a) Usage Rules: Basic rules are provided by Epic that apply when using the Epic OutReach account. These include:

- a. Purpose of Use: Access to Epic OutReach is intended to facilitate care for shared patients, manage referral data, or further legitimate business interests with respect to data from an Epic customer's system.
- b. Restrictions: Users are prohibited from using Epic OutReach to develop similar software to EpicCare Link. Additionally, account information must not be shared with individuals outside the organization.

This Business Associate Agreement ("BAA") supplements and is made a part of the Agreement by and between the City and County of San Francisco, a Hybrid Entity designated under HIPAA, referred herein as the Covered Entity ("CE"), and Hyde Street Community Services Inc. ("Contractor"), the Business Associate ("BA"), dated November 1, 2025 (the "Agreement").

RECITALS

- A. CE, by and through the Department of Public Health (SFDPH), wishes to disclose, allow access to, or allow collection of 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 and this BAA, 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 are committed to complying with all federal and state laws governing the confidentiality, privacy, and security of health information disclosed to BA pursuant to the Agreement, including, but not limited to the Standards for PHI under 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 with respect to health information, mental health information, and substance use treatment information, 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"), and 42 CFR Part 2.
- D. CE is required to enter into an agreement 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 ("CFR") and contained in this BAA.
- E. BA enters into agreements with CE that require the CE to disclose to BA, or allow BA to create, collect, use, access, maintain, or transmit for or on CE's behalf, certain identifiable health information. The parties desire to enter into this BAA to permit BA to disclose, create, collect, use, access, maintain, or transmit such information and comply with the BA requirements of HIPAA, the HITECH Act, and the corresponding regulations.
- **1. Definitions.** For purposes of this BAA, the Parties agree that each term below and any capitalized term used in this BAA, but not otherwise defined, has the meaning given to that term in the HIPAA Rules (as defined below), and as each may be amended from time to time.
 - **a. Breach** means the acquisition, access, use, or disclosure of PHI in a manner not permitted under the Privacy Rule which compromises the security or privacy of the PHI, as defined in 45 CFR §164.402.
 - **b. Breach Notification Rule** means the portion of HIPAA set forth in Subpart D of 45 CFR Part 164.
 - c. Business Associate means 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, as defined in 45 CFR §160.103.
 - **d. Covered Entity** has the meaning given to such term under the Privacy Rule and the Security Rule, including 45 CFR §160.103.
 - **e. Data Aggregation** means the combining of PHI by the BA with the PHI received by the BA in its capacity as a BA of one or more other covered entity, to permit data analyses that relate

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- to the Health Care Operations of the respective covered entities, and the meaning given to such term in 45 CFR §164.501.
- **f. Designated Record Set** has the meaning given to such term under the Privacy Rule, including 45 C.F.R. Section 164.501.
- **g. Electronic PHI or ePHI** means any PHI maintained or transmitted by electronic media as defined in 45 CFR §160.103.
- **h. Health Care** has the meaning given to such term under the Privacy Rule, including 45 CFR §164.103.
- i. Health Care Component has the meaning given to such term under the Privacy Rule, including 45 CFR §164.103.
- **j. Health Care Operations** has the meaning given to such term under the Privacy Rule, including 45 CFR §164.501.
- **k. HIPAA Rules** means the Privacy, Security, Breach Notification, and Enforcement Rules set forth in 45 CFR Part 160 and Part 164.
- **I. Hybrid Entity** has the meaning given to such term under the Privacy Rule, including 45 CFR §164.103.
- **m. Privacy Rule** means that portion of HIPAA set forth in 45 CFR Part 160 and Part 164, Subparts A and E.
- n. Protected Health Information or PHI has the meaning given to such term under the Privacy Rule, including 45 CFR §§160.103 and 164.501, limited to the information created, maintained, stored, transmitted, or received by BA from or on behalf of CE, or another BA of CE.
- **o. 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 as defined in the Security Rule, including 45 CFR §164.304.
- **p. Security Rule** means the Security Standards for the Protection of Electronic Health Information provided in 45 CFR Part 160 & Part 164, Subparts A and C.
- **q.** Unsecured PHI has the meaning given to such term under 42 U.S.C. §17932(h) and 45 CFR §164.402.

2. Obligations of Business Associate.

- a. 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 fifteen (15) calendar days of a written request by CE.
- **b.** Permitted Uses and Disclosures. BA may use, access, and/or disclose PHI 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 may use, access, and/or disclose PHI 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 (see45 CFR §§164.502, 164.504(e)(2), and 164.504(e)(4)(i)]. If BA discloses PHI to a third party, if the disclosure is required by law, or otherwise BA must obtain, prior to making such disclosure, (i) reasonable written assurances from such third party that such PHI will be held confidential as provided under this BAA and used or further disclosed only as required by law or for the purpose for which it was disclosed to this third party and (ii) an agreement from this third party to notify BA

immediately of any breaches of the confidentiality of the PHI, to the extent it has knowledge of the breach.

- c. Prohibited Uses and Disclosures. BA will not use, access, or disclose PHI other than as permitted or required by the Agreement, this BAA, and under the Privacy Rule, or as required by law. BA shall not directly or indirectly receive remuneration in exchange for PHI, except with the prior written consent of CE and as permitted under 42 U.S.C. §17935(d)(2), and, 45 CFR §164.502(a)(5)(ii); however, this prohibition shall not affect payment by CE to BA for services provided under the Agreement.
- **d.** Appropriate Safeguards. BA will use appropriate safeguards to protect the confidentiality, integrity and availability of PHI that it creates, receives, maintains, or transmits on behalf of the CE, and 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 under the Security Rule, including, but not limited to, 45 CFR §§164.306, 164.308, 164.310, 164.312, 164.314 164.316, and 164.504(e)(2)(ii)(B). BA will comply with the policies and procedures and documentation requirements of the Security Rule, including, but not limited to, 45 CFR §164.316, and 42 U.S.C. §17931. BA is responsible for any civil penalties assessed due to an audit or investigation of BA, in accordance with 42 U.S.C. §17934(c).
- **e.** Agreements with Subcontractors and Agents. BA will ensure that any of its agents and subcontractors that have access to, or which create, receive, maintain or transmit PHI for or 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.c. above (see 45 CFR §§164.504(e)(2) through (e)(5), and164.308(b)]. BA must mitigate the effects of any such violation.
- **f.** Accounting of Disclosures. BA will document any disclosures of PHI made by it to account for such disclosures as required by 45 CFR §164.528(a). BA will also make available information related to such disclosures as would be required for CE to respond to a request for an accounting of disclosures in accordance with 45 CFR §164.528. At a minimum, BA will furnish CE the following with respect to any covered disclosures by BA: (i) the date of disclosure of PHI; (ii) the name of the entity or person who received PHI, and, if known, the address of such entity or person; (iii) a brief description of the PHI disclosed; and (iv) a brief statement of the purpose of the disclosure which includes the basis for such disclosure.
- i. BA will furnish to CE information collected in accordance with this Section 2(e), within ten business days after written request by CE, to permit CE to make an accounting of disclosures as required by 45 CFR §164.528, or in the event that CE elects to provide an individual with a list of its business associates, BA will provide an accounting of its disclosures of PHI upon request of the individual, if and to the extent that such accounting is required under the HITECH Act or under HHS regulations adopted in connection with the HITECH Act.
- ii. In the event an individual delivers the initial request for an accounting directly to BA, BA will forward such request to Covered Entity within ten (10) business days of receipt.
- g. Access to PHI by Individuals. Upon request, BA agrees to provide CE copies of the PHI maintained by BA in a Designated Record Set in the time and manner designated by CE to enable CE to respond to an individual's request for access to PHI under 45 CFR §164.524. In the event any individual or personal representative requests access to the individual's PHI directly from BA, BA will forward that request to CE within ten (10) business days. Any disclosure of, or decision not to disclose, the PHI requested by an individual or a personal representative and compliance with the requirements applicable to an individual's right to obtain access to PHI shall be the sole responsibility of CE.
- **h.** Amendment of PHI. Upon request and instruction from CE, BA will amend PHI or a record about an individual in a Designated Record Set that is maintained by, or otherwise within the

possession of, BA as directed by CE in accordance with procedures established by 45 CFR §164.526. Any request by CE to amend such information will be completed by BA within fifteen (15) business days of CE's request. If an individual request an amendment of PHI directly from BA or its agents or subcontractors, BA must forward any such request to CE within ten (10) business days. Any amendment of, or decision not to amend, the PHI or record as requested by an individual and compliance with the requirements applicable to an individual's right to request an amendment of PHI will be the sole responsibility of CE.

- i. Governmental Access to Records. BA shall make its internal practices, books and records relating to the use and disclosure of Protected Information available to the Secretary of the U.S. Department of Health and Human Services (the "Secretary") for purposes of determining CE's or BA's compliance with HIPAA and this BAA.
- **j. Minimum Necessary.** BA, its agents and subcontractors shall request, use, access, and disclose only the minimum amount of PHI necessary to accomplish the intended purpose of such use, access, or disclosure, or request. (see 42 U.S.C. Section 17935(b) and 45 CFR §164.514(d)].
- **k. Data Ownership.** BA acknowledges that BA has no ownership rights with respect to the Protected Information provided by CE to BA or created, received, maintained or transmitted by BA or BA's agents or subcontractors under the Agreement, including any and all forms thereof.
- I. Notification of Suspected or Actual Breach. BA shall notify CE within five (5) calendar days of any breach of PHI; any use or disclosure of PHI not permitted by the Agreement or this BAA; any Security Incident (except as otherwise provided below) related to PHI, 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 PHI 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 prompt corrective action to cure any deficiencies and 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)]
- i. **Unsuccessful Security Incident Attempts**: The Parties acknowledge and agree that this Section constitutes notification by BA to CE of the ongoing existence and occurrence of attempted Security Incidents that do not result in and/or that BA does not anticipate will result in unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system (including, for example, pings on BA's firewall, port scans, attempts to log onto a system or enter a database with an invalid password or username, denial-of-service attacks that do not result in the system being taken off-line, or malware such as worms or viruses). Unless requested by CE, no further notification of unsuccessful Security Incident attempts is required.
- ii. **Successful Security Incident Attempts:** BA must notify the City within five (5) calendar days of any Security Incident attempt that results in, or that BA anticipates may result in, unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system (such as continuous and/or persistent Security Incident attempts or a suspicious pattern of Security Incident attempts).
- iii. **Written Request for Security Incident Report**: Upon CE's request, BA must provide CE a written Security Incident Report that: (a) identifies the categories of Security Incident

attempts; (b) indicates whether BA believes its current defensive security measures are adequate to address Security Incidents, given the scope and nature of such attempts; and (c) if the security measures are not adequate, the measures BA will implement to address security inadequacies.

- m. 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 Agreement 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.
- n. Audits, Inspection and Enforcement. Within ten (10) calendar days of a request by CE, BA will provide CE with a copy of its most recent independent HIPAA compliance report (AT-C 315), HITRUST certification or other similar mutually agreed upon independent standards-based third-party audit report. CE agrees not to re-disclose BA's audit report. If BA does not have such a report, BA will allow CE or its agents or subcontractors to conduct a reasonable inspection of the facilities, systems, books, records, agreements, policies and procedures relating to the use or disclosure of Protected Information pursuant to this BAA for the purpose of determining whether BA has complied with this BAA or maintains adequate security safeguards. BA shall notify CE within five (5) business days of learning that BA has become the subject of an audit, compliance review, or complaint investigation by the Office for Civil Rights or other state or federal data privacy or security-enforcement government entity.

3. Termination.

- a. Material Breach. A breach by BA, or BA's agent or subcontractor, of any obligations under 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 CFR §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 BA 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 PHI that BA and its agents and subcontractors still maintain in any form, and shall retain no copies of such PHI. 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. §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. Per the Secretary's guidance, the City will accept destruction of electronic PHI in accordance with the standards enumerated in the NIST SP 800-88, Guidelines for Media Sanitization. The City will accept destruction of PHI contained in paper records by shredding, burning, pulping, or pulverizing the records so that the PHI is rendered unreadable, indecipherable, and otherwise cannot be reconstructed.

- **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 PHI in accordance with the HIPAA Regulations and the HITECH Act including, 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) calendar 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. Litigation or Administrative Proceedings.

BA shall notify CE within forty-eight (48) hours of any litigation or administrative proceedings commenced against BA or its agents or subcontractors. In addition, BA shall make itself, and any subcontractors, employees and agents assisting BA in the performance of its obligations under the Agreement or this BAA, available to CE, at no cost to CE, to testify as witnesses, or otherwise, in the event of litigation or administrative proceedings being commenced against CE, its directors, officers or employees based upon a claimed violation of HIPAA, the HITECH Act, the HIPAA regulations, or other state or federal laws relating to security and privacy, except where BA or its subcontractor, employee or agent is a named adverse party.

6. No Third-Party Beneficiaries.

Nothing express or implied in the Agreement or this BAA is intended to confer, nor shall anything herein confer, upon any person other than CE, BA and their respective successors or assigns, any rights, remedies, obligations or liabilities whatsoever.

7. Interpretation.

The provisions of this BAA shall prevail over any provisions in the Agreement that may conflict or appear inconsistent with any provision in this BAA. This BAA and the Agreement shall be interpreted as broadly as necessary to implement and comply with HIPAA, the HITECH Act, the HIPAA regulations, and other state and federal laws related to security and privacy of health information. The parties agree that any ambiguity in the terms of this BAA shall be resolved in favor of a meaning that complies and is consistent with HIPAA, the HITECH Act, the HIPAA regulations, and other state and federal laws related to security and privacy of health information.

Appendix F

Invoice

Contractor shall submit invoices according to the procedures established by the Department of Public Health.

The Invoice Analyst for the City shall email the Contractor the appropriate invoice template to use.

Failure to use the provided invoice template by the City may result in delayed payments.

Appendix G

Dispute Resolution Procedure For Health and Human Services Nonprofit Contractors 9-06

Introduction

The City Nonprofit Contracting Task Force submitted its final report to the Board of Supervisors in June 2003. The report contains thirteen recommendations to streamline the City's contracting and monitoring process with health and human services nonprofits. These recommendations include: (1) consolidate contracts, (2) streamline contract approvals, (3) make timely payment, (4) create review/appellate process, (5) eliminate unnecessary requirements, (6) develop electronic processing, (7) create standardized and simplified forms, (8) establish accounting standards, (9) coordinate joint program monitoring, (10) develop standard monitoring protocols, (11) provide training for personnel, (12) conduct tiered assessments, and (13) fund cost of living increases. The report is available on the Task Force's website at http://www.sfgov.org/site/npcontractingtf index.asp?id=1270. The Board adopted the recommendations in February 2004. The Office of Contract Administration created a Review/Appellate Panel ("Panel") to oversee implementation of the report recommendations in January 2005.

The Board of Supervisors strongly recommends that departments establish a Dispute Resolution Procedure to address issues that have not been resolved administratively by other departmental remedies. The Panel has adopted the following procedure for City departments that have professional service grants and contracts with nonprofit health and human service providers. The Panel recommends that departments adopt this procedure as written (modified if necessary to reflect each department's structure and titles) and include it or make a reference to it in the contract. The Panel also recommends that departments distribute the finalized procedure to their nonprofit contractors. Any questions for concerns about this Dispute Resolution Procedure should be addressed to purchasing@sfgov.org.

Dispute Resolution Procedure

The following Dispute Resolution Procedure provides a process to resolve any disputes or concerns relating to the administration of an awarded professional services grant or contract between the City and County of San Francisco and nonprofit health and human services contractors.

Contractors and City staff should first attempt to come to resolution informally through discussion and negotiation with the designated contact person in the department.

If informal discussion has failed to resolve the problem, contractors and departments should employ the following steps:

- Step 1 The contractor will submit a written statement of the concern or dispute addressed to the Contract/Program Manager who oversees the agreement in question. The writing should describe the nature of the concern or dispute, i.e., program, reporting, monitoring, budget, compliance or other concern. The Contract/Program Manager will investigate the concern with the appropriate department staff that are involved with the nonprofit agency's program, and will either convene a meeting with the contractor or provide a written response to the contractor within 10 working days.
- Step 2 Should the dispute or concern remain unresolved after the completion of Step 1, the contractor may request review by the Division or Department Head who supervises the Contract/Program Manager. This request shall be in writing and should describe why the concern is still unresolved and propose a solution that is satisfactory to the contractor. The Division or Department Head will consult with other Department and City staff as appropriate, and will provide a written determination of the resolution to the dispute or concern within 10 working days.
- Step 3 Should Steps 1 and 2 above not result in a determination of mutual agreement, the contractor may forward the dispute to the Executive Director of the Department or their designee. This dispute shall be in writing and describe both the nature of the dispute or concern and why the steps taken

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Appendix G

to date are not satisfactory to the contractor. The Department will respond in writing within 10 working days.

In addition to the above process, contractors have an additional forum available only for <u>disputes that concern</u> <u>implementation of the thirteen policies and procedures recommended by the Nonprofit Contracting Task Force and adopted by the Board of Supervisors.</u> These recommendations are designed to improve and streamline contracting, invoicing and monitoring procedures. For more information about the Task Force's recommendations, see the June 2003 report at http://www.sfgov.org/site/npcontractingtf index.asp?id=1270.

The Review/Appellate Panel oversees the implementation of the Task Force report. The Panel is composed of both City and nonprofit representatives. The Panel invites contractors to submit concerns about a department's implementation of the policies and procedures. Contractors can notify the Panel after Step 2. However, the Panel will not review the request until all three steps are exhausted. This review is limited to a concern regarding a department's implementation of the policies and procedures in a manner which does not improve and streamline the contracting process. This review is not intended to resolve substantive disputes under the contract such as change orders, scope, term, etc. The contractor must submit the request in writing to purchasing@sfgov.org. This request shall describe both the nature of the concern and why the process to date is not satisfactory to the contractor. Once all steps are exhausted and upon receipt of the written request, the Panel will review and make recommendations regarding any necessary changes to the policies and procedures or to a department's administration of policies and procedures.