

AGREEMENT BETWEEN THE COUNTY OF SAN MATEO AND TELECARE CORPORATION

This Agreement is entered into this ____ day of _____, 2026, by and between the County of San Mateo, a political subdivision of the state of California, hereinafter called "County," and Telecare Corporation, hereinafter called "Contractor."

* * *

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

Whereas, it is necessary and desirable that Contractor be retained for the purpose of providing supported housing services.

Now, therefore, it is agreed by the parties to this Agreement as follows:

1. Exhibits and Attachments

The following exhibits and attachments are attached to this Agreement and incorporated into this Agreement by this reference:

- Exhibit A—Services
- Exhibit B—Payments and Rates
- Exhibit C-1—Reporting & Performance
- Exhibit D—Contractor Budget
- Exhibit E—Inventory List of Property
- Exhibit F—San Mateo County Mental Health Contractor Outpatient Rates
- Appendix D—Housing First
- Attachment A—Co-Housing Responsibility Matrix
- Attachment C—Agency/Group Credentialing Information
- Attachment D—Payor Financial Form
- Attachment E—Fingerprinting Certification
- Attachment I—Rehabilitation Act 504
- Attachment J—Policy Attestation Form
- Attachment K—Assurance of Non-employment with Other Providers
- Attachment L— Residential Weekly Census Report
- Attachment T—Sample Template for Disaster and Emergency Response Plan

2. Services to be performed by Contractor

In consideration of the payments set forth in this Agreement and in Exhibit B, Contractor shall perform services for County in accordance with the terms, conditions, and specifications set forth in this Agreement and in Exhibit A.

3. Payments

In consideration of the services provided by Contractor in accordance with all terms, conditions, and specifications set forth in this Agreement and in Exhibit A, County shall make payment to Contractor based on the rates and in the manner specified in Exhibit B. County reserves the right to withhold payment if County determines that the quantity or quality of the work performed is unacceptable. In no event shall County's total fiscal obligation under this Agreement exceed FIVE MILLION TWO HUNDRED FIFTY-EIGHT THOUSAND SIX HUNDRED EIGHTY-NINE DOLLARS (\$5,258,689). In the event that the County makes any advance payments, Contractor agrees to refund any amounts in excess of the amount owed by the County at the time of contract termination or expiration. Contractor is not entitled to payment for work not performed as required by this agreement.

4. Term

Subject to compliance with all terms and conditions, the term of this Agreement shall be from July 1, 2026, through June 30, 2028.

5. Termination

This Agreement may be terminated by Contractor or by the Chief of San Mateo County Health or his/her designee at any time without a requirement of good cause upon thirty (30) days' advance written notice to the other party. Subject to availability of funding, Contractor shall be entitled to receive payment for work/services provided prior to termination of the Agreement. Such payment shall be that prorated portion of the full payment determined by comparing the work/services actually completed to the work/services required by the Agreement.

County may terminate this Agreement or a portion of the services referenced in the Attachments and Exhibits based upon the unavailability of Federal, State, or County funds by providing written notice to Contractor as soon as is reasonably possible after County learns of said unavailability of outside funding.

County may terminate this Agreement for cause. In order to terminate for cause, County must first give Contractor notice of the alleged breach. Contractor shall have five business days after receipt of such notice to respond and a total of ten calendar days after receipt of such notice to cure the alleged breach. If Contractor fails to cure the breach within this period, County may immediately terminate this Agreement without further action. The option available in this paragraph is separate from the ability to terminate without cause with appropriate notice described above. In the event that County provides notice of an alleged breach pursuant to this section, County may, in extreme circumstances, immediately suspend performance of services and payment under this Agreement pending the resolution of the process described in this paragraph. County has sole discretion to determine what constitutes an extreme circumstance for purposes of this paragraph, and County shall use reasonable judgment in making that determination.

6. Contract Materials

At the end of this Agreement, or in the event of termination, all finished or unfinished documents, data, studies, maps, photographs, reports, and other written materials (collectively referred to as “contract materials”) prepared by Contractor under this Agreement shall become the property of County and shall be promptly delivered to County. Upon termination, Contractor may make and retain a copy of such contract materials if permitted by law.

7. Relationship of Parties

Contractor agrees and understands that the work/services performed under this Agreement are performed as an independent contractor and not as an employee of County and that neither Contractor nor its employees acquire any of the rights, privileges, powers, or advantages of County employees.

8. Hold Harmless

a. General Hold Harmless

Contractor shall indemnify and save harmless County and its officers, agents, employees, and servants from all claims, suits, or actions of every name, kind, and description resulting from this Agreement, the performance of any work or services required of Contractor under this Agreement, or payments made pursuant to this Agreement brought for, or on account of, any of the following:

(A) injuries to or death of any person, including Contractor or its employees/officers/agents;

(B) damage to any property of any kind whatsoever and to whomsoever belonging;

(C) any sanctions, penalties, or claims of damages resulting from Contractor’s failure to comply, if applicable, with the requirements set forth in the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and all Federal regulations promulgated thereunder, as amended; or

(D) any other loss or cost, including but not limited to that caused by the concurrent active or passive negligence of County and/or its officers, agents, employees, or servants. However, Contractor’s duty to indemnify and save harmless under this Section shall not apply to injuries or damage for which County has been found in a court of competent jurisdiction to be solely liable by reason of its own negligence or willful misconduct.

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

9. Assignability and Subcontracting

Contractor shall not assign this Agreement or any portion of it to a third party or subcontract with a third party to provide services required by Contractor under this Agreement without the prior written consent of County. Any such assignment or subcontract without County’s prior written consent shall give County the right to automatically and immediately terminate this Agreement without penalty or advance notice.

10. Insurance

a. General Requirements

Contractor shall not commence work or be required to commence work under this Agreement unless and until all insurance required under this Section has been obtained and such insurance has been approved by County’s Risk Management, and Contractor shall use diligence to obtain such insurance and to obtain such approval. Contractor shall furnish County with certificates of insurance evidencing the required coverage, and there shall be a specific contractual liability endorsement extending Contractor’s coverage to include the contractual liability assumed by Contractor pursuant to this Agreement. These certificates shall specify or be endorsed to provide that thirty (30) days’ notice must be given, in writing, to County of any pending change in the limits of liability or of any cancellation or modification of the policy.

b. Workers’ Compensation and Employer’s Liability Insurance

Contractor shall have in effect during the entire term of this Agreement workers’ compensation and employer’s liability insurance providing full statutory coverage. In signing this Agreement, Contractor certifies, as required by Section 1861 of the California Labor Code, that (a) it is aware of the provisions of Section 3700 of the California Labor Code, which require every employer to be insured against liability for workers’ compensation or to undertake self-insurance in accordance with the provisions of the Labor Code, and (b) it will comply with such provisions before commencing the performance of work under this Agreement.

c. Liability Insurance

Contractor shall take out and maintain during the term of this Agreement such bodily injury liability and property damage liability insurance as shall protect Contractor and all of its employees/officers/agents while performing work covered by this Agreement from any and all claims for damages for bodily injury, including accidental death, as well as any and all claims for property damage which may arise from Contractor’s operations under this Agreement, whether such operations be by Contractor, any subcontractor, anyone directly or indirectly employed by either of them, or an agent of either of them. Such insurance shall be combined single limit bodily injury and property damage for each occurrence and shall not be less than the amounts specified below:

(a) Comprehensive General Liability.....\$1,000,000

- (b) Motor Vehicle Liability Insurance..... \$1,000,000
- (c) Professional Liability..... \$1,000,000

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

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

11. Compliance With Laws

All services to be performed by Contractor pursuant to this Agreement shall be performed in accordance with all applicable Federal, State, County, and municipal laws, ordinances, regulations, and executive orders, including but not limited to the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the Federal Regulations promulgated thereunder, as amended (if applicable), the Business Associate requirements set forth in Attachment H (if attached), the Americans with Disabilities Act of 1990, as amended, and Section 504 of the Rehabilitation Act of 1973, which prohibits discrimination on the basis of disability in programs and activities receiving any Federal or County financial assistance, as well as any required economic or other sanctions imposed by the United States government or under state law in effect during the term of the Agreement. Such services shall also be performed in accordance with all applicable ordinances and regulations, including but not limited to appropriate licensure, certification regulations, provisions pertaining to confidentiality of records, and applicable quality assurance regulations. In the event of a conflict between the terms of this Agreement and any applicable State, Federal, County, or municipal law, regulation, or executive order, the requirements of the applicable law, regulation, or executive order will take precedence over the requirements set forth in this Agreement.

Further, Contractor certifies that it and all of its subcontractors will adhere to all applicable provisions of Chapter 4.107 of the San Mateo County Ordinance Code, which regulates the use of disposable food service ware. Accordingly, Contractor shall not use any non-recyclable plastic disposable food service ware when providing prepared food on property owned or leased by the County and instead shall use biodegradable, compostable, reusable, or recyclable plastic food service ware on property owned or leased by the County. (This paragraph may be deleted without County Attorney Review if not relevant to this agreement)

Contractor will timely and accurately complete, sign, and submit all necessary documentation of compliance.

12. Non-Discrimination and Other Requirements

a. General Non-discrimination

No person shall be denied any services provided pursuant to this Agreement (except as limited by the scope of services) on the grounds of race, color, national origin, ancestry, age, disability (physical or mental), sex, sexual orientation, gender identity, marital or domestic partner status, religion, political beliefs or affiliation, familial or parental status (including pregnancy), medical condition (cancer-related), military service, or genetic information.

b. Equal Employment Opportunity

Contractor shall ensure equal employment opportunity based on objective standards of recruitment, classification, selection, promotion, compensation, performance evaluation, and management relations for all employees under this Agreement. Contractor's equal employment policies shall be made available to County upon request.

c. Section 504 of the Rehabilitation Act of 1973

Contractor shall comply with Section 504 of the Rehabilitation Act of 1973, as amended, which provides that no otherwise qualified individual with a disability shall, solely by reason of a disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination in the performance of any services this Agreement. This Section applies only to contractors who are providing services to members of the public under this Agreement.

d. Compliance with County's Equal Benefits Ordinance

Contractor shall comply with all laws relating to the provision of benefits to its employees and their spouses or domestic partners, including, but not limited to, such laws prohibiting discrimination in the provision of such benefits on the basis that the spouse or domestic partner of the Contractor's employee is of the same or opposite sex as the employee.

e. Discrimination Against Individuals with Disabilities

The nondiscrimination requirements of 41 C.F.R. 60-741.5(a) are incorporated into this Agreement as if fully set forth here, and Contractor and any subcontractor shall abide by the requirements of 41 C.F.R. 60-741.5(a). This regulation prohibits discrimination against qualified individuals on the basis of disability and requires affirmative action by covered prime contractors and subcontractors to employ and advance in employment qualified individuals with disabilities.

f. History of Discrimination

Contractor certifies that no finding of discrimination has been issued in the past 365 days against Contractor by the Equal Employment Opportunity Commission, the California Department of Fair Employment and Housing, or any other investigative entity. If any finding(s)

of discrimination have been issued against Contractor within the past 365 days by the Equal Employment Opportunity Commission, the California Department of Fair Employment and Housing, or other investigative entity, Contractor shall provide County with a written explanation of the outcome(s) or remedy for the discrimination prior to execution of this Agreement. Failure to comply with this Section shall constitute a material breach of this Agreement and subjects the Agreement to immediate termination at the sole option of the County.

g. Reporting; Violation of Non-discrimination Provisions

Contractor shall report to the County Executive Officer the filing in any court or with any administrative agency of any complaint or allegation of discrimination on any of the bases prohibited by this Section of the Agreement or the Section titled "Compliance with Laws". Such duty shall include reporting of the filing of any and all charges with the Equal Employment Opportunity Commission, the California Department of Fair Employment and Housing, or any other entity charged with the investigation or adjudication of allegations covered by this subsection within 30 days of such filing, provided that within such 30 days such entity has not notified Contractor that such charges are dismissed or otherwise unfounded. Such notification shall include a general description of the circumstances involved and a general description of the kind of discrimination alleged (for example, gender-, sexual orientation-, religion-, or race-based discrimination).

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

- i. termination of this Agreement;
- ii. disqualification of the Contractor from being considered for or being awarded a County contract for a period of up to 3 years;
- iii. liquidated damages of \$2,500 per violation; and/or
- iv. imposition of other appropriate contractual and civil remedies and sanctions, as determined by the County Executive Officer.

To effectuate the provisions of this Section, the County Executive Officer shall have the authority to offset all or any portion of the amount described in this Section against amounts due to Contractor under this Agreement or any other agreement between Contractor and County.

h. Compliance with Living Wage Ordinance

As required by Chapter 2.88 of the San Mateo County Ordinance Code, Contractor certifies all contractor(s) and subcontractor(s) obligated under this contract shall fully comply with the provisions of the County of San Mateo Living Wage Ordinance, including, but not limited to, paying all Covered Employees the current Living Wage and providing notice to all Covered Employees and Subcontractors as required under the Ordinance\

13. Anti-Harassment Clause

Employees of Contractor and County shall not harass (sexually or otherwise) or bully or discriminate against each other's employee on the grounds of race, color, national origin, ancestry, age, disability (physical or mental), sex, sexual orientation, gender identity, marital or domestic partner status, religion, political beliefs or affiliation, familial or parental status (including pregnancy), medical condition (cancer-related), military service, or genetic information. Any misconduct by Contractor's employees towards County employees may be grounds for termination of the Contract. Contractor shall timely address any allegations of their employee's misconduct by a County employee including immediately removing that employee from work on the Contract.

14. Compliance with County Employee Jury Service Ordinance

Contractor shall comply with Chapter 2.85 of the County's Ordinance Code, which states that Contractor shall have and adhere to a written policy providing that its employees, to the extent they are full-time employees and live in San Mateo County, shall receive from the Contractor, on an annual basis, no fewer than five days of regular pay for jury service in San Mateo County, with jury pay being provided only for each day of actual jury service. The policy may provide that such employees deposit any fees received for such jury service with Contractor or that the Contractor may deduct from an employee's regular pay the fees received for jury service in San Mateo County. By signing this Agreement, Contractor certifies that it has and adheres to a policy consistent with Chapter 2.85. For purposes of this Section, if Contractor has no employees in San Mateo County, it is sufficient for Contractor to provide the following written statement to County: "For purposes of San Mateo County's jury service ordinance, Contractor certifies that it has no full-time employees who live in San Mateo County. To the extent that it hires any such employees during the term of its Agreement with San Mateo County, Contractor shall adopt a policy that complies with Chapter 2.85 of the County's Ordinance Code." The requirements of Chapter 2.85 do not apply unless this Agreement's total value listed in the Section titled "Payments", exceeds two-hundred thousand dollars (\$200,000); Contractor acknowledges that Chapter 2.85's requirements will apply if this Agreement is amended such that its total value exceeds that threshold amount.

15. Retention of Records; Right to Monitor and Audit

(a) Contractor shall maintain all required records relating to services provided under this Agreement for three (3) years after County makes final payment and all other pending matters are closed, and Contractor shall be subject to the examination and/or audit by County, a Federal grantor agency, and the State of California.

(b) Contractor shall comply with all program and fiscal reporting requirements set forth by applicable Federal, State, and local agencies and as required by County.

(c) Contractor agrees upon reasonable notice to provide to County, to any Federal or State department having monitoring or review authority, to County's authorized representative, and/or to any of their respective audit agencies access to and the right to examine all records and documents necessary to determine compliance with relevant Federal, State, and local statutes,

rules, and regulations, to determine compliance with this Agreement, and to evaluate the quality, appropriateness, and timeliness of services performed.

16. Merger Clause; Amendments

This Agreement, including the Exhibits and Attachments attached to this Agreement and incorporated by reference, constitutes the sole Agreement of the parties to this Agreement and correctly states the rights, duties, and obligations of each party as of this document's date. In the event that any term, condition, provision, requirement, or specification set forth in the body of this Agreement conflicts with or is inconsistent with any term, condition, provision, requirement, or specification in any Exhibit and/or Attachment to this Agreement, the provisions of the body of the Agreement shall prevail. Any prior agreement, promises, negotiations, or representations between the parties not expressly stated in this document are not binding. All subsequent modifications or amendments shall be in writing and signed by the parties.

17. Controlling Law; Venue

The validity of this Agreement and of its terms, the rights and duties of the parties under this Agreement, the interpretation of this Agreement, the performance of this Agreement, and any other dispute of any nature arising out of this Agreement shall be governed by the laws of the State of California without regard to its choice of law or conflict of law rules. Any dispute arising out of this Agreement shall be venued either in the San Mateo County Superior Court or in the United States District Court for the Northern District of California.

18. Notices

Any notice, request, demand, or other communication required or permitted under this Agreement shall be deemed to be properly given when both: (1) transmitted via facsimile to the telephone number listed below or transmitted via email to the email address listed below; and (2) sent to the physical address listed below by either being deposited in the United States mail, postage prepaid, or deposited for overnight delivery, charges prepaid, with an established overnight courier that provides a tracking number showing confirmation of receipt.

In the case of County, to:

Name/Title: Joseph Klimas, Clinical Services Manager II
Address: 200 Edmonds Rd, Building A, Redwood City, CA 94062
Telephone: 650-722-6015
Email: jklimas@smcgov.org

In the case of Contractor, to:

Name/Title: Dawan Utecht, SVP, Chief Development Officer
Address: 1080 Marina Village Parkway, Suite 100, Alameda, CA 94501
Telephone: (510) 337-7950
Facsimile: (510) 337-7969
Email: dutecht@telecarecorp.com

19. Electronic Signature

Both County and Contractor wish to permit this Agreement and future documents relating to this Agreement to be digitally signed in accordance with California law and County's Electronic Signature Administrative Memo. Any party to this Agreement may revoke such agreement to permit electronic signatures at any time in relation to all future documents by providing notice pursuant to this Agreement.

20. Payment of Permits/Licenses

Contractor bears responsibility to obtain any license, permit, or approval required from any agency for work/services to be performed under this Agreement at Contractor's own expense prior to commencement of said work/services. Failure to do so will result in forfeit of any right to compensation under this Agreement.

21. Prevailing Wage

When applicable, Contractor hereby agrees to pay not less than prevailing rates of wages and be responsible for compliance with all the provisions of the California Labor Code, Article 2- Wages, Chapter 1, Part 7, Division 2, Section 1770 et seq. A copy of the prevailing wage scale established by the Department of Industrial Relations is on file in the office of the Director of Public Works, and available at www.dir.ca.gov/DLSR or by phone at 415-703-4774. California Labor Code Section 1776(a) requires each contractor and subcontractor keep accurate payroll records of trades workers on all public works projects and to submit copies of certified payroll records upon request.

Additionally,

- No contractor or subcontractor may be listed on a bid proposal for a public works project (submitted after March 1, 2015) unless registered with the Department of Industrial Relations pursuant to Labor Code section 1725.5 [with limited exceptions from this requirement for bid purposes only under Labor Code section 1771.1(a)].
- No contractor or subcontractor may be awarded a contract for public work on a public works project (awarded on or after April 1, 2015) unless registered with the Department of Industrial Relations pursuant to Labor Code section 1725.5.

- This project is subject to compliance monitoring and enforcement by the Department of Industrial Relations

* * *

In witness of and in agreement with this Agreement's terms, the parties, by their duly authorized representatives, affix their respective signatures:

For Contractor: TELECARE CORPORATION

<p>Signed by: <i>Dawan Utecht</i> F785665D7185422...</p>	<p>05/20/2026</p>	<p>Dawan Utecht</p>
<p>_____ Contractor Signature</p>	<p>_____ Date</p>	<p>_____ Contractor Name (please print)</p>

COUNTY OF SAN MATEO

By:
President, Board of Supervisors, San Mateo County

Date:

ATTEST:

By:
Clerk of Said Board

EXHIBIT A – SERVICES
TELECARE SUPPORTED HOUSING SERVICES
FY 2026-2028

In consideration of the payments set forth in Exhibit B, Contractor shall provide the following services:

I. DESCRIPTION OF SERVICES TO BE PERFORMED BY CONTRACTOR

A. Introduction

Telecare Corporation (“Contractor”), in collaboration with the Behavioral Health and Recovery Services Division of San Mateo County (BHRS), shall provide supported housing services in a Co-Housing Services program located at Building A (“Canyon Vista Center”) 200 Edmonds Road, Redwood City, California that will accommodate up to fifty-seven (57) consumers at a time.

Building A will be managed by the Property Management contractor (“Property Management”). Contractor responsibilities for providing services in Building A will be delineated in a Memorandum of Understanding (MOU) between the Contractor and Property Management, and BHRS.

B. Co-Housing Description

The Co-Housing program is a supported living environment with permanent supported housing units and transitional housing that encourages independent daily living skills development and tenant/resident (used interchangeably herein) involvement in daily activities, including housing keeping, cooking, decision making about many aspects of the living environment, community building among tenants and participation in on site activities of interest.

Co-Housing consists of two service levels. One level is transitional housing for 29 individuals, with a maximum stay of 24 months. These services focus on independent living skill development, understanding of tenant rights, responsibilities and how to model good tenant behavior, and tenant engagement in a variety of activities leading to successful transition into permanent housing. The second service level is permanent supportive housing for 28 individuals, which has no limit on the length of stay. The goal is successful housing retention through further skill development, good tenant behavior and participation in activities of interest.

The following vision statements are the guiding principles for the Housing Support services:

Focus on Wellness – to be healthy

The program and services are dedicated to the whole health and wellness of its consumers. The environment will support and reflect a productive individualized wellness path for all consumers.

Promote Respect – to be livable

The program and services will provide a strong foundation of assuring dignity and respect for its consumers and staff. The programs and services will emphasize consumer's choice, in a safe environment that inspires pride, motivates the spirit, accommodates diversity in culture and beliefs, instills optimism for personal growth and improves quality of life.

Build Community – to be collaborative

The program and services will build strong communities – amongst their own consumers, families, staff, and visitors, and add value to the surrounding community. The campus community will become an integral part of its social surroundings, with its programs and services valued as innovative assets and its residents respected as citizens.

Heal through Nature – to be environmentally conscious

The program and services offered will capitalize on the beautiful serene natural setting to complement the process of wellness, rehabilitation and recovery. The facilities will incorporate progressive sustainable design strategies, efficient building systems, and natural materials to the benefit of healthy people, place, and planet.

Strive for Recovery – to flourish

The program and services will help consumers realize their full potential, achieving their goals for recovery, and return to living independently in the community.

The supported residential space has a trauma informed design. Supported residential staff will be trained to be thoroughly trauma informed to ensure that the trauma informed resources are maximized in facilitating the continued recovery of the consumers.

C. Campus Center Building

The Campus Center first floor is comprised of two wings. One wing houses the spiritual center, art center, lactation room, exercise room, primary care rooms, conference room, hoteling space and volunteer area.

The other wing houses the front lobby, commercial kitchen, retail store, bed bug elimination room, and engineering/mechanical rooms.

The Co-Housing units on the two upper floors of the Campus Center house 57 residents, each in their own bedroom. 56 of the bedrooms are equipped with a Jack and Jill (shared) bathroom, bed, nightstand, desk, refrigerator, chair and a closet for clothes and shelving for food supplies. One bedroom on the transitional housing floor located on the second floor is equipped with a private bedroom with all of the same items in it and its own bathroom.

Each floor provides two living rooms, two computer stations for tenants, a community kitchen where residents can cook their own meals, a dining area with views of the campus, a meditation room, an interview/visitation room, a cleaning supply room, housekeeping room, one leadership office, two staff offices, and staff restrooms. The third floor provides a storage room in the same spot that the private bedroom/bathroom is on the second floor.

The art center, exercise room, bed bug elimination room and laundry room are part of the Co-Housing program and administered by Property Management. In addition to these rooms on the first floor, Property Management is responsible for maintaining (and scheduling if needed) oversight of the conference room, hoteling space, restrooms, spiritual center, lactation room, and front lobby. The front lobby is staffed by Property Management from 7am – 3pm, 3pm – 11pm, and 11pm – 7am, seven days per week. Seven days per week from the hours of 7pm – 7am, the building front doors will be locked and Property Management will provide security staff at the front desk.

There are shared outdoor spaces that include walkways, a sports court, labyrinth, garden center, art pavilion, sitting hut and areas to picnic and sit. The garden center is available for use by the Co-Housing tenants primarily. The rest of the outdoor amenities are available to the Co-Housing tenants and others (MHRC clients, staff, and visitors) who make use of the campus.

D. Target Population

The target population are San Mateo County residents who are seriously mentally ill and may have co-occurring substance use disorders and who are eligible for either Transitional Housing or Permanent Supported Housing as determined by BHRS. The individuals may have been homeless, previously institutionalized or at risk of homelessness due to other circumstances. Transitional Housing tenants are tenants who are working towards more independent living. The Supported Housing

/Permanent Housing tenants may be previous tenants in Transitional Housing from this campus or from some other part of BHRS's network of care. The target population is a culturally, linguistically, ethnically, gender diverse population.

E. Co-Housing Operations and Contractor Expectations

Contractor may use County's property itemized in *Exhibit E* in providing services under the Agreement. Furnishings purchased by Contractor using County-provided funding shall become County property.

Upon contract termination, any County owned property shall be relinquished to the County in good condition, reasonable wear and tear excepted.

F. Supported Housing Program

Contractor will be responsible for working with tenants both in transitional housing and permanent supportive housing.

All CalAIM Community Supports eligible clients must be referred to the Managed Care Plans (MCPs) designated housing benefits providers first. BHRS will be the payor of last resort for eligible clients. CalAIM Community Supports include Transitional Rent and the "Housing Trio" - Housing Transition Navigation Services (HTNS), Housing Tenancy Sustaining Services (HTSS) and Housing Deposits.

1. All Tenants

Contractor will coordinate with the MCP designated housing benefits providers, and/or other partners to facilitate access to housing resources for MCP eligible tenants. Tenant eligibility will be determined by BHRS staff and communicated to the Contractor prior to move-in.

For eligible tenants, Contractor will coordinate with the designated partners as described below. For non-eligible tenants, Contractor staff will be responsible for, but are not limited to the all the services listed:

- a. For eligible tenants, the MCP designated partners will provide early housing navigation services including developing a housing support plan required for transitional rent approval, move-in coordination, monthly retention visits, and annual unit inspections and re-location supports as needed in collaboration with the Contractor staff.
- b. Contractor staff will coordinate with the MCP designated providers on the following services:

- 1) Assist tenants with move in process.
 - 2) Provide orientation to tenants and support adjusting to co-housing environment.
 - 3) Assess and counsel tenants related to behaviors that may place tenancy at risk.
 - 4) Work with tenants on behaviors that promote good tenancy and good neighbor relations.
 - 5) Provide linkage and coordination with housing locator services for tenants in the transitional units to prepare to move into permanent housing.
 - 6) Participate in monthly operations meeting with Property Management, Resident Services, MCP designated HTSS provider and BHRS to review tenant lease violations, upcoming vacancies or other issues related to housing retention. Monthly operations meeting will include supervisory level staff.
 - 7) Provide crisis support and follow up on urgent care needs in coordination with primary case manager and MCP designated HTSS provider.
- c. Contractor staff will be primarily responsible for providing the following services:
- 1) Provide individualized support to those tenants transitioning from other settings such as locked care with attention to their medication support and nutritional needs, including assisting tenants to develop medication schedule and meal plans.
 - 2) Assess tenant's daily living skills (DLS). Develop plan with tenant activities to educate, model and develop DLS. Observe and coach with tenant in DLS activities.
 - 3) Conduct group DLS skill building activities, as appropriate, which may include menu/meal planning, basic food prep/cooking, shopping and basic money management/budgeting.
 - 4) Assess each tenant's need for Rep Payee and coordinate with tenant's treatment team to apply for Rep Payee.
 - 5) Provide assistance in applying for and retaining benefits including Medi-Cal and SSI plan.
 - 6) Coordinate and/or partner with Resident Services Coordinator (RSC) for provision of tenants' educational, recreation and social activities.
 - 7) Provide tenants with rehabilitation groups.
 - 8) Coordinate with tenants' clinical team or clinical provider on a regular basis and medical provider as needed.
 - 9) Provide linkage to outside resources to support continued recovery and achievement of personal goals such as In Home Supportive Services, Vocational Rehabilitation Services,

supported education and other community supports, as appropriate.

- 10) Provide a van and driver for transporting/accompanying tenants to health care appointments and structured outings to build/practice client life skills in the areas of socialization, money management, navigation of public transportation, shopping on a budget, etc. For example, Contractor may transport a group of clients to a grocery store and enter the store with them to help them apply for a store discount card, to show them how to use self-checkout, to coach them on price comparison shopping to stretch their grocery budget or how to read nutrition labels. Coordinate with RSC to ensure adequate staffing is maintained onsite.
 - 11) Co-facilitate with the RSC Resident Council meetings as well as Tenant Review meetings. Tenant Review meetings will be weekly through lease up period, then may decrease to monthly, as appropriate.
 - 12) Coordinate on site groups such as Alcoholics Anonymous, (A.A.), Narcotics Anonymous (N.A.), Treatment Readiness groups and other harm reduction focused groups, NAMI, and peer support groups.
- d. Some of the above services may be billable to Medi-Cal or other payers as part of the tenant's treatment plan. Contractor will be responsible for coordinating with other members of the tenant's clinical team regarding such services and documenting them appropriately in compliance with BHRS guidelines and state and federal requirements in order to maximize state and federal reimbursements.

2. Additional Services for Transitional Support Tenants

- a. Coordinate with the County and MCP designated HTNS providers to provide housing locator services as tenants prepare to move into permanent housing.
- b. Provide assistance in applying for and retaining benefits including Medi-Cal and SSI.
- c. Provide Medi-Cal billable case management and rehabilitation services. Contractor shall have licensed clinical staff to meet State requirements for the provision of these Medi-Cal billable services.
- d. Coordinate with other members of the tenant's clinical team regarding Medi-Cal billable services. Document services in compliance with BHRS guidelines and state and federal requirements to maximize state and federal reimbursements.
- e. Provide linkage to outside resources to support continued recovery and achievement of personal goals such as In Home Supportive

Services, Vocational Rehabilitation Services, supported education and other community supports, as appropriate.

G. Payments for Catered Meals for Supported Housing Clients

Contractor shall provide daily catered meals for up to 15 supported housing CARE clients residing in Canyon Vista who are funded by the Behavioral Health Bridge Housing grant.

H. Admissions and Discharges

Contractor will work collaboratively with the Property Management provider to support consumers referred for the transitional and permanent housing units during their application process. An intake packet will be completed within three (3) business days of receiving a referral. In the event Contractor feels that it cannot treat a particular consumer, Contractor will provide the BHRS clinical services manager with the reason(s) for the decision in writing within 48 hours of receiving the complete referral packet, (M-F, 8 am to 5 pm). Consumers will not be excluded solely on the basis of histories that include self-injurious or assaultive behavior (including sex offenses) or arson.

Contractor shall work with Property Management to develop and maintain an admission manual that includes defined roles and responsibilities.

I. Referrals

All referrals for occupancy of units will be for seriously mentally ill residents of San Mateo County and will come from a variety of referral sources. All referral sources must refer these individuals to BHRS for CalAIM Community Supports housing benefits eligibility verification and official certification as BHRS consumers or as consumers eligible for these services. Admissions will be 18 years or older and have adequate income or other financial resources to pay the monthly rent.

Housing First philosophy will be the approach to referrals. (See *Appendix D - Housing First*). The individuals may have been homeless, previously institutionalized or at risk of homelessness due to other circumstances. Future tenants may be required to be on Rep Payee Services should they have a history of poor money management, especially related to housing. The tenant's treatment team will be responsible for referring to Rep Payee. This can be re-evaluated once their money management skills improve.

J. Length of Stay

There is no time limit for how long residents may live in the permanent supported housing units. The residents in the transitional housing units may live there for up to 24 months while they are working towards more permanent housing elsewhere. Tenants may ask BHRS for extensions, should they need more time. Extensions will be reviewed on a case-by-case basis and will need BHRS Contract Monitor approval. Potential loss of housing (i.e. through eviction, loss of income, violation of tenant agreement, level of care change, etc.) for any tenant must be reviewed by BHRS.

K. Communication/Collaboration Requirements

1. Contractor will schedule regular meetings internally and with all potential partners to plan, analyze and design improvements in all collaborative efforts.
2. Contractor shall meet monthly and on an as needed basis with the BHRS Contractor Monitor.
3. Urgent matters will be communicated as soon as possible to BHRS Contract Monitor by phone and/or email. Regular communication will ensure that services are coordinated in an informed and timely manner.
4. Contractor shall meet on a monthly basis, and additionally on an as-needed basis, with Property Management and the BHRS Contract Monitor to discuss any safety or other concerns regarding shared campus spaces.
5. Contractor will meet quarterly with Property Management and Deputy Director of Adult Services to review data and discuss any problems or concerns related to the provision of services provided through this Agreement.
6. Contractor shall collaborate with Property Management and the BHRS Contract Monitor to identify tenants who are ready for permanent housing or who may need a higher level of care.
7. Contractor and Property Management shall meet on a monthly basis and an as needed basis with the BHRS designated staff who are responsible for overseeing the contract, the facility and the campus, to discuss any safety or other concerns regarding shared campus spaces.
8. Contractor will participate in the development of a Memorandum of Understanding (MOU) between the Contractor, Property Management,

and BHRS. The MOU will address the coordination of services by all parties providing services to residents receiving Co-Housing services.

L. Reporting

1. Contractor will provide a monthly status report that includes tenant name, unit number, dates of contact with tenant, amount of time involved, who was involved, communication with primary case manager or others, services provided, outcome, and plans/agreed upon next steps. The report will be provided to the BHRS Deputy Director and/or BHRS Contract Monitor.
2. Changes to staffing levels will be reported on a monthly basis, including staff vacancies.
3. Contractor will provide any data reporting requirements that the State of California requires for services provided through this agreement, including the Behavioral Health Services Act (BHSA) Contractors shall comply with any data reporting mandates that the State of California requires so that BHRS maintains compliance with its Behavioral Health Services Act (BHSA) reporting obligations.
4. BHBH Grant Reporting

Contractor shall collect and report to BHRS data for the Behavioral Health Bridge Housing (BHBH) grant for 15 transitional beds on a monthly basis and entered into the Homeless Management Information System (HMIS) database. Contractor will work with Property Management to obtain any additional tenant financial or occupancy information needed for data reporting.

Should the State require changes to and/or additional BHBH Grant data reporting, BHRS shall alert Contractor of such requirements as expediently as possible. Contractor shall adjust reporting procedures and deliverables in a reasonable timeline in order to meet any changes to the BHBH Grant reporting requirements.

The following data shall be collected in coordination with Property Management and entered into HMIS data portal:

- a. Estimated Number of Beds-Nights: Total
- b. Estimated number of Bed-Nights: Daily
- c. Estimated number of Unduplicated individuals served: Total
- d. Estimated number of Unduplicated individuals served: Monthly
- e. Estimated cost per Bed Night

5. BHRS MIS

- a. Reporting – Contractor will provide information to BHRS (MIS) on consumer registration/admissions/discharges (on the BHRS Contractor Reporting Form), and will provide a weekly consumer census.
- a. Contractor will have AVATAR look up function access in San Mateo County’s electronic health record system for BHRS consumers receiving services in order to view information for coordination of care.

6. Critical Incident Reporting

See Section II.B.9. “Critical Incident Reporting” on page 18.

M. Staffing Requirements

- 1. Contractor shall provide the BHRS Contract Monitor with the current staffing model, and shall obtain prior approval from BHRS Contract Monitor before making any changes to the staffing.
- 2. Contractor shall employ bilingual/bicultural staff to meet the cultural and language needs of residents.
- 3. Contractor shall have on file job descriptions (including minimum qualifications for employment and duties performed) for all personnel whose salaries, wages, and benefits are reimbursable in whole or in part under this Agreement. Contractor shall submit any material changes in such duties or minimum qualifications to County prior to implementing such changes or employing persons who do not meet the minimum qualifications currently on file. Contractor service personnel shall be direct employees, contractors, volunteers, or training status persons.
- 4. **Contractor shall not employ staff to work in the Supported Housing Program who are also employed by one of the contracted MHRCs or contracted Property Management services on the Cordilleras Health and Healing Campus. This prohibition includes Contractor’s own employees, assigned to work in the MHRC staffed by Contractor under a separate agreement with the County. Said Contractor employees may not provide services in the Supported Housing Program. Contractor shall maintain separate cost centers for the two agreements with the County for services on the Cordilleras Health and Healing Campus.**

Contractor shall complete *Attachment K - Assurance of non-employment of staff providing other Cordilleras Health and Healing Campus contracted services.*

5. Administration

The administrator, in addition to all of the usual and customary administrative responsibilities, will work closely with the Deputy Director of Adult and Older Adult Services for BHRS, and the BHRS Cordilleras Campus Manager who oversees this Agreement. This may include regular meetings to discuss the program, the building and the campus.

6. Staff Training Requirements

- a. Contractor included staff training plan (*Attachment D – Staff Training Plan*)
- b. Minimum 20 hours of training per year
- c. Contractor will complete and maintain a record of annual required trainings. The following trainings must be completed on an initial and then annual basis:
 - 1) Confidentiality
 - 2) HIPAA
 - 3) Fraud, Waste, and Abuse
 - 4) Critical Incident Management
 - 5) Cultural Humility, Sexual Orientation, Gender Identity (SOGI)
 - 6) Gender Sensitivity
 - 7) Spirituality
 - 8) Interpreter training (if using interpreter services)
 - 9) Trauma Informed Care (e.g., Neuro sequential Model of Therapeutics (NMT))
 - 10) Working with SMI Co-Occurring Tenants
 - 11) Working with Peer Workers

Trainings may be offered through the County's Learning Management System (LMS) located at:

https://sanmateocounty.csod.com/LMS/catalog/Welcome.aspx?tab_page_id=-67.

Contractor must register on the LMS site to access the training modules. The link to register for a LMS new account is:

<https://sanmateocounty.csod.com/selfreg/register.aspx?c=bhrscp01>

Proof of training, such as certificate of completion, may be requested at any time during the term of this Agreement.

7. Ancillary Services (Third party vendors: meals, housekeeping/laundry, lab, phlebotomy)

Contractors will coordinate a process among themselves to assess interest in utilizing shared vendors for ancillary services, with the goals of enhancing operational efficiency, reducing costs, and minimizing campus traffic. Should mutual interest be identified, the feasibility of joint purchasing arrangements will be explored. BHRS will not hold any formal contractual obligations in these agreements.

8. Evacuation Plan

See II.A. Disaster and Emergency Response Plans

N. Disentanglement

Contractor shall cooperate with County and County's other contractors to ensure a smooth transition at the time of termination of this Agreement, regardless of the nature or timing of the termination. Contractor shall cooperate with County's efforts to effectuate such transition with the goal of minimizing or eliminating any interruption of work required under the Agreement and any adverse impact on the provision of services or the County's activities; provided, however, that County shall pay Contractor on a time and materials basis, at the then-applicable rates, for all additional services performed in connection with such cooperation.

Contractor shall deliver to County or its designee, at County's request, all documentation and data related to County, including, but not limited to, consumer files, held by Contractor, and after return of same, Contractor shall destroy all copies thereof still in Contractor's possession, at no charge to County. Such data delivery shall be in an electronic format to facilitate archiving or loading into a replacement application. County and Contractor shall mutually agree on the specific electronic format. Record destruction requirements under this section shall be subject to any statutory requirements Contractor must adhere to as described in section II.B.5. Record Retention of this Exhibit A.

Contractor shall deliver to County or its designee, at County's request, all County-owned property, including but not limited to property as identified in *Exhibit E: Inventory List of Property*. The County shall have the option to purchase Contractor owned property used for the provision of services at mutually agreed upon pricing.

O. Health Order Compliance

1. Contractor will comply with employer requirements established by Cal-OSHA through the COVID -19 Prevention Non-Emergency Regulations which are chaptered in the California Code of Regulations, Title 8- Cal/OSHA, Chapter 4 Division of Industrial Safety, Subchapter 7 General Industry Safety Orders, Section 3205 COVID-19 Prevention.
2. This section applies to all employees and places of employment with the exception of locations with one employee that does not have contact with other persons, employees working from home, or employees teleworking from a location of the employee's choice, which is not under the control of the employer.
3. Employers can comply with this section by either maintaining a COVID-19 Plan that was required by previous contract conditions or as part of the required Injury and Illness Prevention Program required by Section 3203.
4. Employers are required to comply with COVID-19 Prevention requirements of Cal/OSHA.
5. More information, including access to the text of the regulations, COVID-19 Prevention Plan Templates, Frequently Asked Questions, and Fact Sheets can be found at https://www.dir.ca.gov/dosh/coronavirus/Non_Emergency_Regulations/.

II. ADMINISTRATIVE REQUIREMENTS

A. Disaster and Emergency Response Plans

Contractor will develop and maintain a Disaster and Emergency Response Plan ("Emergency Plan") that includes all of the elements set forth in this Section, as well as any additional elements reasonably requested by the County. The Emergency Plan will also include site-specific emergency response plan(s) for each of the sites at which Contractor provides services pursuant to this Agreement ("Site Plans"). The Emergency Plan and associated Site Plans will address Contractor preparations to effectively respond in the immediate aftermath of a national, state or local disaster or emergency ("Emergency Response") and plans for the ongoing continuation of Services under the Agreement during and after a disaster or emergency ("Continuity of Operations").

Contractor shall submit the Emergency Plan to the County within ninety (90) days after the beginning of the Term of the Agreement and no later than September 30th. The Emergency Plan will follow the template provided in *Attachment T: Sample Template for Disaster and Emergency*

Response Plan as a guide when developing the plan, adding any categories or items as needed for the Contractor's unique situation. The submitted Emergency Plan will be subject to the reasonable approval of the County. Contractor shall respond reasonably promptly to any comments or requests for revisions that the County provides to Contractor regarding the Emergency Plan. Contractor will update the Emergency Plan and associated Site Plans as circumstances warrant and shall provide County with copies of such updated plans. Contractor shall train employees on the Emergency Plan and the Emergency Plan will include a description of how employees will be trained.

The Emergency Plan will indicate, in as much detail as reasonably possible, the categories of additional staff, supplies, and services that Contractor projects would be necessary for effective Emergency Response and Continuity of Operations and the costs that the Contractor projects it would incur for such additional staff, supplies and services. Contractor shall recognize and adhere to the disaster medical health emergency operations structure, including cooperating with, and following direction provided by, the County's Medical Health Operational Area Coordinator (MHOAC). In the event that the Contractor is required to implement the Emergency Plan during the term of the Agreement, the parties will confer in good faith regarding the additional staff, supplies and services needed to ensure Emergency Response and/or Continuity of Operations owing to the particular nature of the emergency, as well as whether the circumstances warrant additional compensation by the County for additional staff, supplies and services needed for such Emergency Response and/or Continuity of Operations.

The Emergency Plan will include an evacuation and temporary shelter plan for any adverse events and/or natural disasters. Contractor shall collaborate with the County in developing and maintaining an Emergency Plan that is compatible with the County Relocation and Temporary Shelter Plan for the Cordilleras Health and Healing Campus.

Contractor shall reasonably cooperate with the County in complying with processes and requirements that may be imposed by State and Federal agencies (including, but not limited to the California Governor's Office of Emergency Services and the Federal Emergency Management Agency) in connection with reimbursement for emergency/disaster related expenditures.

In a declared national, state or local disaster or emergency, Contractor and its employees will be expected to perform services as set forth in the Agreement, including in the area of Emergency Response and Continuity of Operations, as set forth in the Emergency Plan and each Site Plan. Contractor shall ensure that all of its employees are notified, in

writing, that they will be expected to perform services consistent with the Emergency Plan and each Site Plan.

B. Quality Management and Compliance

1. Quality Management Program and Quality Improvement Plan

Contractor must have a Quality Management Program and submit a Quality Improvement Plan to BHRS Quality Management (QM) annually by June 30. The Quality Improvement Plan should address 1) how the Contractor will comply with all elements of this Agreement, 2) the Contractor will maintain an audit disallowance rate of less than five percent (5%), and 3) first appointment will be within fourteen (14) days of referral or request of service. BHRS QM will provide feedback if the submitted plan is missing critical components related to San Mateo County requirements. Additional feedback may be available if requested prior to the submission date.

2. Record Retention

Section 14 of the Agreement notwithstanding, Contractor shall maintain medical records required by the California Code of Regulations. Notwithstanding the foregoing, Contractor shall maintain beneficiary medical and/or clinical records for a period of ten (10) years, except the records of persons under age eighteen (18) at the time of treatment shall be maintained: a) until ten (10) years beyond the person's eighteenth (18th) birthday or b) for a period of ten (10) years beyond the date of discharge, whichever is later. This rule does not supersede professional standards. Contractor may maintain records for a longer period of time if required by other regulations or licenses.

3. Documentation of Services

Contractor shall provide all pertinent documentation required for state and federal reimbursement including but not limited to Consent Forms, assessments, treatment plans, progress notes, and Service Reporting Forms (flat file, XLS, or PDF). Contractor agencies must submit, via fax to Quality Management at 650-525-1762, their version of these forms for approval before the forms are to be used. Special attention must be paid to documentation requirements for residential treatment facilities. Documentation shall be completed in compliance with the BHRS Mental Health & AOD Documentation Manual (link in following paragraph). Contractor agencies are required to provide and maintain record of regular documentation training to staff providing direct

services. Proof of trainings including attendance by staff may be requested at any time during the term of this Agreement.

System of Care (SOC) Short-Doyle Medi-Cal Mental Health Providers shall document in accordance with the BHRS Mental Health & AOD Documentation Manual located online at:

<https://www.smchealth.org/sites/main/files/file-attachments/bhrsdocmanual.pdf>

SOC contractor will utilize either documentation forms located on <http://smchealth.org/SOCMHContractors> or contractor's own forms that have been pre-approved.

4. Audits

Behavioral Health and Recovery Services QM will conduct regular chart audits of Contractors. Contractor is required to provide either the original or copies of charts, including all documentation upon request. The Department of Health Care Services and other regulatory agencies conduct regular audits of the clinical services provided by BHRS and Contractors requiring submission of charts as requested. Contractor is required to provide all necessary documentation for external audits and reviews within the stated timeline.

5. Consumer Rights and Satisfaction Surveys

a. Administering Satisfaction Surveys

Contractor shall administer/utilize any and all survey instruments as directed by BHRS, including outcomes and satisfaction measurement instruments.

b. Beneficiary/Patient's Rights

Contractor will comply with County policies and procedures relating to beneficiary/patient's rights and responsibilities as referenced in the Agreement.

c. Advance Directives

Contractor will comply with County policies and procedures relating to advance directives.

6. Compliance with HIPAA, Confidentiality Laws, and PHI Security

- a. Contractor must implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of Protected Health Information (PHI), including electronic PHI that it creates, receives, maintains, uses or transmits, in compliance with 45 C.F.R and to prevent use or disclosure of PHI other than as provided for by this Agreement. Contractor shall implement reasonable and appropriate policies and procedures to comply with the standards. Contractor is required to report any security incident or breach of confidential PHI to BHRS Quality Management within twenty-four (24) hours.
- b. Contractor will develop and maintain a written Privacy and Security Program that includes administrative, technical and physical safeguards appropriate to the size and complexity of the Contractor's operations and the nature and scope of its activities.
- c. Contractor shall comply with the provisions of 42 C.F.R. Part 2 as described below if records contain or contract possesses any PHI covered under 42 C.F.R Part 2:
 - 1) Acknowledge that in receiving, storing, processing, or otherwise using any information from BHRS about the consumers in the program, it is fully bound by the provisions of the federal regulations governing Confidentiality of Behavioral Health and Recovery Services Patient Records, 42 C.F.R. Part 2;
 - 2) Undertake to resist in judicial proceedings any effort to obtain access to information pertaining to consumers otherwise than as expressly provided for in the federal confidentiality regulations, 42 C.F.R. Part 2; and
 - 3) Agree to use appropriate safeguards to prevent the unauthorized use or disclosure of the protected information.
- d. Confidentiality Training

Contractor is required to conduct, complete and maintain record of annual confidentiality training by all staff serving or accessing PHI of BHRS consumers. Contractor may utilize BHRS Confidentiality trainings located at <http://smchealth.org/bhrs/providers/ontrain>.

7. Other Required Training

See section I.L.6. "Staff Training Requirements" on page 10.

8. Site Certification

- a. Contractor will comply with all site certification requirements. Contractor shall maintain all applicable certifications through San Mateo County to provide any of the following reimbursable services: Short-Doyle Medi-Cal, Medi-Cal, Medicare, or Drug Medi-Cal.
- b. Contractor is required to inform BHRS Quality Management, in advance, of the following major changes:
 - 1) Major leadership or staffing changes.
 - 2) Major organizational and/or corporate structure changes (example: conversion to non-profit status).
 - 3) Any changes in the types of services being provided at that location.
 - 4) Significant changes in the physical plant of the provider site (some physical plant changes could require a new fire or zoning clearance).
 - 5) Change of ownership or location.
 - 6) Complaints regarding the provider.

9. Critical Incident Reporting

Contractor is required to submit Critical Incident reports to BHRS Quality Management on the same day of the incident or within 24 hours when there are unusual events, accidents, errors, violence or significant injuries requiring medical treatment for clients, staff or members of the community. (Policy #93-11 and 45 C.F.R. § 164, subpart C, in compliance with 45 C.F.R. § 164.316.)

The incident reports are confidential however discussion may occur with the Contractor regarding future prevention efforts to reduce the likelihood of recurrence. Contractor is required to participate in all activities related to the resolution of critical incidents, including but not limited to participation in quality improvement meetings, provision of all information requested by the County relevant to the incident, and Contractor staff cooperation.

10. Ineligible Employees

BHRS requires that contractors comply with Federal requirements as outlined in 42 CFR (438.608) Managed Care Regulations. Contractors must identify the eligibility of employees, interns, or volunteers prior to hiring and on a monthly basis thereafter. Results of the eligibility screenings are to be maintained in the employee files. This process is

meant to ensure that any person delivering services to consumers of BHRS are not currently excluded, suspended, debarred or have been convicted of a criminal offense as described below. The Contractor must notify BHRS Quality Management (by completing the BHRS Critical Incident Reporting Form, Policy#93-11) should a current employee, intern, or volunteer be identified as ineligible. Contractors are required to screen for ineligible employees, interns, and volunteers by following procedures included in BHRS Policy # 19-08, which can be found online at: <https://www.smchealth.org/bhrs-policies/credentialing-and-re-credentialing-providers-19-08>. BHRS Quality Management must be notified within twenty-four (24) hours of any violations. Contractor must notify BHRS Quality Management if an employee's license is not current or is not in good standing and must submit a plan to correct the matter.

a. Credentialing Check – Initial

During the initial contract process, BHRS will send a packet of contract documents that are to be completed by the Contractor and returned to BHRS. *Attachment C – Agency/Group Credentialing Information* will be included in the contract packet. Contractor must complete *Attachment C* and return it along with all other contract forms.

b. Credentialing Check – Monthly

Contractor will complete *Attachment C – Agency/Group Credentialing Information* each month and submit the completed form to BHRS Quality Management via email at: HS_BHRS_QM@smcgov.org or via a secure electronic format.

11. Compliance Plan and Code of Conduct

Contractor will annually read and be knowledgeable of the compliance principles contained in the BHRS Compliance Plan and Code of Conduct located at <http://smchealth.org/bhrs-documents>. In addition, Contractor will assure that Contractor's workforce is aware of compliance mandates and informed of the existence and use of the BHRS Compliance Improvement Hotline (650) 573-2695.

Contractor is required to conduct, complete and maintain record of annual compliance training by all staff serving or accessing PHI of BHRS consumers. Contractor may utilize BHRS Confidentiality trainings located at <http://smchealth.org/bhrs/providers/ontrain>.

12. Fingerprint Compliance

Contractor certifies that its employees, trainees, and/or its subcontractors, assignees, volunteers, and any other persons who provide services under this agreement, who have direct contact with any consumer will be fingerprinted in order to determine whether they have a criminal history which would compromise the safety of individuals with whom the Contractor's employees, trainees and/or its subcontractors, assignees, or volunteers have contact. Contractor shall have a screening process in place to ensure that employees who have positive fingerprints shall:

- a. Adhere to CCR Title 9 Section 13060 (Code of Conduct) when providing services to individuals with whom they have contact as a part of their employment with the contractor; OR
- b. Obtain an exemption from Community Care Licensing allowing the employee to provide services to individuals with whom they have contact as a part of their employment with the contractor.

A certificate of fingerprinting certification is attached hereto and incorporated by reference herein as *Attachment E*.

13. Staff Termination

Contractor shall inform BHRS, in a timely fashion, when staff have been terminated. BHRS Quality Management requires prompt notification to be able to terminate computer access and to safeguard access to electronic medical records by completing the BHRS Credentialing form.

14. Medi-Cal Enrollment

Contractor shall be enrolled in the Medi-Cal program or in the process of becoming enrolled. Contractor will keep BHRS informed on their enrollment status and submit proof of Medi-Cal enrollment. Contractor shall be Medi-Cal enrolled prior to admitting consumers to the program.

C. Cultural Competency

Implementations of these guidelines are based on the National Culturally and Linguistically Accessible Services (CLAS) Standards issued by the Department of Health and Human Services. For more information about these standards, please contact the Office of Diversity & Equity (ODE) at 650- 573-2714 or ode@smcgov.org.

1. Contractor will submit an annual cultural competence plan that details on-going and future efforts to address the diverse needs of consumers, families and the workforce. This plan will be submitted to the BHRS Analyst/BHRS Contract Monitor and the Office of Diversity & Equity (ODE) by September 30th of the fiscal year.

The annual cultural competence plan will include, but is not limited to the following:

- a. Implementation of policies and practices that are related to promoting diversity and cultural competence, such as ongoing organizational assessments on disparities and needs, consumer's rights to receive language assistance.
 - b. Contractor forum for discussing relevant and appropriate cultural competence-related issues (such as a cultural competence committee, grievance, or conflict resolution committee).
 - c. Ongoing collection of consumer cultural demographic information, including race, ethnicity, primary language, gender and sexual orientation in health records to improve service provision and help in planning and implementing CLAS standards.
 - d. Staffing objectives that reflect the cultural and linguistic diversity of the consumers. (Contractor will recruit, hire and retain clinical staff members who can provide services in a culturally and linguistically appropriate manner.)
 - e. Contractor will ensure that all program staff receive at least 8 hours of external training per year (i.e. sponsored by BHRS or other agencies) on how to provide culturally and linguistically appropriate services including the CLAS and use of interpreters.
2. Contractor will actively participate in at least one cultural competence effort within BHRS and/or to send a representative to attend a Health Equity Initiative (HEI), including but not limited to the Diversity & Equity Council (DEC), for the term of the Agreement. Participation in an HEI/DEC allows for the dissemination of CLAS as well as ongoing collaborations with diverse stakeholders. Contractor shall submit to BHRS Office of Diversity and Equity (ODE) by March 31st, a list of staff who have participated in these efforts. For more information about the HEI/DEC, and other cultural competence efforts within BHRS, contact ODE or visit

<https://www.smchealth.org/health-equity-initiatives>.

3. Contractor will establish the appropriate infrastructure to provide services in County identified threshold languages. Currently the threshold languages are: Spanish, Tagalog and Chinese (Mandarin and Cantonese). If Contractor is unable to provide services in those languages, Contractor is expected to contact their BHRS Analyst/BHRS Contract Monitor for consultation. If additional language resources are needed, please contact ODE.
4. Contractor will translate relevant and appropriate behavioral health-related materials (such as forms, signage, etc.) in County identified threshold languages in a culturally and linguistically appropriate manner. BHRS strongly encourages its contractors to use BHRS-sponsored forms in an effort to create uniformity within the system of care. Contractor shall submit to ODE by March 31st, copies of Contractor's health-related materials in English and as translated.
5. Should Contractor be unable to comply with the cultural competence requirements, Contractor will meet with the BHRS Analyst/BHRS Contract Monitor and ODE (ode@smcgov.org) to plan for appropriate technical assistance.

III. GOALS AND OBJECTIVES

Contractor shall ensure that the following outcome objectives are pursued throughout the term of this Agreement:

1. Permanent supportive housing:
90% of tenants will remain housed at least 12 months after move in.
2. Transitional housing:
90% of tenants will move to permanent housing within 24 months of move in.
3. Quality of service and housing:
90% of tenants will respond with positive satisfaction with the quality of housing and services provided via a consumer satisfaction survey conducted annually.

*** END OF EXHIBIT A ***

EXHIBIT B – PAYMENTS AND RATES
TELECARE SUPPORTED HOUSING SERVICES FY 2026-2028

In consideration of the services provided by Contractor in Exhibit A, County shall pay Contractor based on the following fee schedule:

I. PAYMENTS

In full consideration of the services provided by Contractor under this Agreement and subject to the provisions of Paragraph 3 of this Agreement, County shall pay Contractor in the manner described below, except that any and all such payments shall be subject to the conditions contained in this Agreement:

A. Maximum Obligation

The maximum amount that County shall be obligated to pay for all services provided under this Agreement shall not exceed the amount stated in Paragraph 3 of this Agreement. Furthermore, County shall not pay or be obligated to pay more than the amounts listed below for each component of service required under this Agreement.

In any event, the maximum amount County shall be obligated to pay for all services rendered under this contract shall not exceed FIVE MILLION TWO HUNDRED FIFTY-EIGHT THOUSAND SIX HUNDRED EIGHTY-NINE DOLLARS (\$5,258,689).

B. Payment for Services

1. Supported Housing Program Services

Contractor shall be paid the maximum amount of FIVE MILLION ONE HUNDRED TWENTY-EIGHT THOUSAND SIX HUNDRED EIGHTY-NINE DOLLARS (\$5,128,689) for Supported Housing services as described in Exhibit A of this agreement.

Supported Housing services days begin the first day a tenant is physically placed into the facility. Service days end when the tenant is discharged from the facility. The start date for Supported Housing services will be confirmed by the BHRS Contract Monitor.

Contractor shall submit monthly invoices as described in section I.C. of this Exhibit B.

a. FY 2026-2027

For the period of July 1, 2026, through June 30, 2027, the monthly payment for housing support services will be as described below based upon receipt of invoice from Contractor. The maximum amount shall not exceed TWO MILLION FIVE HUNDRED TWENTY-SIX THOUSAND FOUR HUNDRED FORTY-EIGHT DOLLARS (\$2,526,448).

1) Reimbursement for actual costs

Contractor shall be reimbursed in arrears for actual costs upon receipt of invoice from Contractor. Actual costs shall be based upon line items and costs included in *Exhibit D – Contractor’s Budget*. Reimbursement payments for actual costs shall be reduced by the amount paid to Contractor for billable services in 2) below.

2) Case Management and Peer Support services rates

Contractor shall be paid a maximum of TWO HUNDRED THOUSAND DOLLARS (\$200,000) for Medi-Cal billable outpatient services (Case Management and Peer Support services).

Contractor shall be paid the Medi-Cal Fee-for-Service rates for Case Management and Peer Support in the attached Exhibit F – San Mateo County Mental Health Contractor Outpatient Rates. Rates for FY 2026-27 are subject to the approval and implementation of anticipated State Department of Health Care Services (DHCS) Medi-Cal Fee-for-Service rate increases for services provided through this agreement.

b. FY 2027-2028

For the period of July 1, 2027, through June 30, 2028, the monthly payment for housing support services will be as described below based upon receipt of invoice from Contractor. The maximum amount shall not exceed TWO MILLION SIX HUNDRED TWO THOUSAND TWO HUNDRED FORTY-ONE DOLLARS (\$2,602,241).

1) Reimbursement for actual costs

Contractor shall be reimbursed in arrears for actual costs upon receipt of invoice from Contractor. Actual costs shall be based upon line items and costs included in *Exhibit D – Contractor’s Budget*. Reimbursement payments for actual costs shall be

reduced by the amount paid to Contractor for billable services in 2) below.

2) Case Management and Peer Support services rates

Contractor shall be paid a maximum of TWO HUNDRED THOUSAND DOLLARS (\$200,000) for Medi-Cal billable outpatient services (Case Management and Peer Support services).

Contractor shall be paid the Medi-Cal Fee-for-Service rates for Case Management and Peer Support in the attached Exhibit F – San Mateo County Mental Health Contractor Outpatient Rates. Rates for FY 2027-28 are subject to the approval and implementation of anticipated State Department of Health Care Services (DHCS) Medi-Cal Fee-for-Service rate increases for services provided through this agreement..

2. Payments for Client Catered Meals

a. FY 2026-2027

Contractor shall be reimbursed for catered meals for up to 15 supported housing CARE clients who are funded by the Behavioral Health Bridge Housing grant. For FY 2026-2027 this cost shall not exceed NINETY THOUSAND DOLLARS (\$90,000).

b. FY 2027-2028

Contractor shall be reimbursed for catered meals for up to 15 supported housing CARE clients who are funded by the Behavioral Health Bridge Housing grant. For FY 2027-2028 this cost shall not exceed THIRTY THOUSAND DOLLARS (\$30,000).

3. Services for Transitional Support Tenants (BHBH Grant)

Contractor shall be paid a maximum amount of TEN THOUSAND DOLLARS (\$10,000) for Additional Services for Transitional Support Tenants as described in section I. F.2. of Exhibit A. of this agreement.

C. Monthly Invoices and Payments

Invoices shall be for reimbursement of actual costs. Invoices shall include an itemized list of expenses for the categories of costs for Supported Housing services as described in Exhibit A, and for Additional Services for

Transitional Support Tenants (BHBH Grant) as described in Exhibit A. Invoices are subject to approval by the BHRS Contract Monitor.

1. Contractor shall bill County on or before the tenth (10th) working day of each month for reimbursement of actual costs following the provision of services for the prior month.-Invoices shall include an itemized list of expenses for costs of Supported Housing services as described in Exhibit A. Invoice costs shall be itemized according to cost categories in *Exhibit D – Contractor Budget*. The invoice must include the Case Management, Peer Support and Medication Support services, and Additional Services for Transitional Support Tenants. Contractor shall also provide detailed backup for invoiced costs. Invoices are subject to approval by the BHRS Contract Monitor.

County shall issue payment to Contractor within 30 days of receipt of invoice and approval by BHRS Contract Monitor.

2. Claims that are received after the tenth (10th) working day of the month are considered to be late submissions and may be subject to a delay in payment. Claims that are received 180 days or more after the date of service are considered to be late claims. County reserves the right to deny invoices with late claims or claims for which completed service reporting forms or electronic service files are not received. County reserves the right to change the claims instructions, and/or require the Contractor to modify their description of services as the County deems necessary and/or as required by the State for Medi-Cal billing. Any such changes will be provided within a reasonable timeframe from the date of notification of change.
3. Residential census shall be submitted weekly. Outpatient services shall be submitted electronically monthly in a flat file. The monthly invoice must include the co-housing days and outpatient services provided to each consumer.

Completed Service Reporting Forms will accompany the invoice and provide back-up detail for the invoiced services. The Service Reporting Forms will be provided by County, or be in a County approved format, and will be completed by Contractor according to the instructions accompanying the Service Reporting Forms. County reserves the right to change the Service Report Forms, instructions, and/or require the Contractor to modify their description of services as the County deems necessary.

4. Claims may be sent to BHRS-Contracts-Unit@smcgov.org OR to

County of San Mateo

Behavioral Health and Recovery Services
Contracts Unit
2000 Alameda de las Pulgas, Suite 280
San Mateo, CA 94403

- D. Contractor's FY 2026-28 annual budget is attached and incorporated into this Agreement as *Exhibit D – Contractor Budget*.

Contractor will be responsible for all expenses incurred during the performance of services rendered under this Agreement.

- E. The Chief of San Mateo County Health or designee is authorized to execute contract amendments which modify the County's maximum fiscal obligation by no more than \$25,000 (in aggregate), and/or modify the contract term and/or services so long as the modified term or services is/are within the current or revised fiscal provisions.
- F. In the event that funds provided under this Agreement are expended prior to the end of the contract period, Contractor shall provide ongoing services under the terms of this Agreement through the end of the contract period without further payment from County.
- G. In the event this Agreement is terminated prior to June 30, 2028, Contractor shall be paid only for services provided prior to the termination date. Such payments shall be subject to the approval of the Chief of San Mateo County Health or designee.
- H. Disallowances that are attributable to an error or omission on the part of County shall be the responsibility of County. This shall include but not be limited to quality assurance (QA) audit disallowances as a result of QA Plan error or format problems with County-designed service documents.
- I. County anticipates revenues from various sources to be used to fund services provided by Contractor through this Agreement. Should actual revenues be less than the amounts anticipated for any period of this Agreement, the maximum payment obligation and/or payment obligations for specific services may be reduced at the discretion of the Chief of San Mateo County Health or designee.
- J. In the event Contractor claims or receives payment from County for a service, reimbursement for which is later disallowed by County or the State of California or the United States Government, then Contractor shall promptly refund the disallowed amount to County upon request, or, at its option, County may offset the amount disallowed from any payment due or become due to Contractor under this Agreement or any other agreement.

K. County May Withhold Payment

Contractor shall provide all pertinent documentation required for Medi-Cal, Medicare, and any other federal and state regulation applicable to reimbursement including assessment and service plans, and progress notes. The County may withhold payment for any and all services for which the required documentation is not provided, or if the documentation provided does not meet professional standards as determined by the BHRS Quality Improvement Manager. Contractor shall meet quarterly with BHRS Contract Monitor, as designated by the BHRS Deputy Director, Adult and Older Adults, to review documentation and billing reports, and to take appropriate corrective action, as needed, to resolve any identified discrepancies.

Any amount of withholding of payment shall be based upon the established State rates for Medi-Cal billable services provided. Withholding shall be made through a reduction in the monthly payment amount for subsequent services. If there are no payments for subsequent services, contractor shall submit a check in the amount for payment to the BHRS Contracts Unit.

L. Third-Party Billing Process

The County shall conduct serial billing of third-party payors for services provided through this Agreement.

M. Beneficiary Billing

Contractor shall not submit a claim to, demand or otherwise collect reimbursement from, the beneficiary or persons acting on behalf of the beneficiary for any specialty mental health or related administrative services provided under this contract. The Contractor shall not hold beneficiaries liable for debts in the event that the County becomes insolvent, for costs of covered services for which the State does not pay the County, for costs of covered services for which the State or the County does not pay the Contractor, for costs of covered services provided under this or other contracts, referral or other arrangement rather than from the County, or for payment of subsequent screening and treatment needed to diagnose the specific condition of or stabilize a beneficiary with an emergency psychiatric condition.

N. CalAIM Implementation

The implementation of State CalAIM (California Medi-Cal reform) may impact the manner in which claims, reporting and payments are handled.

Contractor will comply with any and all State and/or County required changes, upon request, in a timely manner.

*** END OF EXHIBIT B ***

EXHIBIT C.1 – REPORTING REQUIREMENTS FORMS AND PERFORMANCE
TELECARE SUPPORTED HOUSING
FY 2026-2028

Contractor agrees to meet the following performance measures, targets and reporting requirements set forth below:

I. Monthly Reporting Forms

Completed Service Reporting Forms will be submitted to BHRS Division for the services in a timely manner and will be kept internally by the BHRS Division ensuring data reporting accuracy. The Service Reporting Forms will be provided by BHRS, or be in a County approved format, and will be completed by Contractor according to the instructions accompanying the Service Reporting Forms. County reserves the right to change the Service Report Forms, instructions, and/or require the Contractor to modify their description of services as the County deems necessary

II. Audit

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

III. Inadequate Performance

If County or Contractor finds that performance is inadequate, at the County's discretion, a meeting may be called to discuss the causes for the performance problem, to review documentation, billing and/or other reports, and to take appropriate corrective action, as needed, to resolve any identified discrepancies. This Agreement may be renegotiated, allowed to continue to end of term, or terminated pursuant to Section 5 of this Agreement. Any unspent monies due to performance failure may reduce the following year's agreement, if any.

IV. Annual Financial Statements

Contractor shall submit to County a year-end actual financial statement no later than ninety (90) days after the end of the fiscal year. Financial statements shall include accounting for all services provided through the Agreement for each applicable period, and separate accountings for each Electronic Health Record system program 1) MHRC services, 2) room and board services, and 3) 1:1 services (as applicable) with detail of Salary and Benefits at practitioner level. Financial statements shall be in accordance with the standard health accounting principles and format. Contractor shall annually have its books of accounts audited by a Certified Public Accountant

and a copy of said audit report shall be submitted within six months of the close of the fiscal year. The detailed financial statement total should agree to the audited statements provided.

As applicable, Contractor shall also submit to County a year-end Single Audit report with the financial statement. The annual financial statement and Single Audit Report, as applicable, shall be sent to the BHRS Deputy Director, Janet Gard, at jgard@smcgov.org.

V. Claims Certification and Program Integrity

1. Contractor shall comply with all state and federal statutory and regulatory requirements for certification of claims, including Title 42, Code of Federal Regulations (CFR) Part 438, Sections 438.604, 438.606, and, as effective August 13, 2003, Section 438.608, as published in the June 14, 2002, Federal Register (Vol. 67, No. 115, Page 41112), which are hereby incorporated by reference.
2. Anytime Contractor submits a claim to the County for reimbursement for services provided under Exhibit A of this Agreement, Contractor shall certify by signature that the claim is true and accurate by stating the claim is submitted under the penalty of perjury under the laws of the State of California.

The claim must include the following language and signature line at the bottom of the form(s) and/or cover letter used to report the claim.

“Under the penalty of perjury under the laws of the State of California, I hereby certify that this claim for services complies with all terms and conditions referenced in the Agreement with San Mateo County.

Executed at _____ California, on _____ 20__

Signed _____ Title _____

Agency _____ ”

3. The certification shall attest to the following for each beneficiary with services included in the claim:
 - a. An assessment of the beneficiary was conducted in compliance with the requirements established in this agreement.

- b. The beneficiary was eligible to receive services described in Exhibit A of this Agreement at the time the services were provided to the beneficiary.
- c. The services included in the claim were actually provided to the beneficiary.
- d. Medical necessity was established for the beneficiary as defined under California Code of Regulations, Title 9, Division 1, Chapter 11, for the service or services provided, for the timeframe in which the services were provided.
- e. A consumer plan was developed and maintained for the beneficiary that met all consumer plan requirements established in this agreement.
- f. For each beneficiary with specialty mental health services included in the claim, all requirements for Contractor payment authorization for specialty mental health services were met, and any reviews for such service or services were conducted prior to the initial authorization and any re-authorization periods as established in this agreement.
- g. Services are offered and provided without discrimination based on race, religion, color, national or ethnic origin, sex, age, or physical or mental disability.
- h. Except as provided in Paragraph II.B.4 of Exhibit A relative to medical records, Contractor agrees to keep for a minimum period of three years from the date of service a printed representation of all records which are necessary to disclose fully the extent of services furnished to the consumer. Contractor agrees to furnish these records and any information regarding payments claimed for providing the services, on request, within the State of California, to the California Department of Health Services; the Medi-Cal Fraud Unit; California Department of Mental Health; California Department of Justice; Office of the State Controller; U.S. Department of Health and Human Services, Managed Risk Medical Insurance Board or their duly authorized representatives, and/or the County.

**EXHIBIT D - San Mateo County Behavioral Health and Recovery Services (BHRS)
Cordilleras Replacement Direct Service Staff Template - Co-Housing 2026-27**

**New BHRS Campus - Co-Housing
Operating Budget - Telecare Corporation**

A. Facilities and Units

Number of Facilities	1
Units per Facility	57
Total Units	57
Occupancy Rate	TBD
Occupied Days	TBD

B. Staffing FTEs

Direct Service Staff

	Submitted		
	FTE	Med Salary	Cost
Administrator - Licensed	1.00	\$ 185,983	\$ 185,983
Team Lead - Licensed	1.00	\$ 153,706	\$ 153,706
Residential Counselor	0.60	\$ 66,550	\$ 39,930
Peer Professional	11.00	\$ 72,236	\$ 794,596
Case Manager - Housing Specialist	1.00	\$ 79,131	\$ 79,131
Case Manager II	1.60	\$ 73,674	\$ 117,879
Total Direct Service	16.20		\$ 1,371,226
Staff FTE per Bed	0.28		

C. Salary and Benefits

Administrative Support Staff

Regional Director of Operations	0.18		\$ 46,266
HR Direct Support	0.06		\$ 6,736
Regional Director of Nursing	0.02		\$ 5,054
IT Support Analyst	0.04		\$ 3,937
Office Coordinator II	1.00		\$ 83,305
MRT	0.25		\$ 16,124
Centralized Staffing Team	0.06		\$ 3,930
Benefits			\$ 396,956
Total			\$ 1,933,535

D. Facility Expenses (Detailed breakdown below)

Services, Equipment and Supplies

	Units	Unit Cost	Total Cost
Member Expense Housing	1	\$ -	\$ -
Mileage & Transportation (includes Leased Vehicle)	1	\$ 7,472	\$ 7,472
Other Community/Clinical	1	\$ 11,991	\$ 11,991
Food Services	1	\$ 90,000	\$ 90,000
Administration	1	\$ 228,078	\$ 228,078
Total Services, Equipment and Supplies			\$ 337,541

Facility Operating Costs

Physical Plant/Property	1	\$ 15,836	\$ 15,836
Indirect Costs @ 15%	1	\$ 329,537	\$ 329,537
Total Facility Operating Costs			\$ 345,373
Total Facility Expenses			\$ 682,914

Net Expenses

\$2,616,448

**EXHIBIT D - BUDGET San Mateo County Behavioral Health and Recovery Services (BHRS)
Cordilleras Replacement Direct Service Staff Template - Co-Housing 2027-28**

**New BHRS Campus - Co-Housing
Operating Budget - Telecare Corporation**

A. Facilities and Units

Number of Facilities	1
Units per Facility	57
Total Units	57
Occupancy Rate	TBD
Occupied Days	TBD

B. Staffing FTEs

Direct Service Staff

	Submitted		
	FTE	Med Salary	Cost
Administrator - Licensed	1.00	\$ 191,563	\$ 191,563
Team Lead - Licensed	1.00	\$ 158,317	\$ 158,317
Residential Counselor	0.60	\$ 68,547	\$ 41,128
Peer Professional	11.00	\$ 74,403	\$ 818,434
Case Manager - Housing Specialist	1.00	\$ 81,505	\$ 81,505
Case Manager II	1.60	\$ 75,885	\$ 121,416
Total Direct Service	16.20		\$ 1,412,363
Staff FTE per Bed	0.28		

C. Salary and Benefits

Administrative Support Staff

		\$ 1,412,363
Regional Director of Operations	0.18	\$ 47,654
HR Direct Support	0.06	\$ 6,938
Regional Director of Nursing	0.02	\$ 5,206
IT Support Analyst	0.04	\$ 4,055
Office Coordinator II	1.00	\$ 85,804
MRT	0.25	\$ 16,608
Centralized Staffing Team	0.06	\$ 4,048
Benefits		\$ 408,865
Total		\$ 1,991,541

D. Facility Expenses (Detailed breakdown below)

Services, Equipment and Supplies

	Units	Unit Cost	Total Cost
Member Expense Housing	1	\$ -	\$ -
Mileage & Transportation (includes Leased Vehicle)	1	\$ 7,696	\$ 7,696
Other Community/Clinical	1	\$ 12,351	\$ 12,351
Food Services	1	\$ 30,000	\$ 30,000
Administration	1	\$ 234,920	\$ 234,920
Total Services, Equipment and Supplies			\$ 284,967

Facility Operating Costs

Physical Plant/Property	1	\$ 16,311	\$ 16,311
Indirect Costs @ 15%	1	\$ 339,423	\$ 339,423
Total Facility Operating Costs			\$ 355,734
Total Facility Expenses			\$ 640,701

Net Expenses

\$2,632,242

EXHIBIT E - PROPERTY INVENTORY

Telecare Co-Housing				
Exhibit E - County Property				
Furniture	Quantity	Type	Notes	
Exercise Room				
Treadmill				
Bike				
Interview/Visitation Room				
Chair	1	Side Chair - Arms	C4	
Chair	1	Side Chair - Armless	C5	
Round Table	1	Dining Table - 2-Person	T4	
Stool	1	Side Table	T1	
Sofa	2	2-Seat Sofa - Arms	S1	
Directors Office				
Task Chairs	1	Task Chair	C17	
Chair	1	Side Chair - Arms	C4	
Chair	1	Side Chair - Armless	C5	
Office combo (6 items)	1	Desk, File Cabinet, Overhead Storage, Worksurface, Tackboard, Lamp	D4	
Office				
Task Chairs	1	Task Chair	C17	
Chair	1	Side Chair - Arms	C4	
Chair	1	Side Chair - Armless	C5	
Office combo (6 items)	1	Desk, File Cabinet, Overhead Storage, Worksurface, Tackboard, Lamp	D4	
Kitchen				
Over Range Micowave				
Electric Range				
Refrigerator				
Dining/Activity Room				
Chair	10	Side Chair - Arms	C4	
Chair	10	Side Chair - Armless	C5	
Tables	5	Dining Table - 4-Person Flip	T6	
Television	1	LG TV	TVB	
TV Wall Mount	1	TV Wall Mount	TVBm	
Recycling Bin	1	Recycling Bin	RBA	
Housekeeping Room				
Cart				
Foyer				
Side Chairs				

EXHIBIT E - PROPERTY INVENTORY

Side Chairs				
Table				
Recycling Bin				
Refrigerator				
Microwave				
Waste Room				
96 Gallon Waste Bins				
Bedrooms				
Beds with Mattresses	57	Bed w/ Mattress	B2	
Chairs	57	Desk Chair	C7	
Desk	57	Patient Desk	D1	
Wardrobe	57	Wardrobe	W1	
Cabinet	57	Bedside Cabinet	T8	
Living Room/Library				
Glider Chairs	4	Glider Chair	C8	
Lounge Chairs	4	Single Seat Lounge Chair - Arms	C1	
Chair	12	Side Chair - Arms	C4	
Chair	12	Side Chair - Armless	C5	
Round Table	6	Dining Table - 4-Person	T3	
Coffee Table	4	Coffee Table	T2	
Sofa	4	2-Seat Sofa - Arms	S1	
Television	4	LG TV	TVB	
TV Wall Mount	4	TV Wall Mount	TVBm	
Meditation Room				
Stool	1	Side Table	T1	
Glider Chair	1	Glider Chair	C8	
Bean Bag Chair	1	Bean Bag Chair	C10	
Sofa	1	2-Seat Sofa - Arms	S1	
Computer Stations				
Table	2	Training Table	T9	
Chair	2	Side Chair - Armless	C5	
Medication Room				
Refrigerator	1	Refrigerator, Undercounter	FRU	

Exhibit F: San Mateo County Mental Health Contractor Outpatient Rates, FY 2025-26

CalAIM Service Code	CalAIM Service Description	CPT / HCPCS Code	Time Associated with Code (Mins) for Purposes of Rate	Psychiatrist/Contracted Psychiatrist	Physicians Assistant	Nurse Practitioner / Certified Nurse Specialist	RN	LVN	Licensed Psychiatric Technician	Medical Assistant	Pharmacist	Psychologist / Pre-licensed Psychologist	LCSW / LPCC / MFT	Occupational Therapist	Peer Recovery Specialist	MHRS / Other Qualified Providers
		PROVIDER TYPE	HOURLY RATE													
10CA **	GROUP THERAPY 26+ MIN	90853	50	\$ 276.52	\$ 124.02	\$ 137.51	\$ 606.53	\$ 318.62	\$ 273.15	\$ 219.03	\$ 714.77	\$ 600.53	\$ 388.62	\$ 517.31	\$ 307.00	\$ 292.38
14CA ***	MD/ NP ASSESSMENT 31+ MIN	90792	60	\$ 1,493.23	\$ 669.71	\$ 742.55	\$ 606.53					\$ 111.21	\$ 71.97			
150CA	MEDICATION GROUP	H0034	15	\$ 82.96	\$ 37.21	\$ 41.25	\$ 33.70	\$ 17.70	\$ 15.17	\$ 12.17	\$ 39.71					\$ 16.24
16CA	MEDICATION INJECTION	96372	15	\$ 373.31	\$ 167.43	\$ 185.64	\$ 151.63	\$ 79.66	\$ 68.29	\$ 54.76						
17CA	MEDICATION SUPPORT	H0034	15	\$ 373.31	\$ 167.43	\$ 185.64	\$ 151.63	\$ 79.66	\$ 68.29	\$ 54.76	\$ 178.69					
2CA	CRISIS INTERVENTION	H2011	15	\$ 373.31	\$ 167.43	\$ 185.64	\$ 151.63	\$ 79.66	\$ 68.29		\$ 178.69					\$ 73.09
41CA *	FAMILY THERAPY 26+ MIN	90847	50	\$ 1,244.36	\$ 558.09	\$ 618.79						\$ 500.44	\$ 323.85			
51CA	CASE MANAGEMENT	T1017	15	\$ 373.31	\$ 167.43	\$ 185.64	\$ 151.63	\$ 79.66	\$ 68.29	\$ 54.76	\$ 178.69	\$ 150.13	\$ 97.15	\$ 129.33		\$ 73.09
5CA	ASSESSMENT NON MD	H0031	15		\$ 167.43	\$ 185.64	\$ 151.63	\$ 79.66	\$ 68.29		\$ 178.69	\$ 150.13	\$ 97.15	\$ 129.33		\$ 73.09
6CA	PLAN DEVELOPMENT NON MD	H0032	15		\$ 167.43	\$ 185.64	\$ 151.63	\$ 79.66	\$ 68.29		\$ 178.69	\$ 150.13	\$ 97.15	\$ 129.33		\$ 73.09
70CA	REHABILITATION GROUP	H2017	15	\$ 82.96	\$ 37.21	\$ 41.25	\$ 33.70	\$ 17.70	\$ 15.17	\$ 12.17	\$ 39.71	\$ 33.36	\$ 21.59	\$ 28.74		\$ 16.24
7CA	REHABILITATION	H2017	15	\$ 373.31	\$ 167.43	\$ 185.64	\$ 151.63	\$ 79.66	\$ 68.29	\$ 54.76	\$ 178.69	\$ 150.13	\$ 97.15	\$ 129.33		\$ 73.09
90832CA	INDIVIDUAL THERAPY 16-37 MINUTES	90832	30	\$ 746.62	\$ 334.85	\$ 371.27						\$ 300.26	\$ 194.31			
90834CA	INDIVIDUAL THERAPY 38-52 MINUTES	90834	45	\$ 1,119.92	\$ 502.28	\$ 556.91						\$ 450.40	\$ 291.46			
90837CA *	INDIVIDUAL THERAPY 53+ MIN	90837	60	\$ 1,493.23	\$ 669.71	\$ 742.55						\$ 600.53	\$ 388.62			
90839CA	PSYCHOTHERAPY for CRISIS 30+ MIN	90839	60	\$ 1,493.23	\$ 669.71	\$ 742.55						\$ 600.53	\$ 388.62			
90840CA	PSYCHOTHERAPY for CRISIS, each addtl 30 Min (MIS ONLY)	90840	30	\$ 746.62	\$ 334.85	\$ 371.27						\$ 300.26	\$ 194.31			
90885CA ***	ASSESSMENT (ONLY CHART REVIEW) 31+ MIN	90885	60	\$ 1,493.23	\$ 669.71	\$ 742.55						\$ 600.53	\$ 388.62			
96110CA ***	DEVELOPMENTAL SCREENING 31+ Min	96110	60	\$ 1,493.23	\$ 669.71	\$ 742.55	\$ 606.53			\$ 219.03		\$ 600.53	\$ 388.62	\$ 517.31		
96112CA	DEVELOPMENTAL TESTING, 31+ Min	96112	60	\$ 1,493.23	\$ 669.71	\$ 742.55						\$ 600.53		\$ 517.31		
96113CA	DEVELOPMENTAL TESTING, each addtl 30 Min (MIS ONLY)	96113	30	\$ 746.62	\$ 334.85	\$ 371.27						\$ 300.26		\$ 258.65		
96116CA	NEUROBEHAVIORAL STATUS EXAM, 31+ Min	96116	60	\$ 1,493.23	\$ 669.71	\$ 742.55	\$ 606.53					\$ 600.53	\$ 388.62			
96121CA	NEURO STATUS EXAM, each addtl hr (MIS ONLY)	96121	60	\$ 1,493.23	\$ 669.71	\$ 742.55	\$ 606.53					\$ 600.53	\$ 388.62			
96125CA ***	Standard Cognitive Performance Testing 31+ MIN	96125	60	\$ 1,493.23	\$ 669.71	\$ 742.55						\$ 600.53				
96127CA ***	Brief Behavioral Assessment 31+ MIN	96127	60	\$ 1,493.23	\$ 669.71	\$ 742.55	\$ 606.53			\$ 219.03		\$ 600.53	\$ 388.62			

Exhibit F: San Mateo County Mental Health Contractor Outpatient Rates, FY 2025-26

ICC_CA	INTENSIVE CARE COORDINATION	T1017	15	\$ 373.31	\$ 167.43	\$ 185.64	\$ 151.63	\$ 79.66	\$ 68.29	\$ 54.76	\$ 178.69	\$ 150.13	\$ 97.15	\$ 129.33	\$ 73.09
IHBS2CA	IHBS CRISIS INTERVENTION	H2011	15	\$ 373.31	\$ 167.43	\$ 185.64	\$ 151.63	\$ 79.66	\$ 68.29	\$ 54.76	\$ 178.69	\$ 150.13	\$ 97.15	\$ 129.33	\$ 73.09
IHBS41CA*	IHBS FAMILY THERAPY 26+ MIN	90847	50	\$ 1,244.36	\$ 558.09	\$ 618.79						\$ 500.44	\$ 323.85		
IHBS5CA	IHBS ASSESSMENT NON MD	H0031	15	\$ 167.43	\$ 167.43	\$ 185.64	\$ 151.63	\$ 79.66	\$ 68.29	\$ 54.76	\$ 178.69	\$ 150.13	\$ 97.15	\$ 129.33	\$ 73.09
IHBS6CA	IHBS PLAN DEVELOPMENT NON MD	H0032	15												
IHBS7CA	IHBS REHABILITATION	H2017	15	\$ 373.31	\$ 167.43	\$ 185.64	\$ 151.63	\$ 79.66	\$ 68.29	\$ 54.76	\$ 178.69	\$ 150.13	\$ 97.15	\$ 129.33	\$ 73.09
IHBS90832	IHBS INDIVIDUAL THERAPY 16-37 MIN	90832	30	\$ 746.62	\$ 334.85	\$ 371.27						\$ 300.26	\$ 194.31		
IHBS90834	IHBS INDIVIDUAL THERAPY 38-52 MIN	90834	45	\$ 1,119.92	\$ 502.28	\$ 556.91						\$ 450.40	\$ 291.46		
IHBS90837*	IHBS INDIVIDUAL THERAPY 53+ MIN	90837	60	\$ 1,493.23	\$ 669.71	\$ 742.55						\$ 600.53	\$ 388.62		
T1013	SIGN LANG OR ORAL INTERPRETIVE	T1013	15	\$ 20.72	\$ 20.72	\$ 20.72	\$ 20.72	\$ 20.72	\$ 20.72	\$ 20.72	\$ 20.72	\$ 20.72	\$ 20.72	\$ 20.72	\$ 20.72
T1013M	MEDICAL SIGN LANG OR ORAL INTERPRETIVE (14CA, 16CA, 99212CA-99215CA, 99347CA-99350CA)	T1013	15							\$ 20.72					
T1013X	SIGN LANG OR ORAL INTERPRETIVE (6CA, 7CA, 51CA, 70CA, CFTICC_CA, ICC_CA, IHBS6CA, IHBS7CA)	T1013	15	\$ 20.72	\$ 20.72	\$ 20.72	\$ 20.72								
T2021 *	Therapy substitute, 15 minutes (MIS ONLY)	T2021	15	\$ 373.31	\$ 167.43	\$ 185.64									
T2021G **	Therapy substitute, 15 minutes (MIS ONLY)	T2021	15	\$ 82.96	\$ 37.21	\$ 41.25									
T2024 ***	Assessment substitute, 15 minutes (MIS ONLY)	T2024	15	\$ 373.31	\$ 167.43	\$ 185.64				\$ 54.76				\$ 129.33	

APPENDIX D HOUSING FIRST

Cordilleras Co-Housing will follow the guiding principles of Housing First. The principles listed below have been adapted from State of California statute SB1380.

Core components of Housing First” means all of the following:

- (1) Tenant screening and selection practices that promote accepting applicants regardless of their sobriety or use of substances, completion of treatment, or participation in services.
- (2) Applicants are not rejected on the basis of poor credit or financial history, poor or lack of rental history, criminal convictions unrelated to tenancy, or behaviors that indicate a lack of “housing readiness.”
- (3) BHRS may accept referrals of the target population directly from shelters, street outreach, drop-in centers, and other parts of crisis response systems frequented by vulnerable people experiencing homelessness.
- (4) Supportive services that emphasize engagement and problem solving over therapeutic goals and service plans that are highly tenant-driven without predetermined goals.
- (5) Participation in services or program compliance is not a condition of permanent housing tenancy.
- (6) Permanent Supportive Housing (PSH) Tenants have a lease and all the rights and responsibilities of tenancy, as outlined in California’s Civil, Health and Safety, and Government codes.
- (7) The use of alcohol or drugs in and of itself, without other lease violations, is not a reason for eviction.
- (8) In communities with coordinated assessment and entry systems (CES), incentives for funding promote tenant selection plans for supportive housing that prioritize eligible tenants based on criteria other than “first-come-first-serve,” including, but not limited to, the duration or chronicity of homelessness, vulnerability to early mortality, or high utilization of crisis services. Prioritization may include triage tools, developed through local data, to identify high-cost, high-need homeless residents. BHRS will accept referrals of the target population from the local CES.
- (9) Case managers and service coordinators who are trained in and actively employ evidence-based practices for client engagement, including, but not limited to, motivational interviewing and client-centered counseling.

(10) Services are informed by a harm-reduction philosophy that recognizes drug and alcohol use and addiction as a part of tenants' lives, where tenants are engaged in nonjudgmental communication regarding drug and alcohol use, and where tenants are offered education regarding how to avoid risky behaviors and engage in safer practices, as well as connected to evidence-based treatment if the tenant so chooses.

(11) The project and specific apartment may include special physical features that accommodate disabilities, reduce harm, and promote health and community and independence among tenants.

(12) Because referred applicants have disabilities, trauma, and difficult circumstances associated with experiences of homelessness, housing provider will proactively identify issues that could impact the application approval.

(13) Each applicant is afforded the right to a reasonable accommodation in all phases of the application process, ongoing tenancy and as a last resort to disqualification.

ATTACHMENT A
CO-HOUSING RESPONSIBILITY MATRIX

Item:	Scope Description:	Post Warranty Resp.	Notes:
Building Equipment			
	Elevators	DPW	
	Cathodic Protection System	DPW	
	Roof Top Equipment	DPW	
	Door Hardware Interior (Less Key Cylinders)	DPW	
	Door Hardware Exterior (Less Key Cylinders)	DPW	
	Kitchen Equipment - Kitchenettes (See Equipment Schedule)	DPW	
	Fire Suppression System	DPW	
	Fire Alarm System	DPW	
	Stove	Contractor	
	Microwave Oven	Contractor	
	Refrigerator	Contractor	
	Dishwasher	Contractor	
	Keying	Contractor	
	Exercise Equipment	Contractor	
	Office Cubes, Desks, Furniture, Chairs, File Cabinets	Contractor	
	Medical Examine Chair	Contractor	
	Beds & Pads	Contractor	
HVAC/Plumbing Equipment			
	HVAC System	DPW	
	BMS System	DPW	
	Water Heater/Boiler	DPW	
	Plumbing Fixtures (Toilets, Sinks, Showers, Facets)	DPW	
	Washers / Dryers	Contractor	
	Monthly Water Services	Contractor	
Electrical Equipment			
	Low Voltage Transformers	DPW	
	Low Voltage Transformers	DPW	
	Lighting Control System	DPW	
	Photovoltaic System Light	Four Front / DPW	
	Light Fixtures & Outlets	DPW	
	Devices	Contractor	
	Monthly Electrical Services	Contractor	
IT Equipment			
	Network Equipment	Contractor	
	Wireless Access Points	Contractor	
	Computers	Contractor	
	Phones	Contractor	
	AV Equip. (TV's, Speakers, etc.)	Contractor	
	Internet & Phone Utility Services	Contractor	
	HMI Security Control System	BHRS	
	Access control system	BHRS	
	Security Cameras	BHRS	
	Intercom System	BHRS	
	Security Network	BHRS	
	DAS	DPW	

Attachment D – Agency Payor Financial

Client ID <i>(Do name search):</i> _____	Client Date of Birth (Required): _____	SSN (Required): _____
Last Name: _____	First Name: _____	M.I. _____
Alias or other names used: _____	Undocumented? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Does Client have Medi-Cal? <input type="checkbox"/> Yes <input type="checkbox"/> No Share of Cost Medi-Cal? <input type="checkbox"/> Yes <input type="checkbox"/> No Client's Medi-Cal Number (CIN Number)? _____ <i>Please attach copy of MEDS screen. If client has Full Scope Medi-Cal and no other insurance coverage, skip the remaining sections of this form and fax to MIS/Billing Unit (650) 573-2110.</i> Is client potentially eligible for Medi-Cal benefits? <input type="checkbox"/> Yes <input type="checkbox"/> No Client referred to Medi-Cal? <input type="checkbox"/> Yes <input type="checkbox"/> No Date of Referral: _____ Is this a Court-ordered Placement? <input type="checkbox"/> Yes <input type="checkbox"/> No Does Client have Medicare? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please check all that apply ___ Part A ___ Part B ___ Part D What is the Client's Medicare Number (HIC Number)? _____ Signed Assignment of Benefits? <input type="checkbox"/> Yes <input type="checkbox"/> No Please attach copy of Medicare card		
Responsible Party's Information (Guarantor): Name: _____ Phone: _____ Relationship to Client: _____ <input type="checkbox"/> Self Address: _____ City: _____ State: _____ Zip Code: _____ <input type="checkbox"/> Refused to provide Financial Information and will be charged full cost of service.		
3rd Party Health Insurance Information Health Plan or Insurance Company (Not employer) Company Name: _____ Policy Number: _____ Street Address: _____ Group Number: _____ City: _____ Name of Insured Person: _____ State: _____ Zip: _____ Relationship to Client: _____ Insurance Co. phone number: _____ SSN of Insured Person (if other than client): _____ Please attach copy of insurance card (front & back) Signed Assignment of Benefits? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Does the client have Healthy Kids Insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please attach copy of insurance card (front & back)		
Does the client has HealthWorx Insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please attach copy of insurance card (front & back)		
Client Authorization I affirm that the statements made herein are true and correct. I understand that I am responsible for paying the UMDAP liability amount or cost of treatment received by myself or by members of my household during each 1-year period. If the cost of service is more than the UMDAP liability amount, I will pay the lesser amount. It is my responsibility and I agree to provide verification of income, assets and expenses. If I do not authorize, I will be billed in full for services received. I authorize San Mateo County Mental Health to bill all applicable mental health services to Medi-Care and/or my insurance plan, including any services provided un 26.5. I authorize payment of healthcare benefits to San Mateo County Mental Health.		
Signature of Client or Authorized Person _____		Date _____
Client refused to sign Authorization: <input type="checkbox"/> Please check, if applicable Date: _____ Reason _____ Name of Interviewer: _____ Phone Number: _____ Best time to contact _____ Fax completed copy to: MIS/Billing Unit (650) 573-2110		

ATTACHMENT E

FINGERPRINTING CERTIFICATION

Contractor hereby certifies that its employees, trainees, and/or its subcontractors, assignees, volunteers, and any other persons who provide services under this agreement, who have direct contact with any client will be fingerprinted in order to determine whether they have a criminal history which would compromise the safety of individuals with whom the Contractor's employees, trainees and/or its subcontractors, assignees, or volunteers have contact. Additionally, Contractor's employees, volunteers, consultants, agents, and any other persons who provide services under this Agreement and who has/will have supervisory or disciplinary power over a child (Penal Code Section 11105.3) (the "Applicant") shall be fingerprinted in order to determine whether each such Applicant has a criminal history which would compromise the safety of children with whom each such Applicant has/will have contact.

Contractor's employees, volunteers, consultants, agents, and any other persons who provide services under this Agreement will be fingerprinted and: (check a or b)

a. do NOT exercise supervisory or disciplinary power over children (Penal 11105.3).

b. do exercise supervisory or disciplinary power over children (Penal 11105.3).

Telecare Corporation

Name of Contractor

Signed by:

Dawan Utecht

F785665D7185422...

Signature of Authorized Official

Dawan Utecht

Name (please print)

SVP/Chief Development Officer

Title (please print)

05/20/2026

Date

ATTACHMENT I

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

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

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

The Contractor(s): (Check a, b, or c)

- a. Has no employees
- b. Employs fewer than 15 persons
- c. Employs 15 or more persons and, pursuant to section 84.7 (a) of the regulation (45 C.F.R. 84.7 (a), has designated the following person(s) to coordinate its efforts to comply with the DHHS regulation.

Name of 504 Person: Dawan Utecht

Name of Contractor(s): Telecare Corporation

Street Address or P.O. Box: 1080 Marina Village Parkway, Suite 100

City, State, Zip Code: Alameda, CA 94501

I certify that the above information is complete and correct to the best of my knowledge

Signature: 
Signed by:
F785665D7185422...

Title of Authorized Official: SVP/Chief Development Officer

Date: 05/20/2026

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



Attachment J Policy Attestation Form

First Name	<input type="text" value="Dawan"/>
Last Name	<input type="text" value="Utecht"/>
Agency	<input type="text" value="Telecare Corporation"/>
Mailing Address	<input type="text" value="1080 Marina Village Parkway, Suite 100"/>
City	<input type="text" value="Alameda"/>
State	<input type="text" value="CA"/>
Zip Code	<input type="text" value="94501"/>

Please verify compliance with required policies by indicating which polices have been read by you and/or employees of your agency. The policies are located online at: <https://www.smchealth.org/bhrs-policies/credentialing-and-re-credentialing-providers-19-08>

- Behavioral Health Confidentiality**
- Policy 00-06 Client Access to Protected Health Information
 - Policy 03-01 Confidentiality/Privacy of Protected Health Information
 - Policy 03-11 E-Mail Use
 - BHRIS Compliance Plan
 - BHRIS Code of Conduct
 - Policy 91-05 Compliance with Documentation Standards

- County Policies**
- Incompatible Activities

- Clinical Staff Only**
- Policy 03-02 Notice of Privacy Practice
 - Policy 03-04 Disclosure of Protected Health Information, Minimum Necessary
 - Policy 03-05 Disclosure of Protected Health Information, Incidental
 - Policy 03-06 Disclosure of Protected Health Information with Client Authorization

Policy Attestation Continued...

- Clinical Staff Only**
- Policy 03-07 Disclosure of Protected Health Information, Request for an Accounting
 - Policy 03-08 Restrictions on Use or Disclosure of Protected Health Information Client Request
 - Policy 03-09 Amendment of Protected Health Information, Client

This attestation form must be signed by an individual with whom the County has a contract, or an individual with the authority to sign on behalf of the organization they represent, to attest to the accuracy and completeness of the information provided.

Signature: Signed by:
Dawan Utecht
F785665D7185422...

Date completed: 05/20/2026

Attachment K: Assurance of non-employment of staff providing other Cordilleras Health and Healing Campus contracted services

For the term of this agreement Contractor agrees to not employ staff to work in the Supported Housing Program who are also employed by one of the contracted MHRCs or contracted Property Management services on the Cordilleras Health and Healing Campus. This prohibition includes Contractor's own employees assigned to work in the MHRC staffed by Contractor under a separate agreement with the County. Said Contractor-employees may not provide services in the Supported Housing Program. Contractor may contract for the provision of other services with the prior written approval from the BHRS Contract Monitor.

Signed by:

F785665D7185422...

Telecare Administrator

05/20/2026

Date



IMD/MHRC Weekly Census Report

ATTACHMENT T
DISASTER AND EMERGENCY RESPONSE PLAN

AGENCY NAME:

ADDRESS:

NAME OF PRIMARY POINT OF CONTACT:

TELEPHONE NUMBER(S):

EMAIL ADDRESS:

LAST UPDATED:

**I. SUUMMARY OF DISASTER AND EMERGENCY RESPONSE PLAN
("PLAN")**

(The Plan summary sets for the major processes, procedures and goals of the Plan, including a general description of the agency's plans for response and recovery in the immediate aftermath of a national, state, or local disaster or emergency and the agency's plans for the continuation of Services under the Agreement during and after the disaster or emergency.)

II. KEY PERSONNEL AND CONTACT INFORMATION

Name/Title	Role in Plan Implementation	Work Phone	Cell Phone	Work Email	Personal Email

III. EMERGENCY RESPONSE PLAN

(Detailed description of the agency's plan to respond to and recover from the emergency. This includes key matters that need to be addressed and acted on immediately in the event of an emergency to ensure the on-going viability of the agency. May include a description of the agency's plans to address leadership/succession, in the event that agency's leaders are unavailable or incapacitated; securing and establishing alternate facilities and equipment in the event that the agency's primary facilities or equipment are unavailable; access to telecommunications and information technology and other matters appropriate to the agency and its mission.)

IV. CONTINUITY OF OPERATIONS

(This is a detailed description of the agency's plan to ensure the ongoing continuation of services under the Agreement during and after a disaster or emergency. Recognizing that each disaster or emergency will be unique and will pose diverse challenges and constraints that may be impossible to fully anticipate, this section should include a description of the agency's plans for ensuring that staff needed to provide the services set forth in the Agreement are available and able to provide the services and that the agency has identified a process for securing the equipment and supplies needed to perform such services. The agency should attempt to identify, to the extent feasible, the additional personnel, equipment and supply costs that it would incur in providing such ongoing continuity of services to the County.)

V. PLAN PRACTICE AND EXERCISING

(The agency should describe its process to ensure that agency staff is informed of, and trained on, the Plan. This may include a general description of the training materials that are prepared and provided to agency staff and any initial and follow-on training that may be provided.)

VI. OTHER MATTERS

(In this section, the agency will discuss other emergency response-related matters unique to the agency and its mission.)