

**COUNTY OF SISKIYOU
SINGLE CASE AGREEMENT FOR CONTINUITY
OF CARE IN MENTAL HEALTH SERVICES**

This Agreement is made on this _____ day of _____, 2021 by and between County of Siskiyou ("County") and _____, ("Contractor").

This Agreement confirms that Contractor will provide Specialty Mental Health Services for _____ (Client ID) beginning _____ (date).

The parties agree as follows:

- A. Consistent with Federal Continuity of Care requirements for Mental health Plans, Department of Health Care Services MHSUDS Information Notice 18-059, Specialty Mental Health Services shall continue to be provided by Contractor, for a period of time not to exceed twelve (12) months, in order to complete a course of treatment and arrange for safe transfer to another provider as determined by County.
- B. County shall pay Contractor for the following services at the rate indicated below:

| Service Code | Service Description | Rate |
|---------------------|---|-------------|
| 120 | Intensive Care Coordination | \$ |
| 121 | Intensive Home Based Services | \$ |
| 100 | Assessment | \$ |
| 107 | Individual Therapy | \$ |
| 105 | Collateral | \$ |
| 108 | Group Therapy | \$ |
| 109 | Rehab Individual | \$ |
| 110 | Rehab Group | \$ |
| 111 | Plan Development | \$ |
| 113 | Therapeutic Behavioral Services | \$ |
| 114 | Case Management | \$ |
| 104 | Crisis Intervention | \$ |
| 145 | Medication Evaluation (psychiatrist only) | \$ |
| 147 | Medication Management | \$ |

Payment shall not exceed amount appropriated by the Board of Supervisors for such services for the fiscal year.

- C. Contractor shall furnish County with a timely itemized invoice(s) for services provided pursuant to this agreement. The invoice(s) shall include the name of the client served, dates of service, and type of service provided.
- D. This Agreement is not assignable and may be terminated by either party on five days written notice to the other.
- E. It is agreed that this Agreement shall be governed by, construed, and enforced in accordance with the laws of the State of California.

- F. Contractor certifies that is has not been listed by a Federal Agency as debarred, excluded, otherwise ineligible for participation in federally funded health care programs and shall notify County immediately in the event such exclusion takes place.
- G. To the extent permitted by law, Contractor retains professional and administrative responsibility for the services rendered.
- H. Contractor agrees to be subject to the same contractual terms and conditions imposed upon currently contracting network providers, including but not limited to, credentialing, utilization review, and quality assurance.
- I. Contractor agrees to comply with State requirements for Specialty Mental Health Services, including documentation requirements in accordance with County's contract with California Department of Health Care Services.
- J. Contractor shall supply County with all relevant treatment information, for the purposes of determining medical necessity, including documentation of a current assessment, treatment plan, and relevant progress notes.
- K. During the assessment process, individuals are assessed for medical necessity and the appropriate Specialty Mental Health Services through a comprehensive assessment conducted by County which will determine medical necessity, the duration, and types of services needed.
- L. Service authorization occurs after a review of the assessment documentation. Authorized services may include services delivered by County of by contracted service providers, as appropriate to the client's needs. Case management is provided to coordinate care and to facilitate transitions between systems.
- M. The Client Plan includes type, duration, and frequency of needed Specialty Mental Health Services.
- N. Withholding for Non-Resident Contractor: Pursuant to California Revenue and Taxation Code Section 18662, payments made to nonresident independent contractors, including corporations and partnerships that do not have a permanent place of business in this state, are subject to 7 percent state income tax withholding. Withholding is required if the total yearly payments made under this contract exceed \$1,500.00.

Unless the Franchise Tax Board has authorized a reduced rate or waiver of withholding and County is provided evidence of such reduction/waiver, all nonresident contractors will be subject to the withholding. It is the responsibility of the Contractor to submit the Waiver Request (Form 588) to the Franchise Tax Board as soon as possible in order to allow time for the Franchise Tax Board to review the request.

- O. Contractor's Books and Records: Contractor shall maintain any and all ledgers, books of account, invoices, vouchers, canceled checks, and other records or documents evidencing or relating to charges for services or expenditures and disbursements charged to the County for a minimum of five (5) years, or for any longer period required by law, from the date of final payment to the Contractor under this Agreement. Any records or documents required to be maintained shall be made available for inspection, audit and/or copying at any time during regular business hours, upon oral or written request of the County.

P. Termination of Funding: County may terminate this Agreement in any fiscal year in that it is determined there is not sufficient funding. California Constitution Article XVI Section 18.

IN WITNESS WHEREOF, County and Contractor have executed this agreement on the dates set forth below, each signatory represents that he/she has the authority to execute this agreement and to bind the Party on whose behalf his/her execution is made.

County of Siskiyou:

Contractor:

Sarah Collard, Ph.D. (Date)
Health & Human Services Agency Director

Contractor Authorized Signature (Date)

Health & Human Services Agency
Behavioral Health Division
2060 Campus Drive
Yreka, CA 96097
(530) 841-4100 Phone
(530) 841-2790 Fax

Contractor Name
Contractor Address
City, State Zip
Contractor Phone/Fax

Accounting:

| Fund | Org | Account |
|------|--------|---------|
| 2122 | 401030 | 723015 |

Not to exceed: \$0.01 (Rate)