

**AMENDMENT ONE TO AGREEMENT
BETWEEN THE COUNTY OF SAN MATEO AND
TELECARE CORPORATION**

THIS AMENDMENT TO THE AGREEMENT, entered into this _____ day of _____, 20_____, by and between the COUNTY OF SAN MATEO, hereinafter called "County," and TELECARE CORPORATION, hereinafter called "Contractor";

W I T N E S S E T H:

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

WHEREAS, the parties entered into an Agreement for non-adherent tuberculosis patients under order of State/Local civil detention; and

WHEREAS, the parties wish to amend the Agreement to increase the amount by \$38,220, from \$99,645 to \$137,865.

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

1. Section 3 of the Agreement is amended to read as follows:

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 ONE HUNDRED THIRTY-SEVEN THOUSAND EIGHT HUNDRED SIXTY-FIVE DOLLARS (\$137,865). 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.

2. Exhibits A and B of the original Agreement are deleted in their entirety and replaced with the versions of Exhibits A and B that are attached.
3. **All other terms and conditions of the agreement dated August 31, 2016, between the County and Contractor shall remain in full force and effect.**

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


Contractor Signature

3/13/17
Date

Telecare Corporation
Contractor Name (please print)

COUNTY OF SAN MATEO

By:
President, Board of Supervisors, San Mateo County

Date:

ATTEST:

By:
Clerk of Said Board

Exhibit A

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

This agreement defines the responsibilities of the California Department of Public Health (CDPH), Tuberculosis Control Branch (TBCB), San Mateo County Health System, Public Health, Policy and Planning Division, Tuberculosis Control Program (San Mateo County), local health department (LHD) TB programs, and Telecare Corporation (Contractor) for patient admission to the regional civil detention facility identified in this agreement.

The patients referred to in this agreement are persistently non-adherent tuberculosis (TB) patients who are either under a Health Officer's Order of Detention for Completion of Treatment in accordance with Health and Safety Code § 121365(e) or a court ordered detention for completion of therapy.

I. Regional Facility

Contractor will provide services at a regional civil detention site for noninfectious persistently non-adherent tuberculosis (TB) patients, Cordilleras Mental Health Rehabilitation Center (CMHRC, or "the facility"), a licensed mental health rehabilitation center located at 200 Edmonds Road, Redwood City, CA 94062.

II. Facility Requirements

A. Contractor agrees to ensure that CMHRC will meet the following requirements:

1. Maintain current licensure by the State of California as a mental health rehabilitation center
2. Provide a system or systems for elopement prevention consisting of one or more of the following:
 - 24-hour security
 - Closed circuit television
 - Electronic monitoring
 - Locks or alarms on all accessible exit doors
 - Key pad electronic entry and exit
3. Indoor recreation activities
4. Outdoor recreation area
5. Reasonable accommodation of persons with disabilities

III. Patient Admission, Refusal and Discharge

- A. The CDPH TBCB civil detention coordinator must give prior approval for a proposed admission. If the patient has multi-drug resistant TB (MDR TB), additional approval must also be granted by the CDPH TBCB MDR TB Consultation Service's physician.
- B. The patient must be under a health officer's order of detention pursuant to Health and Safety Code §121365(e) or court order for civil detention.
- C. CMHRC will review each case prior to admission to ensure the patient meets CMHRC admission criteria.
- D. In accordance with CMHRC's admission policies (pages 8 and 11), the patient must:
 - 1. Be clinically non-infectious in accordance with the most recent and up-to-date California Tuberculosis Controllers Association (CTCA) and CDPH Joint Guideline http://www.ctca.org/index.cfm?fuseaction=page&page_id=5074 on the assessment of TB patient infectiousness and placement into high and lower risk settings.
 - 2. Have an Axis I diagnosis, using the Diagnostic and Statistical Manual for Mental Disorders criteria, and require care and rehabilitation in a 24-hour setting (CMHRC policies 9.1.2, page 8 and 9.1.5, page 11 'Admissions Criteria' and 'Referral Process').
 - 3. Be between the ages of 18 and 65 years old
 - 4. Not be any of the following:
 - a. a sexual predator,
 - b. in an acute phase of a psychiatric disorder and/or suicidal,
 - c. violent, destructive, assaultive, or demonstrating otherwise unmanageable behavior,
 - d. pending conviction of a crime or have an outstanding arrest warrant; or
 - e. otherwise judged by CMHRC staff to be too disruptive for the facility milieu.
- E. Discharge of a Patient Disruptive to the Facility Milieu
 - 1. CMHRC reserves the right to discharge a patient back to the sending LHD prior to the expiration of the order for detention if the patient:
 - a. becomes violent, destructive, assaultive, or demonstrates otherwise unmanageable behavior, or
 - b. violates facility rules to such an extent that the safety of CMHRC staff and/or other patients is threatened.

2. Should CMHRC make a decision to discharge, CMHRC agrees to immediately notify San Mateo County, the sending LHD, and CDPH TBCB.
3. The sending LHD will be responsible for both the arrangement and cost of transportation for the patient.
4. The sending LHD should ensure that the patient is transferred as soon as possible, but no later than 48 hours after CMHRC has decided to discharge the patient. Should CMHRC determine that an immediate removal is necessary, and the sending LHD is not able to arrange for transportation of the patient, CMHRC should arrange for transportation of the patient.
5. In the event that the patient cannot be immediately removed, the sending LHD will be responsible for any costs incurred by CMHRC to ensure the safety of the TB detention patient and/or other patients and staff at CMHRC.

F. Discharge upon Completion of Therapy, an Expired Health Officer Order or an Expired Court Order

1. The sending LHJ is responsible for:
 - a. notifying CMHRC in advance of the expiration of a detention order,
 - b. determining the need for a court review to extend the detention period,
 - c. ensuring the patient is discharged within 24 hours following completion of therapy or expiration of a legal order for detention, and
 - d. arranging for transportation of the patient back to the sending LHD.

For questions regarding the program agreement and admission of a civil detention patient, contact the CDPH TBCB Civil Detention Coordinator, Jan Young, R.N., M.S.N, Chief, Program Development Section at (510) 620-3029 or jan.young@cdph.ca.gov.

G. Notification by CMHRC Regarding Elopement of a Patient

CMHRC agrees to immediately notify the sending LHD, San Mateo County and CDPH TBCB if a detained patient elopes from the facility.

H. For additional information about the admissions and referral criteria refer to policies 9.1.2 CMHRC 5/9/05 Admissions Criteria (page 8) and 9.1.5 CMHRC 5/23/05 Referral Process (page 11).

IV. Facility Services

A. Contractor agrees to provide services at Cordilleras Mental Health Rehabilitation Center, located at 200 Edmonds Road, Redwood City, CA 94062. Services include, but are not limited to:

1. Room accommodation that includes access to toileting and bathing; staff to assist with activities of daily living (e.g., transfer, dressing) if needed; meals, housekeeping, and laundry; use of a private telephone if telephone participation in a court review is necessary; reasonable accommodation of persons with disabilities.
2. Provision of nursing care for the administration of TB medication by directly observed therapy (DOT). CMHRC staff must observe patient's ingestion of every dose of tuberculosis medication. Missed doses or a patient's refusal to take medication shall be reported to the CMHRC Administrator and the sending LHD within one (1) working day.
3. TB medical management provided by CMHRC in consultation with the sending LHD as follows:
 - a. Monitoring the patient's clinical progress while at CMHRC,
 - b. ordering and performing necessary diagnostic tests,
 - c. adjusting the patient's medication regimen,
 - d. treating co-morbid conditions as necessary, and
 - e. coordinating the discharge of the patient with the sending LHD to ensure continuity of care.
4. Provision of first line anti-TB medications to include, but not limited to, Isoniazid, Rifampin or Rifapentine, Ethambutol, and Pyrazinamide
5. Provision of language interpreters if necessary in accordance with Title VI of the Civil Rights Act of 1964
6. Mental health, substance abuse and spiritual counseling
7. Recreation
8. Visiting privileges
9. Elopement prevention

V. Case Management of TB Patients

- A. The sending LHD has primary responsibility for the case management of the detained TB patient, including:
 1. Monitoring the patient's progress and response to TB treatment (at minimum, on a monthly basis)
 2. Monitoring the need for judicial review; ensuring that court reviews occur in a timely manner and in accordance with statutory requirements; obtaining required paperwork

3. Determining the earliest time for the appropriate release of the patient from detention
4. Preparing a discharge plan in cooperation with the CMHRC social worker and coordinating the discharge plan
5. Arranging for transportation to and from CMHRC, including transportation to and from court reviews as needed
6. Providing medical orders, in writing, to the CMHRC, and coordinating medical care with the attending physician
7. Minimizing the workload of, and expense to, San Mateo County

VI. Court Review

Pursuant to Health and Safety Code §121366, a person under order of detention must be allowed a court review within 60 days of the Health Officer's Order for Detention to authorize the detention. Thereafter, a court review is necessary every 90 days to continue the detention.

The sending LHD will determine whether the TB detention patient will be transported back to the sending LHD to attend the court review or if the patient will participate by telephone. The sending LHD is responsible for expenses associated with the patient's participation in the court review.

POLICY NUMBER 9.1.2 – ADMISSIONS CRITERIA

Policy No.: 9.1.2
Application: CMHRC
Date of Policy: 9-1-99
Date of Revision: 5/9/05

POLICY TITLE: ADMISSIONS CRITERIA

POLICY STATEMENT:

Cordilleras is a 68-bed Mental Health Rehabilitation Center. The program offers evaluation, treatment and psychosocial rehabilitation. The average length of stay is 9 months, though some clients may stay one year or more. Special emphasis is placed on addressing problems that interfered with clients' ability to live in the community. Cordilleras admits persons who are suffering from persistent and severe mental illness and who have had acute hospitalizations. Some have also had hospitalizations at state hospitals. Clients come from contracting counties and the Veterans' Administration. They are referred from acute inpatient units, state hospitals and other hospitals and facilities.

A. Specific Admissions Criteria

1. Age range is 18-65 years of age.
2. Legal status is voluntary, temporary conservatorship, full conservatorship, or Civil Detention (D.O.T. clients only).
3. Referred individuals should have an Axis I diagnosis, using DSM IV criteria (to be worked out on a case by case basis), and require care and rehabilitation in a 24-hour setting.
4. The decision to admit individuals who are potentially dangerous to others and/or to themselves will be based upon clinical assessment, census and staffing. The capacity of the milieu to tolerate any highly disruptive behavior at the particular time will also be considered. Cordilleras retains the right to refuse individuals or delay admissions based on the above.
5. Individuals with past and/or current criminal justice involvement will be specifically and carefully screened. All admissions of criminal justice system individuals require the approval of the Medical Director, Clinical Director, Administrator, Director of Nursing, and the Deputy Director of Mental Health (or designee). Criminal justice system clients include individuals released on their own recognizance (O.R.); placed on probation or parole with mental health treatment conditions; CONREP clients who need brief inpatient services for stabilization and/or placement who are imminently dangerous.

See policies 9.1.3, "Admission Policy for Individuals with Current Criminal Justice Involvement," and policy 9.1.4, "Admission for Individuals on 180-Day Post Certifications.

6. Funding is provided through Medi-Cal and Short-Doyle programs. Medi-Cal should be applied for prior to admission. Private insurance, private pay and other non-governmental third parties may be payment source for a small number of clients.

B. The following individuals will not be acceptable for admission:

1. Individuals whose degree of organicity, dementia or development disability impairs their ability to function even with minimal expectations and those who are unable to manipulate the physical environment.
2. Individuals whose primary diagnosis is substance abuse or antisocial personality disorder.
3. Non-ambulatory individuals and those with serious acute medical problems may be denied admission if the care required is beyond Cordilleras' capabilities.
4. Individuals with an infectious disease for whom proper isolation cannot be provided or who cannot cooperate with needed isolation procedures and restrictions.
5. Individuals with a pronounced history of violent, assaultive and/or destructive behavior that is not the result of a psychotic state.
6. Individuals who are currently engaging in pronounced violent, assaultive and destructive behavior.
7. Individuals requiring drug and alcohol detoxification.
8. Individuals who are bedridden or non-ambulatory.
9. Individuals on any life support system.
10. Individuals on a W&I Code 5150 or 5250 hold.
11. Mentally Disordered Sex Offenders (MDSO's) or individuals with a history of child molestation.

C. Admissions criteria alone may, at times, be insufficient to accurately determine appropriateness for treatment and rehabilitation. Special case-by-case decisions

will be made in consultation with the Medical Director, Clinical Director, Director of Nursing, and the Administrator.

Cordilleras's admission policies take into account our abilities and limitations as well as the service needs of the counties, and when necessary, Cordilleras will try to provide solutions to placement problems.

- D. Cordilleras maintains a policy of equal access to treatment and rehabilitation for all individuals meeting admission criteria. There is no discrimination on basis of race, ethnicity, religion, ancestry, gender, national origin, sexual orientation, or disability. Admission policies will be in compliance with Title IX, Section 784.26.

The program's admissions practices do not discriminate on the basis of source of payment. No third party guarantees or inappropriate assurance by individuals are sought. The Admission Agreement contains explanations of these practices.

- E. Individuals from San Mateo Medical Center will always be considered a priority referral over all other referral sources. Those on "administrative days" status will be treated as "high priority."
- F. Cordilleras MHRC does not maintain a Waiting List. A referral List is in place and is continually updated by Cordilleras and referring facilities.

POLICY NUMBER 9.1.5 – REFERRAL PROCESS

Policy No.: 9.1.5

Application: CMHRC

Date of Policy No.: 9-1-99

Date of Revision: 5/23/05

POLICY TITLE: REFERRAL PROCESS

POLICY STATEMENT:

The Social Services Department of Cordilleras MHRC will screen and evaluate referred individuals from acute care hospitals, state hospitals and other facilities. It is the responsibility of the department to ensure that all admitted clients fall within admission criteria categories and that they are clinically ready for a sub-acute level of care and psychosocial rehabilitation.

PROCEDURE:

A. San Mateo County Referrals

1. All referrals get prior authorization from San Mateo County Resource Management. Designated staff at the referring site provide a completed Referral Fact Sheet, a Psychiatric Admission Summary, a History and Physical, Medication Orders, Progress Notes, Consultation Reports (when indicated), and a Current PPD and/or Chest X-ray to Cordilleras. Usually a telephone contact precedes the Referral Fact Sheet. The Admissions Coordinator or designee reviews the Referral Fact Sheet and attachments and checks for comprehensive, descriptive and accurate information.
2. A referral is considered “official” when Cordilleras has received the completed Referral Packet. The Admissions Coordinator (or designee) reviews the medical record and may assess the individual in person. There may be consultation with the current treatment team and family, if indicated. There may be requests for further medical information or further details of psychiatric or social history. Particular attention is paid to prior and/or current involvement with the criminal justice system. (See P&P 9.1.3). It is imperative to have comprehensive and accurate information.

B. Referrals From Other Counties

1. Procedure is similar to San Mateo County process. Referring facilities will be asked to send referral packets. Cordilleras then may be able to make a decision based on written information. Personal assessments are always highly desirable and recommended; however, at times, distance may make them impractical. Telephone contact with primary therapist, social worker or other treatment staff at the referring facility is used to further consult about clinical readiness for a sub-acute level of care.

C. Veterans' Administration Referrals

1. The treating staff at the V.A. hospital obtains consent for referral and transfer from legal guardian, if indicated. The V.A. social worker in charge of discharge planning contacts Cordilleras and provides a completed Referral Fact Sheet and referral packet. After a review of the referral packet, the individual may be assessed in person.
- D. State Hospital Referrals
1. Referrals for individuals currently at a state hospital are handled in a similar fashion.
- E. Voluntary Referrals
1. Referred individuals who have a voluntary legal status may be asked to tour Cordilleras prior to making a decision to admit them. Family members and significant others of any referred person can call the Admissions Coordinator to arrange for a tour of Cordilleras.
- F. Directly Observed Therapy (D.O.T.) Referrals
1. **For Referring Counties:** Please see Protocol for the Detention of Persistently Non-Adherent Tuberculosis Patients at Cordilleras Mental Health Center, 2005. The referring county will complete the DOT Program Referral Form and include any medical, legal, and psychosocial history available. The client must have an Axis I psychiatric diagnosis. The referring county will complete the Assessment of Signs and Symptoms of Tuberculosis form. Based on the data included in the DOT referral paperwork, additional information may be necessary to make final decisions regarding the pending admission. An interview with the potential DOT patient may be scheduled. Once all data is received from the referring facility/agency, Cordilleras will attempt to make a decision regarding the possibility of admission within 2 to 3 working days. **All** DOT admissions must be clinically non-infectious in accordance with the most recent and up-to-date California Tuberculosis Controllers Association (CTCA) and CDPH Joint Guideline on the assessment of TB patient infectiousness and placement into high and lower risk settings. The county of origin is responsible for providing transportation of the client to and from Cordilleras, including any pertinent court hearings that take place. If it is necessary for the client to spend days away from the facility due to a hearing out of county, the county of origin shall provide lodging.
 2. Cordilleras can put the client on a paid bed-hold for that time period. All DOT admissions must be on Civil Detention within the county of origin. A copy of the civil detention order must accompany the client to Cordilleras.
- G. Community Referrals (San Mateo County)
1. Direct referrals from home or from residential settings will be considered following the approval of San Mateo County Resource Management.

2. Designated staff from the referring outpatient clinic will provide a completed Referral Fact Sheet and referral packet to Cordilleras.
3. The Admissions Coordinator or designee will review the referral form and referral packet, and contact the appropriate referral source for additional information or clarification as needed.
4. The Admissions Coordinator may assess the referred individual in person to determine clinical appropriateness for admission.
5. Cordilleras may require community referrals to be medically cleared at San Mateo Medical Center prior to admission.

H. Approval and Admission Procedures

1. The Admissions Coordinator or Designee discusses all referrals with the Clinical Director. Client referrals will be routinely reviewed for any outstanding medical problems by the D.O.N., A.D.O.N., or Medical Director. In particularly complex cases, the treatment teams, the Director of Nursing, the Medical Director and the Administrator all may be involved. All “criminal justice” admissions require the approval of the Administrator (See P&P 9.1.3).
2. When a decision has been reached to accept a person and a bed is available, a transfer date is confirmed with the referring facility. The referral source is asked to ensure that all paperwork is in order. Also, they may be asked to send a certain amount of medications with the prospective client.
3. The Admissions Coordinator or designee is responsible for informing appropriate staff of the planned admission and communicates this by providing a copy of the Referral Fact Sheet to those individuals. This list includes: Director of Nursing, Assistant Director of Nursing; Floor Registered Unit Managers, Psychiatrist; Internist; Receptionist; Business Office Manager; Transport Worker; and Director of Dietary Services.

All referred individuals are listed in the “Referral Log.” When acceptance is contingent on obtaining additional information, further reductions in symptomatology or bed availability, the individual’s referral is considered “pending.” Individuals who do not fit admission criteria are considered “unacceptable.” The referring facility will be responsible for notifying the client. The Referral Log contains information on each person’s final status. The monthly report of the Social Services Department contains the summarized information of referrals, admissions and discharges.

CONTACTS

Cordilleras Mental Health Rehabilitation Center

200 Edmonds Road
Redwood City, CA 94062
Telephone (650) 367-1890
Fax (650) 369-6465

Administrator

Crystal Hutchinson, MFT
chutchinson@telecarecorp.com

Admissions Coordinator

Open

Clinical Director

Kristen Milliron, LCSW
kmilliron@telecarecorp.com

Director of Nursing Services

Shelli Provost
sprovost@telecarecorp.com

Physician

Grace Hassid, M.D.

County of San Mateo

Cassius Lockett
Director of Public Health, Policy and Planning
225 37th Ave.
San Mateo, CA 94403
Telephone (650)573-2104
Fax (650) 573-2919
clockett@smcgov.org

California Department of Public Health Tuberculosis Control Branch

Jan Young, R.N., M.S.N.
Chief, Program Development Section
850 Marina Bay Parkway, Building P, 2nd Floor
Richmond, CA 94804
Telephone (510) 620-3029
FAX (510) 620-3031
jan.young@cdph.ca.gov

Exhibit B

In consideration of the services provided by Contractor described in Exhibit A and subject to the terms of the Agreement, County shall pay Contractor based on the following fee schedule and terms:

1. CDPH TBCB and the County only authorize payment for services rendered to TB patients who are under a lawful civil detention order or court order pursuant to Health and Safety Code §121365(e) and have prior approval for reimbursement by CDHS TBCB. The maximum daily reimbursement rate per patient is \$273.00.
2. Prior approval by County and CDPH TBCB for admission to CMHRC is required for reimbursement. Reimbursement is dependent on compliance with the policies and procedures included in this Agreement.
3. CMHRC may accept patients from local health jurisdictions other than San Mateo County.
4. CMHRC may admit more than one approved civil detention patient at a time.
5. Reimbursement for additional bed days (beyond 365) may be possible, but must be negotiated in advance with the CDPH TBCB and is dependent on availability of funds, approval of reimbursement for the detention by CDPH TBCB and agreement by CMHRC to accept patient(s).
6. In the event that a patient requires services not described in Section IV, CMHRC may seek reimbursement from the sending LHD. The need for these services must be discussed with the sending LHD before services are rendered.
7. In the event that a civil detention patient requires medical treatment in an acute care or out-patient setting for a condition not related to the diagnosis of tuberculosis, responsibility for reimbursement of such care will become that of the patient, third party insurer, or the sending LHD as required by state or local statute.
8. Not all individual situations can be covered by this agreement. If other issues arise, they will be discussed between San Mateo County, CMHRC, CDPH TBCB and the sending LHD. Examples include medical management of co-morbid conditions or MDR-TB.
9. Use of these funds is subject to the policies and procedures outlined in the Tuberculosis Control Local Assistance Funds, Standards and Procedures Manual, Fiscal Year 2016-17. Requirements for civil detention are described in this manual.

Quarterly invoices shall be sent to: Public Health, Policy and Planning
Attn: Ajay Singh
225 – 37th Avenue, Public Health Accounting
San Mateo, CA 94403

The maximum daily reimbursement rate per patient shall not exceed TWO HUNDRED SEVENTY-THREE DOLLARS (\$273.00).

CMHRC will maintain FIVE HUNDRED FIVE (505) bed days for TB regional civil detention for the period of July 1, 2016 through June 30, 2017.

The total amount of funds paid for all of the services provided for the term of this agreement shall not exceed ONE HUNDRED THIRTY SEVEN THOUSAND EIGHT HUNDRED SIXTY-FIVE DOLLARS (\$137,865).