

October 1, 2014

**CENPATIO
PREVENTION SERVICES AGREEMENT
AMENDMENT #2**

This Amendment (Amendment #2) is made and entered into between *Cenpatico Behavioral Health of Arizona, LLC*, *Cenpatico of Arizona, Inc., dba Cenpatico Integrated Care and*

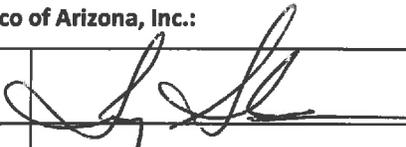
GILA COUNTY HEALTH DEPARTMENT.

It is mutually agreed that the Prevention Services Agreement (Agreement) between the Parties hereto is amended herein to reflect the changes outlined in this Agreement. The Parties hereto have executed this Agreement effective on the first day or the fifteenth day of the month, whichever date immediately follows the date both Parties have signed this Agreement. All other terms and conditions of the original Prevention Services Agreement, except as amended, shall remain in full force and effect.

The parties hereby agree that the original Agreement shall be amended as follows:

- Boilerplate: There are NO changes to the Boilerplate.
- Exhibit A - Scope of Work: This will replace the current Exhibit A.
- Exhibit B: Funding is updated. This will replace the current Exhibit B.
- Exhibit C - Uniform Terms and Conditions: There are NO changes to the Exhibit C.
- Exhibit E – Deliverables: There are several changes to Exhibit E.
- Exhibit F – CLAS Standards: There are NO changes to the Exhibit F.
- Exhibits G, H, I and J are reserved for future use.
- Exhibit K – Business Associate Agreement: There are NO changes to Exhibit K.

Accordingly, the parties hereto execute this Amendment on the day and year specified below.

Cenpatico Behavioral Health of Arizona, LLC:		Gila County Health Department	
By:		By:	
Name:	Terry Stevens	Name:	Michael A. Pastor
Title:	CEO	Title:	Chairman, Board of Supervisors
Date:	12.05.14	Date:	
		Tax ID:	
Cenpatico of Arizona, Inc.:		Gila County Health Department	
By:		By:	
Name:	Terry Stevens	Name:	Bryan Chambers
Title:	President & CEO	Title:	Deputy County Attorney/Civil Bureau Chief
Date:	12.05.14	Date:	

**CENPATICO BEHAVIORAL HEALTH OF ARIZONA, LLC dba CENPATICO INTEGRATED CARE
PREVENTION SERVICES AGREEMENT
SCOPE OF WORK (SOW) / EXHIBIT A
GILA COUNTY HEALTH DEPARTMENT
ORIGINATION DATE: 09/01/2010 REVISED: 10/01/14**

**SCOPE OF WORK – ARTICLE I
PROFESSIONAL REQUIREMENTS AND PROVISIONS**

- 1.1** Subcontractor is required to deliver and agrees to perform the Prevention Behavioral Health Services as set forth in this Scope of Work for the consideration stated within this Agreement. Subcontractor is required to ensure all staff providing services under this Agreement is properly trained, supervised and credentialed for the provision of such services and meet all DBHS requirements to perform said services.
- 1.2** In the event Subcontractor cannot meet a target timeline or provision identified in this scope of work, Subcontractor is required to submit a work plan detailing how and when the target or provision will be met. Once approved by Cenpatico the work plan will be monitored to demonstrate compliance with the scope of work. Failure to achieve target or changes identified in the work plan shall be considered a breach of contract and shall be subject to the non performance terms identified in the Prevention Services Agreement.

**SCOPE OF WORK – ARTICLE II
CONTRACTED SERVICES**

- 2.1** Subcontractor shall provide the following contracted services and target service delivery to non-enrolled persons.
- Substance Abuse Block Grant(SABG) – Prevention

**SCOPE OF WORK – ARTICLE III
GSA's AND COUNTIES SERVED**

- 3.1** Subcontractor agrees to provide services to the behavioral health members who reside or are enrolled in the following GSA's and Counties:
- GSA 4 (Gila)

**SCOPE OF WORK – ARTICLE IV
PROVIDER TYPE**

- 4.1** Agreement requirements are specified based upon provider type. The Subcontractor's applicable provider type(s) is/are listed below.
- Prevention Services Provider

**SCOPE OF WORK – ARTICLE V
PREVENTION REQUIREMENTS**

- 5.1 OVERVIEW**

**CENPATICO BEHAVIORAL HEALTH OF ARIZONA, LLC dba CENPATICO INTEGRATED CARE
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- 5.1.1 Prevention services are designed to promote healthy individuals, families and communities.
- 5.1.2 Prevention targets people who do not have a diagnosable behavioral health problem and who are not enrolled in the behavioral health system.
- 5.1.3 All prevention services must be designed to, at a minimum, address the reduction of substance use. Prevention programs are designed to decrease risk, increase protective factors and target low income populations.
- 5.1.4 Subcontractor is required to provide and make available prevention services to at-risk populations based upon risk and protective factors using evidenced based programs or Cenpatico approved strategies that can be demonstrated through an approved logic model. All prevention services are to demonstrate increased knowledge, skills or changes in behaviors and use Cenpatico approved evaluation instruments. All prevention programs are required to implement the use of core measures, State Outcome Measures (SOMs), where applicable, program specific evaluation tools and any other tools as determined by Cenpatico and/or Cenpatico consultant. All evaluation instruments must be approved by Cenpatico.

5.2 PREVENTION STRATEGIES

- 5.2.1 Cenpatico contracts for Prevention Services based upon identified community needs. Contracted strategies include:
 - Community Based Processes
 - Problem Identification and Referral
 - Public Information and Social Marketing
 - Community Education and Training
 - Life Skills
 - Youth Leadership
 - Peer Leadership
 - Personal and Cultural Development
 - Family Support
 - Environmental Strategies

5.3 PREVENTION REQUIREMENTS

- 5.3.1 Subcontractor is required to provide primary Behavioral Health Prevention Services in compliance with the ADHS/DBHS Prevention Framework for Behavioral Health. Behavioral Health Prevention Services is required to be developed and delivered in accordance to the following requirements:
 - 5.3.1.1 Subcontractors are required to implement prevention programs and services that do not endanger the health, safety, or welfare of persons served.
 - 5.3.1.2 Subcontractor is required to provide services in a respectful, non-exploitive manner that incorporates the cultural competency requirements in service deliver.
 - 5.3.1.3 Subcontractor is required to meet, at minimum, the following safety requirements:
 - Demonstrate documentary evidence that all staff, contractors, volunteers or other person delivering prevention services to persons under the age of 18

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have applied for or received a Class I Fingerprint Clearance card before providing prevention services

- Persons denied a Class I Fingerprint Clearance card shall not provide unsupervised services to youth in prevention programs.

- 5.3.1.4 Subcontractor is required to comply with Provider Manual Section 7.4, *Reporting of Incidents, Accidents and Deaths*.
- 5.3.1.5 Subcontractor is required to demonstrate documentary evidence that at least one staff member is current in First Aid Certification and at least one staff member current in Cardio Pulmonary Resuscitation Certification (CPR) are present at all times on facility premises, on field trips, or while transporting children in a facility's motor vehicle or a vehicle designated to transport children. A staff member with current certification in both first aid and CPR may meet this requirement.
- 5.3.1.6 Subcontractor is required to maintain a current first aid kit accessible to staff members
- 5.3.1.7 Subcontractor is required to prohibit the use or possession of the following items when a prevention program member is on facility premises, during hours of operation, or in any motor vehicle when used for transportation of program members:
- Any beverage containing alcohol
 - A controlled substance; and
 - A firearm or other lethal weapon
- 5.3.1.8 Subcontract is required to demonstrate documentary evidence that the following applicable health and safety inspections take place for any facilities owned, leased, or rented to provide prevention services, according to the following schedules, and make any repairs or corrections stated on an inspection report:
- Sanitation; every twelve (12) months by a local health department
 - Gas inspections; every twelve (12) months by a plumber holding a plumbing business license issued by a local government; and
 - Fire inspections; every thirty-six (36) months by a local fire department or the State Fire Marshal.
- 5.3.1.9 Subcontractor is required to ensure prevention program premises and furnishings to be free from dirt, disease, and odor. Exceptions to requirements for facilities may be made at the discretion of Cenpatico.
- 5.3.1.10 Subcontractor is required to have motor vehicle insurance and a current registration with the Arizona Department of Transportation.
- 5.3.1.11 Subcontractor shall not permit any person to be transported in a truck bed, camper, or trailer attached to a motor vehicle.
- 5.3.1.12 Subcontractor is required to ensure all vehicle passengers use age and size appropriate restraint systems.
- 5.3.1.13 Subcontractor is required to carry a first aid kit, fire extinguisher, and water sufficient for the needs of each passenger.
- 5.3.1.14 Subcontractor is required to carry active, written consent from a parent or guardian for each youth transported.

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- 5.3.2 Subcontractor is required to document and immediately report all suspected alleged cases of abuse, neglect or exploitation to the proper authorities Tribal Social Services, Child Safety and Family Services, and Adult Protective Services or to a local law enforcement agency, as applicable
- 5.3.3 Subcontractor is required to participate in site visits by Cenpatico/ADHS as requested.
- 5.3.4 Subcontractor is required to include in the evaluation, an analysis of process and outcome data. All Cenpatico Prevention Programs must work collaboratively with the assigned Cenpatico Evaluation Consultant and enter data as directed. Prevention providers are required to enter outcome data into the assigned database in accordance with the requirements to the evaluation instrument. Each program must report at least one outcome unless the Subcontractor received written approval from Cenpatico to not complete an outcome evaluation for a specific program.
- 5.3.5 Subcontractor is required to use Cenpatico Evaluation Tools, as well the State Outcomes Measure instruments below to evaluate programs. Other evaluation tools may be required, as identified in approved logic model

Name of Scale	Prevention programs serving the following populations must use this instrument
Adolescent Program Evaluation	Youth in Grade 6 to age 21
Coalition Survey	RBHA designated
Early Identification and Referral Form	Any person who has been referred to behavioral health treatment assessment or other services
Sidewalk, Street Survey, or Community Survey	Community members
Cenpatico Youth Leadership	Youth in Grades 8 to age 21
Life Skills	Youth participants

- 5.3.6 Subcontractor is required to obtain Cenpatico written approval to use additional evaluation tools or measures.
- 5.3.7 Subcontractors are required to submit program evaluations in a format prescribed by Cenpatico.
- 5.3.8 Behavioral Health Prevention Services are data driven and required to be developed and provided based upon behavioral health consequences, local behavioral health trends, key intervening variables, goal driven with measurable objectives and outcomes, culturally proficient best practices, and evaluated, as opposed to individual member needs.
- 5.3.9 Behavioral Health Prevention Services programs are required to be developed following a written comprehensive and collaborative analysis of local data, community assets, and best practices.
- 5.3.10 Behavioral Health Prevention Services programs are required to build upon and support local collaborative community development efforts.

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- 5.3.11 Behavioral Health Prevention Services are required to include robust evaluation efforts to measure the efficacy of the prevention program and the use of core measures for State Outcome Measures (SOM) reporting.
- 5.3.12 Behavioral Health Prevention Services program is required to be limited to primary prevention services and shall not include direct care treatment services, which should be provided through clinical outpatient programs; such as, school-based support groups or “pull out programs” for identified members.
- 5.3.13 Subcontractor shall use environmental strategies to change community norms, perceptions, and knowledge and such strategies are consistent with local norms, practices, and policies.
- 5.3.14 Subcontractor is required to develop and submit the Program Description/Logic Model in conjunction with the local substance abuse coalition and submit any program revisions/changes to Cenpatico for prior approval.
- 5.3.15 Subcontractor is required to evaluate for changes in targeted protective and risk factors using the core evaluation instrument(s), State Outcome Measures and program specific evaluation tools. Program specific evaluation instruments are to be used to measure increased knowledge, changes in behavioral or skills and be consistent with the Logic Model.
- 5.3.16 Subcontractor prevention staff is required to complete the Prevention Profile trainings identified in Essential Learning.
- 5.3.17 Subcontractor is required to submit monthly prevention reports and any other reports/documents as required.
- 5.3.18 Subcontractor is required to implement more than one prevention strategy.
- 5.3.19 Prevention providers are required to enter outcome data into the assigned database in accordance with the requirements to the evaluation instrument.
- 5.3.20 Subcontractor is required to understand any funds not used by the end of the Agreement year (June 30th) in delivery of proposed Covered Behavioral Health Prevention Services will be recouped.
- 5.3.21 Subcontractor is required to use the ADHS active Consent template to gain parental consent for youth to participate in evaluations of school based prevention programs. Subcontractor is required to obtain written, active, parental consent in accordance with A.R.S. § 15-104, to conduct any survey, analysis, or evaluation of students that is administered in a school if it includes questions about substances, suicide, or sexual behavior. Parental consent is not required to participate in the program itself. Subcontractor is required to maintain a locked file of signed Active Parent Consent forms for prevention services and develop a unique identifier. Parental consent is not required to participate in the program.
- 5.3.22 Subcontractor is required to attend the annual prevention conference and other trainings as requested.
- 5.3.23 Prevention professional must complete workforce development requirements as specified for Prevention Credentialing through Arizonans for Prevention and the Framework for Prevention. Trainings shall include:
- Relias Essential Learning Prevention list
 - Annual Cultural Competency
 - Annual Ethics
 - All trainings required for Prevention Credentialing

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- 5.3.24 Subcontractor is required to maintain regularly scheduled supervision sessions and document such sessions in a standardized format that includes, at a minimum, date, duration, subject matter, staff name, supervisor name, and signatures.
- 5.3.25 Prevention providers are required to comply with DBHS Credentialing process requirements and ensure staff is credentialed at least as a Level I Prevention Professional.
- 5.3.26 Subcontractor is required to comply with relevant SABG requirements.
- 5.3.27 Subcontractor is required to comply with all Prevention Training requirements. Annual cultural competency and ethics training is required. First year prevention staff must attend live cultural competency training sponsored by Cenpatico; subsequent years training may be on-line, recorded webinars or live, and shall include:
 - Cultural Competency 101 – Embracing Diversity
 - Prevention Foundations: Part 1 – An Introduction to prevention
 - Prevention Foundations: Part 2 – Models in Prevention
 - Prevention Foundations: Part 3 – Planning in Prevention
 - Prevention Foundations: Part 4 – Middle to Late Adulthood
 - On-Line:
 - Stress Management in the Workplace
- 5.3.28 Provider is to leverage Cenpatico funds through grants, fundraising, in-kind support and/or other measures
- 5.3.29 Staff to participate in monthly provider meetings, as scheduled.
- 5.3.30 All prevention programs are based on local data using best practices. Local needs and assets assessments are conducted at least every three years.
- 5.3.31 Coalition sustainability plans must be developed within the first year and updated at least annually.
- 5.3.32 Needs and asset assessments to be conducted at a minimum every three years.

5.4 PREVENTION SERVICES PERIODIC REPORTING

- 5.4.1 Subcontractor is required to submit an Annual Prevention Plan/Logic Model by April 5th of the year proceeding the State fiscal year in which the plan will be implemented. The plan shall contain three (3) parts; Part 1: Regional Strategic Plan (1 per Program/Community) and Part 2: Program Description; Part 3: Measurable Goals and Objectives submitted in the prescribed format and entered into prescribed database.
- 5.4.2 Subcontractor is required to submit an Annual Prevention Report by August 15th of the year following the State fiscal year in which the previous Annual Prevention Plan was implemented. The plan shall contain four (4) parts; Part 1: Regional Evaluation (1 per Program/Community), Part 2: Evaluation of Workforce Capacity (1 per Program/Community), Part 3: Program Evaluation (1 per Program/Community), Part 4: Evaluation Outcomes and Supplemental Information.
- 5.4.3 Subcontractor is required to submit allegations of attempted suicide, sexual abuse, and death incident report as per Cenpatico Provider Manual.

SCOPE OF WORK – ARTICLE VI

**CENPATICO BEHAVIORAL HEALTH OF ARIZONA, LLC dba CENPATICO INTEGRATED CARE
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PROVIDER SPECIFIC REQUIREMENTS

6.1 OVERVIEW – Prevention Strategies

- 6.1.1 Subcontractor is required to develop and implement environmental strategies to change community norms, perceptions and policies, based on local needs and data, to address perception of harm, youth talking to parents about alcohol and drugs, reduce underage drinking, marijuana access and perception of harm for youth in the Globe/Miami area of Gila County.
- 6.1.2 Planning and implementation must be in collaboration with the local substance use coalition and designed to change community norms, laws and policies. Process and outcome measures must be developed, collected and reported.
- 6.1.3 Multiple strategies are to be provided and may include: public information and social marketing, community education and training, youth leadership, life skills, community based processes and environmental strategies. Strategies and implementation is based on the prevailing local cultures of the targeted populations. Approved evidenced based curriculums and programs shall be used. All programs are to have measurable outcomes.
- 6.1.4 Subcontractor is required to maintain Participation Rosters, Permission Slips and Emergency Cards, coalition roster, sign in sheets, meeting minutes, and agendas. Prevention programs/activities are year round.
- 6.1.5 Documentation is required to be completed on Cenpatico approved documentation forms. Staff supervision shall be documented.
Subcontractor is required to record and report the number of referrals to behavioral health services and to community based services using the Early Identification and Referral Form (EIRF).
- 6.1.6 Prevention staff is required to attend all required trainings and meetings. Membership in Arizonans 4 Prevention and CADCA is required. At a minimum prevention staff shall be credentialed as a Level 1.
- 6.1.7 Cenpatico of Arizona and the Arizona Department of Health Services support shall be acknowledged in training and program announcements/materials.
- 6.1.8 Subcontractor is required to implement the Arizona Department of Health Services/Division of Behavioral Health (ADHS/DBHS) approved Copper Basin logic model
- 6.1.9 Implement a professionally developed public information and social marketing campaign to address the approved logic model.
- 6.1.10 Closely monitors expenditures.
- 6.1.11 Subcontractor is required to contract with a consultant or consultants, approved by Cenpatico for coalition development and sustainability.
- 6.1.12 Subcontractor is required to submit any change to the signatory authorization to Cenpatico, within thirty (30) days of the change.

**CENPATICO
FINANCIAL COMPENSATION
REGIONAL BEHAVIORAL HEALTH AUTHORITY ATTACHMENT - EXHIBIT B
GILA COUNTY HEALTH DEPARTMENT
ORGINATION DATE: 11/01/2013 REVISION DATE: 10/01/2014**

1. OVERVIEW

This Exhibit B to the Regional Behavioral Health Authority Attachment (the "RBHA Attachment") is incorporated into the RBHA Attachment and the Managed Health Services Provider Agreement (the "Agreement"), made and entered into as of October 1, 2014 (the "Effective Date"), by and between Gila County Health Department (referred to herein as "Subcontractor") and Cenpatico Behavioral Health of Arizona, LLC and Cenpatico of Arizona, Inc. dba Cenpatico Integrated Care (each referred to herein as "Cenpatico" and collectively, with Subcontractor, as the "Parties"). This Exhibit B is effective as of the Effective Date. Capitalized terms used but not defined herein shall have the meanings set forth in Exhibit H to the RBHA Attachment.

2. CONTACT MAXIMUM AMOUNT

The Contract limit will not exceed \$62,000 for the contractual year July 1 - June 30), as identified in the Payment Table(s) below. The Maximum amount payable under this contract is specific to "Payment Type" and "Fund Type". Under-delivery in one Payment Type or Fund Type can not be offset by over-delivery in another Payment Type or Fund Type, except as approved by Cenpatico.

2. CONTRACT PAYMENT TABLE

Payment Table / GSA 4 Pinal - Gila Counties

Service Level	County / Community	Program	Payment Type	Budget Term	Total for Budget Term
		Prevention SABG			
Payment Table	Gila/southern Gila County	Prevention SABG	Block Payment - after monthly reporting approval	07/01/2014 - 09/30/2014	8,517
Payment Table	Gila/southern Gila County	Prevention SABG	Block Payment - after monthly reporting approval	10/01/2014- 06/30/2015	53,483
			GSA 4 Total	Prevention SABG	62,000
Grand Total - GSA 4					
			Grand Total	GSA 4	62,000

CENPATICO
SUBCONTRACTOR DELIVERABLES SCHEDULE
REGIONAL BEHAVIORAL HEALTH AUTHORITY ATTACHMENT - EXHIBIT E
GILA COUNTY HEALTH DEPARTMENT
REVISION DATE: 10/01/2014

This Exhibit E to the Regional Behavioral Health Authority Attachment (the "RBHA Attachment") is incorporated into the RBHA Attachment and the Managed Health Services Provider Agreement (the "Agreement"), made and entered into as of October 1, 2014 (the "Effective Date"), by and between Gila County Health Department (referred to herein as "Subcontractor") and Cenpatico Behavioral Health of Arizona, LLC and Cenpatico of Arizona, Inc. (each referred to herein as "Cenpatico" and collectively, with Subcontractor, as the "Parties"). This Exhibit E is effective as of the Effective Date. Capitalized terms used but not defined herein shall have the meanings set forth in Exhibit H to the RBHA Attachment.

Report Frequency: Within 24 Hours, 48 Hours, Weekly, As Requested, or As Applicable

REFERENCE #	REPORTS/FORMS	DUE DATE & WHERE TO SEND
RF-1015	Notification by email or letter of an unexpected material facility change that could impact the Provider Network.	Within one (1) business day of becoming aware of the unexpected change. E-mail cazdeliverables@cenpatico.com
RF-1016	Expected material change that could impact the Provider Network including change of address. Use the Cenpatico 'Notification of Network Change' Form.	At least 75 days prior to the anticipated change that could impact the Provider Network. E-mail cazdeliverables@cenpatico.com
RF-1005	Incidents, Accidents, and Death Report See PM Form 7.4.1	Within 2 business days of the incident E-mail AZQualityManagement@Cenpatico.com
RF-1010	Complaint Resolution Confirmation Response, if applicable.	Within two (2) business days of the request Fax to 866.601.0111
RF-1018	Ad Hoc Reports not listed	Within requested time frame, as specified on the request E-mail/Fax as Directed
RF-FN-405	OMB A-133 Audit	As Requested

Report Frequency: Monthly

REFERENCE #	DELIVERABLE	DUE DATE & WHERE TO SEND
EC-304	Prevention Report using Cenpatico format	15th day after month end E-mail cazdeliverables@cenpatico.com

Report Frequency: Quarterly

REFERENCE #	DELIVERABLE	DUE DATE & WHERE TO SEND
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SUBMIT ALL REPORTS TO THE EMAIL/FAX IN 3RD COLUMN VIA SECURE EMAIL/FAX AND REFERENCE # IN 1ST COLUMN TO ENSURE COMPLIANCE. THIS IS NOT AN ALL INCLUSIVE LIST. PLEASE CONTACT CONTRACTS DEPT. FOR QUESTIONS.

**CENPATICO
SUBCONTRACTOR DELIVERABLES SCHEDULE
REGIONAL BEHAVIORAL HEALTH AUTHORITY ATTACHMENT - EXHIBIT E
GILA COUNTY HEALTH DEPARTMENT
REVISION DATE: 10/01/2014**

ED-101	Year to Date list of employees and contractors that have been checked against the Exclusion Databases, as defined in the RBHA Attachment.	10th day after quarter end E-mail cazdeliverables@cenpatico.com
Report Frequency: Annually		
REFERENCE	DELIVERABLE	DUE DATE & WHERE TO SEND
CD-502	General Liability Insurance, Professional Liability Insurance, Sexual Abuse/Molestation Liability Insurance, Auto Insurance and Workers Comp Insurance with specified limitations	Within 15 days prior to expiration of each policy E-mail cazdeliverables@cenpatico.com
EC-305	Annual Prevention Report for contract year	Submit Notice of Online Submission by August 31st E-mail cazdeliverables@cenpatico.com
EC-306	Submittal of Prevention Program Description/Logic Model	Submit Notice of Online Submission by April 5th E-mail cazdeliverables@cenpatico.com
FN-406	Annual Financial Statement of Expenditures	31st day after fiscal year end E-mail cazdeliverables@cenpatico.com

SUBMIT ALL REPORTS TO THE EMAIL/FAX IN 3RD COLUMN VIA SECURE EMAIL/FAX AND REFERENCE # IN 1ST COLUMN TO ENSURE COMPLIANCE. THIS IS NOT AN ALL INCLUSIVE LIST. PLEASE CONTACT CONTRACTS DEPT. FOR QUESTIONS.