April 4, 2022

SOLICITATION ADDENDUM #1
OPEN SOLICITATION #3648001020
Page 1 of 1 FOR THE PROCUREMENT: for Level III.5 Residential Substance Abuse Treatment Program and/or Level II Intensive Substance Abuse Treatment Program with a Residential Component

THE FOLLOWING CHANGES ARE APPLICABLE TO THE OPEN SOLICITATION:

Change #1
The NOTICE TO VENDORS section is updated to replace the contact information for questions on the application process. Any prospective vendor questions regarding the Open Solicitation process or services to be provided should be emailed to:  
HHS.Open.Solicitations@montgomerycountymd.gov

THERE ARE NO OTHER CHANGES

THE SOLICITATION PROVISION ENTITLED “SOLICITATION ADDENDUM” IS APPLICABLE TO THIS ADDENDUM. THE CHANGES SET FORTH BELOW ARE HEREBY INCORPORATED INTO THE ABOVE-CITED OPEN SOLICITATION

ISSUED BY: Raymond L. Crowel, Psy.D., Director, Department of Health and Human Services
NOTICE TO VENDORS AND MINIMUM QUALIFICATIONS
OPEN SOLICITATION #3648001020
Level III.5 Residential Substance Abuse Treatment Program
AND/OR
Level II Intensive Substance Abuse Treatment Program with a Residential Component

Montgomery County, Maryland ("the County"), through its Department of Health and Human Services (DHHS), is seeking applications from experienced and qualified entities to provide a program(s) of ethnically and culturally relevant intensive substance abuse treatment services. The program(s) encompass a Level III.5 residential program and/or a Level II intensive outpatient program with a residential component for adults with significant criminal histories in a facility or facilities provided by the Contractor. These programs are defined by the American Society of Addiction Medicine Patient Placement Criteria II (ASAM PPC II) and the County will refer clients to the Contractor using these criteria. Approximately 90 percent of referred clients will have significant criminal justice involvement, including pending offenses and will be under a condition of release that stipulates substance abuse treatment. The remaining clients may have involvement with other public safety or social service programs, including, but not limited to, child protective services or domestic violence programs.

The Scope of Services that the County requires under this Open Solicitation is provided in the Approved Form Contract contained within the complete Open Solicitation packet. You may obtain a packet by contacting Dandria Clark, Senior Contract Manager, DHHS, Contract Management Team at 240-777-1251 and providing the Open Solicitation Number, your name or a contact name, your complete address, and your telephone number.

The County has set per diem rates which will supplement the provider’s state-approved rates for the services required under this Open Solicitation. The current County rates can be found in Attachment A of the Approved Form Contract (Scope of Services) along with the conditions under which it will apply.

Questions related to the technical information in this Open Solicitation should be directed to Kathleen Nevin at 240-777-1176.

Questions related to the application/contract process and insurance requirements may be directed to Phil Royston, Supervisor, at 240-777-1333.

The minimum qualifications for this Open Solicitation are as follows:

A. Ability and capacity to provide a Level III.5 American Society of Addiction Medicine Patient Placement Criteria II (ASAM PPC II) Residential Program and/or a Level II Intensive Outpatient Program with a residential component of substance abuse counseling services. These services are needed for adult criminal offenders with significant criminal justice involvement, including pending offenses and who are under a condition of release.

Any prospective vendor questions regarding the Open Solicitation process or services to be provided should be emailed to: HHS.Open.Solicitations@montgomerycountymd.gov
that stipulates substance abuse treatment, or adults who may have involvement with other public safety or social service programs, including, but not limited to, child protective services or domestic violence programs for adult criminal offenders. All clients will be referred by the County.

B. A facility or facilities that meet the federal Americans with Disabilities Act (ADA).

C. Applicants are not limited to providing the intensive phase of treatment within the geographic limits of Montgomery County, Maryland; however, any program site must be accessible via public transportation so that clients can return to Montgomery County and have reasonable visitation from eligible family members. Applicants will not receive preference for proposing to provide services at more than one site.

D. Applicants must provide services to all County-referred clients regardless of a client or family member’s ability to pay a fee for a portion of his or her treatment. Applicants must factor this information into their proposed fee to the client.

E. Applicants must utilize intervention strategies that have been demonstrated to be effective in reducing criminal attitude and behaviors associated with this population, and must be based upon an abstinence orientation.

F. Applicants must be certified by the State of Maryland’s Office of Health Care Quality (or local equivalent) or Joint Commission on Accreditation of Healthcare Organizations (JCAHO) to provide the designated level of care, e.g., Level III.5 or Level II, for its alcohol and drug treatment program or the applicant must have applied for pre-certification review prior to the provision of direct services under a Contract issued under this Open Solicitation.

G. Applicants must use the federal High Intensity Drug Trafficking Area (HIDTA) Automated Tracking System (ATS) or HATS to automate transmission of client records, receive urinalysis lab reports from the Montgomery County laboratory (as applicable), and jointly execute the graduated sanctions program for adults and criminal offenders on probation or diverted from court with the Division of Parole and Probation.

H. Applicants must have the ability and capacity to provide a 24 hour coverage mechanism to ensure that each client’s primary counselor, or another counselor assigned by the
NOTICE TO VENDORS AND MINIMUM QUALIFICATIONS
OPEN SOLICITATION #3648001020
Level III.5 Residential Substance Abuse Treatment Services
AND/OR
Level II Intensive Substance Abuse Treatment with a Residential Component

applicant, is available to respond to clients when a client is in crisis, as determined by the client, and that the counselor has access to the client’s case records.

I. Applicants must submit a plan with the application to achieve retention of up to 70 percent of clients admitted for a minimum of 120 days.

J. Applicants must be panel providers for at least two (2) Managed Care Organizations (MCOs), Health Maintenance Organizations (HMOs), [or] Behavioral Health Organizations (BHOs). For eligible* clients who have a co-occurring mental health disorder, the applicant must be able to access reimbursement for those clients' mental health treatment through AmericanPsych Systems aka M-APS MD.

K. Applicants must maintain caseload statistics via HIDTA Automated Treatment and Tracking System (HATS) and provide monthly performance data in a format to be approved by the County.

L. Depending upon the program(s) the applicant wishes to provide, the applicant must accept the County’s pre-determined rates as set forth in Attachment A of this Open. The County’s rates are designed to supplement the provider’s state-approved rates if the County’s requirements exceed the usual and customary Scope of Services. The County’s rates will remain fixed for any Contract executed as a result of this Open from the date of execution of the contract through June 30, 2009.

M. All applicants must meet the County’s mandatory insurance requirements as outlined in Attachment C of this Open Solicitation and these insurance requirements will be incorporated by reference in the Approved Form Contract. Applicants must provide an insurance certificate(s) in a format acceptable to the County’s Division of Risk Management as proof of insurance.

*Eligibility for these persons includes meeting the following Maryland Department of Health and Mental Hygiene (DHMH) criteria: income below guidelines for Pharmacy Assistance ($838 per month), prior treatment in the public mental health system and/or homeless and/or released from incarceration or a crisis situation due to chronic and persistent mental illness.
INSTRUCTIONS AND APPLICATION FORM

Please fill in the attached Application Form completely, attach all of the required submissions, sign the Approved Form Contract signature page and return all of these documents to:

Department of Health and Human Services
401 Hungerford Drive, First Floor
Rockville, Maryland  20850
Attention: Kathleen Nevin

The County will enter into contract with all applicants who meet the minimum qualifications as described in this Open Solicitation. The County will sign the contract and return a copy to the applicant. The completed Application Form, the Notice to Vendors and Minimum Qualifications, the Approved Form Contract with Attachment A, Supplemental Per Diem Rates, Attachment B, General Conditions, Attachment C, Insurance Requirements, and these instructions constitute the entire contract.

Questions related to the technical information required in this Open Solicitation should be directed to Kathleen Nevin, Coordination at 240-777-1176 or email kathleen.nevin@montgomerycountymd.gov.

Questions of an administrative nature (e.g., requests for additional applications, contract process, and insurance) should be directed to Phil Royston, Contract Management Team, at 240-777-1333 or email philip.royston@montgomerycountymd.gov.

A copy of the County’s General Conditions of Contract between the County and Contractor ("General Conditions") is included with the solicitation packet. The County’s General Conditions will be attached to any contract that results from this Open Solicitation and includes terms and conditions that the County requires of Contractors. You will be asked to sign the County-approved form contract as written, including the General Conditions, and return it to the County for execution by the Office of Procurement. The Contract Management Team will forward a copy of the executed contract along with related materials to you. Once you receive the following from the County, you may proceed to provide services to County-referred clients: (1) notice that your contract has been executed; (2) the executed purchase order for your contract; and (3) referrals of County clients under your Contract.

The County makes no guarantee that any single contractor will receive a minimum number of referrals under a contract resulting from this Open Solicitation.

Award of a contract under this Open Solicitation is subject to fiscal appropriations.

The County reserves the right to cancel this Open Solicitation at any time.
OPEN SOLICITATION #3648001020
Level III.5 Residential Substance Abuse Treatment Services
AND/OR
Level II Intensive Substance Abuse Treatment with a Residential Component

INSTRUCTIONS AND APPLICATION FORM (continued)

Legal Name of Firm: ____________________________________________________________

Primary Contact Name: __________________________________________________________________________________________

Address: ______________________________________________________________________________________________________

City & State: ___________________________ Zip Code: __________________________

Telephone #: ___________ Fax #: ___________ Email: __________________________

Taxpayer Identification # (TIN): __________________________

Please check off one of the following: _____ For-Profit _____ Non-Profit Organization, e.g., 501c (3) or 501c (5) and write in which Type of Non-Profit __________________________

_________________________________________________
Signature of Person Completing this Form

_________________________________________________
Title

_________________________________________________
Date

Submission Documents – You must submit some of the following items with your application; for other items you must provide an indication of status on this form.

A. Indicate mark with an X on each line below which level of Intensive Substance Abuse Treatment that you are applying to provide.

   _____ Level III.5, Intensive Substance Abuse Treatment Residential Service

   AND/OR

   _____ Level II, Intensive Outpatient Substance Abuse Treatment Program with a Residential Component

-2-
B. Please provide complete addresses of all locations where services will be provided and the telephone number(s) for each site. If additional room is needed, please submit this information on additional sheets.

Address:       Telephone Number(s):

__________________________________________  ________________________________

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Address:       Telephone Number(s):

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Address:       Telephone Number(s):

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C. Provide proof that your facility or facilities meet the requirements of the federal Americans with Disabilities Act (ADA).

D. Provide proof that program site(s) is accessible via public transportation so that clients can return to Montgomery County, if the site is outside of Montgomery County, and have reasonable visitation from eligible family members.

E. Indicate Applicant’s proposed fee to the client: _______

F. Provide evidence of the applicant’s intervention strategies that have been demonstrated to be effective with the target populations and are based on an abstinence orientation.
INSTRUCTIONS AND APPLICATION FORM (continued)

G. Applicants must be certified either by: 1) the State of Maryland’s Office of Health Care Quality (OHCQ); 2) the applicant’s local equivalent; or 3) the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) to provide the designated level of care, e.g., Level III.5 or Level II, for its alcohol and drug treatment program. The County will also consider applications from providers who have applied for pre-certification review prior to provision of direct services. Please mark with an X in the appropriate blanks below to show the Applicant’s current status and submit any relevant paperwork, such as a copy of the Applicant’s certification, to support this:

_____ is currently certified by the Maryland OHCQ;

OR

_____ if another state/local certification applies, and what it is: ________________

OR

_____ if the Applicant is certified by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO)

OR

_____ if the Applicant is not currently certified as a Level III.5 or Level II, whether you have started the pre-certification process and when you expect to receive certification.

H. Provide proof that the Applicant has the capability to utilize HATS to automate transmission of client records, receive urinalysis lab reports from the Montgomery County laboratory (as applicable), and jointly execute the graduated sanctions program for adults and criminal offenders on probation or diverted from court with the Division of Parole and Probation.

I. Provide proof that the Applicant has the ability and capacity to provide a 24 hour coverage mechanism to ensure that each client’s primary counselor, or another counselor assigned by the applicant, is available to respond to clients when a client is in crisis, as determined by the client, and that the counselor has access to the client’s case records.

J. Provide a plan to achieve retention of up to 70 percent of clients admitted for a minimum of 120 days.
K. Provide proof that the Applicant has the ability and capacity to bill and collect third party insurance; agency is panel provider for at least two (2) Managed Care Organizations (MCOs) or Health Maintenance Organizations (HMOs) [or] Behavioral Health Organization (BHO) or ability to access reimbursement for eligible clients with co-occurring mental health disorders through AmericanPsych Systems aka M-APS MD.

L. Provide a list naming Program Director, Executive Director, and Senior Clinical Staff who will be providing services under this Contract and their qualifications.

M. Provide required proof of insurance enclosed on a Certificate of Insurance Form(s).

N. **Vendor Signed Contract/Signature Page**
   Please sign the signature page. PLEASE DO NOT PUT A DATE IN THE PARAGRAPH AT THE TOP OF THE PAGE. ONLY ENTER A DATE IN THE SIGNATURE BLOCK.

(remainder of page intentionally blank)
ACORD. CERTIFICATE OF INSURANCE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

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COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

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DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDORSE TO MAIL ____ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

© ACORD CORPORATION 1993

ACORD 25-S (3/93)
Open Solicitation #3648001020
Approved Form Contract
Level III.5 Residential Substance Abuse Treatment Services
AND/OR
Level II Intensive Outpatient Program with a Residential Component

Background/Intent

1. The County requires a Level III.5 (ASAM PPC II) residential service and/or a Level II intensive outpatient program with a residential component (if not located in Montgomery County) of substance abuse counseling services for adult criminal offenders who will be referred by the County. The County requires services for the target population as part of a larger continuum of substance abuse treatment available to qualified Montgomery County residents. The average length of stay for successful clients is anticipated to be six (6) months, although a variable length of stay for a continuum of service may reach 12 months.

2. Some adults with criminal histories may require additional intervention for Axis I psychiatric disorders as defined in *Diagnostic and Statistical Manual of Mental Disorders – IV – TR* (American Psychiatric Association, 2000), including counseling and/or medication management for psychotropic drug therapy.

I. Scope of Services

A. The Contractor must provide a Level III.5 Residential Substance Abuse Treatment Program, or a Level II Intensive Outpatient Program with a Residential Component, as defined by the American Society of Addiction Medicine Patient Placement Criteria II (ASAM PPC II). The Contractor's program must:

1. utilize intervention strategies that have been demonstrated to be effective in reducing criminal attitude and behaviors associated with this population, and are based upon an abstinence orientation (as defined in ASAM PPC II);

2. be available to clients and their family members who are referred by the County; and

3. be certified by the State of Maryland’s Office of Health Care Quality (or local equivalent) or Joint Commission on Accreditation of Healthcare Organizations (JCAHO) to provide the designated level of care for the alcohol and drug treatment program it has applied to provide OR the Contractor must have applied for pre-certification review prior to the provision of direct services under this Contract. If the Contractor is located outside of Maryland, the Contractor must
B. The Contractor must provide its program of services in a facility that is approved by the County and readily accessible to public transportation and must meet the requirements of the federal Americans with Disabilities Act (ADA). The Contractor is not limited to providing the intensive phase of its treatment program in Montgomery County, however, the Contractor’s program site must be accessible by public transportation so that clients can return to Montgomery County and have reasonable visitation from eligible family members.

C. The Contractor must develop, implement, and maintain a written individual treatment plan (ITP) for each client based upon the Contractor’s assessment and evaluation of the client’s needs and upon information about the client provided to the Contractor by the County, or an agency approved by the County. The client's ITP must include individual, group, and/or family counseling and addiction education services that are based upon an abstinence orientation and disease concept of substance abuse (as defined in ASAM PPC II) that are known to be effective in reducing use of alcohol and other drugs and reducing criminal attitudes and behaviors.

D. The Contractor must provide the following minimum levels of service to the clients referred by the County unless an alternative plan is approved in writing by the County for an individual client:

1. an intensive treatment phase of individual, group and family counseling sessions of at least fifteen hours per week during the initial phase of treatment (days 1-90). These services must include a curriculum on substance abuse education and interventions targeted to relapse prevention, developing and sustaining motivation to change, and other techniques demonstrated to be effective in reducing use of alcohol and other drugs and criminal attitudes and behaviors as determined by the client’s individual treatment plan as described in Article I, Paragraph C.

2. a transitional phase of individual, group and family counseling sessions of at least nine hours per week of face-to-face counseling during the second phase of counseling (days 91-150). These services
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must include individual, group, and/or family counseling as determined by the client’s ITP as described in Article I, Paragraph C. Outside employment and supervised community living may, with approval from the County, be considered acceptable during this phase of treatment.

3. a re-entry phase of not more than six (6) months duration during which face-to-face counseling using individual and group modalities occurs at least six (6) hours every month with a focus on relapse prevention, coordinating continuing supervision for criminal charges and a return to community living during the termination phase of counseling (days 150-until discharged) as determined by the client’s ITP. The community-based living situation must be coordinated with and approved by the supervising agency, if applicable, and granted authority by the Court system responsible for supervising the client, if applicable.

E. The Contractor must offer a minimum of six (6) one and a half hour substance abuse education seminars for client’s family members, approved by the County to each client and his or her participating family members during the course of treatment. This requirement is to be completed prior to the Re-entry Phase of the service continuum (before day 150), and is in addition to all other requirements in this Contract. Clients may be waived from this requirement if they have demonstrated a significant hardship or impairment that prevents family members from participating in the course of six (6) family or group counseling sessions. The Contractor’s waiver of this requirement for any client must be approved by the County.

F. Regardless of the Contractor’s service location, urinalysis must occur at least twice per week during the initial and transitional phases of treatment for persons who have unsupervised time in the community. Urinalysis schedules may be adjusted as determined by the client’s individual treatment plan and with approval from the County. Any Contractor who supervises program participants within the County must utilize the County’s Urine Monitoring Program (UMP) and provide referrals for UMP collection services via HIDTA Automated Treatment and Tracking System (HATS). The County will provide staff training on making referrals and accessing UMP results via HATS. Clients will reimburse the laboratory, on a sliding fee schedule, for laboratory services.
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G. The Contractor must coordinate the provision of service to each client with other agencies to whom the County or Contractor refers the client, or with other agencies providing services to the client and/or the family. The Contractor must execute formal agreements with these other service providers in accordance with federal regulations on confidentiality and patient privacy.

H. The Contractor must maintain a written service policy and procedures for the level of service (per ASAM PPC II) under this Open Solicitation that it has applied to provide. Within 30 days of contract execution, the Contractor must submit its service policy and procedures for the substance abuse treatment program provided under this Contract to the County for review and approval. The Contractor must maintain documentation verifying that each administrative and clinical staff member of the program has reviewed a copy of the service policy and procedure within three (3) weeks of employment. The service policy and procedure must include:

1. the objectives of the program to be attained by the provision of counseling services to a substance abusing adult and his or her family;

2. the criteria used to measure clients’ progress toward the attainment of the program objectives; and

3. a description and justification of the counseling modalities utilized by the program within an abstinence orientation and disease concept of substance abuse.

I. The Contractor must develop and implement a written policy and procedure for clients approved by the County that describes its organization and includes:

1. a policy and procedure to coordinate the provision of services with the County; and

2. an organizational chart showing the relationship between and the function of all program staff and administrators.
J. The Contractor must provide annual documentation to the County that the program’s governing authority, Executive Director, clinical staff, and administrative staff have updated and reviewed the program’s policies and procedures for service and organization referenced in Article I, Paragraph I.1-2.

K. The Contractor must develop and implement a written policy and procedure approved by the County for the admission of clients into the program.

L. The Contractor must provide a 24-hour coverage mechanism, approved by the County, to ensure that each client’s primary counselor, or another counselor assigned by the Contractor, is available to respond to a client when a client is in crisis as determined by the client, and that the counselor has access to the client’s case records. A telephone answering machine with no assurance of an immediate response is not acceptable. The Contractor must offer to clients who are in crisis, as determined by the client, same day or next day appointments and provide telephone consultation to families or other service providers.

M. The Contractor must provide a program of education sessions for County-referred clients that incorporates the chronic disease model of addiction for a minimum of nine (9) cumulative hours in addition to providing an intensive counseling program of not more than twenty-six (26) weeks that includes content that has been empirically demonstrated to be effective in the treatment of substance abuse and criminogenic factors. The Contractor must submit a sample treatment week and curriculum guide to the County that includes content for each group session for both the education (9 hours) and on-going (maximum of 26 week) phases of treatment for approval within 90 days of Contract execution.

N. The Contractor must obtain the approval of the County prior to the discharge of a client from the program for noncompliance with the client’s ITP. The Contractor must document and justify the reason for a client’s discharge from the program in the client’s written record.

O. Within six (6) months of execution of this Contract, the Contractor must develop a policy and procedure approved by the County for the transfer or disposition of the Contractor’s caseload of clients referred under this
Contract upon termination of the Contract. The Contractor must implement the policy and procedure for caseload transfer or disposition upon written notice from the County. The Contractor’s caseload transfer or disposition policy must address:

1. the time period for the completion of the transfer or disposition of the Contractor’s caseload;

2. the Contractor’s plan to assure that adequate client services are continued; and

3. the County’s right to review the need of each of the Contractor’s County referred clients for continuing care and financial assistance.

P. The Contractor must provide an intake process and a sufficient number of counseling staff fluent in Spanish to offer this intensive substance abuse treatment program in Spanish, including the ability to read and write in this language, for Spanish speaking clients.

Q. All professional staff who provide counseling services to clients under this Contract must be licensed or certified to practice in Maryland (or local equivalent) under the appropriate Title of the Health Occupations Article (or local equivalent) as required by Code of Maryland Regulation (COMAR) 10.58.019 (or local equivalent). If the Contractor is located outside of Maryland, the Contractor must meet the certification requirements of the state in which it provides services. All providers must meet the caseload standards as set by COMAR.

R. The Contractor must provide the agreed upon level of intensive substance abuse treatment services to all County-referred clients, regardless of a client’s ability to pay for services. No client or family member may be refused such services because of his or her inability to pay.

S. The Contractor must not charge a fee to any client for the initial or intake appointment required to complete the Addiction Severity Index (ASI) and individual treatment plan (ITP).

T. The Contractor must use HATS to automate transmission of client records, receive urinalysis lab reports from the Montgomery County laboratory (as
applicable), and jointly execute the graduated sanctions program for adults and criminal offenders on probation or diverted from court with the Division of Parole and Probation.

U. The Contractor must provide evidence of a system of written records approved by the County prior to the provision of services under this Contract which must comply with the State of Maryland’s Office of Health Care Quality standards (COMAR 10.47.01) or the applicable health care standards of the local equivalent. The Contractor must make available to the County all client records, including specific medical information contained therein, upon request of the County. The Contractor must comply with all relevant portions of the Health Insurance and Portability Accountability Act of 1996 (HIPAA). The Contractor must maintain all or portions of records in an automated format via HATS.

V. The Contractor must maintain caseload statistics via HATS and provide monthly performance data in a format to be provided by the County.

W. The Contractor must submit a monthly client fee report in a format approved by the County including a delineation of services billed to and payments received from third party reimbursements.

X. The Contractor must submit a plan for implementing a client satisfaction survey, subject to County approval, as part of an overall plan for Continuous Quality Improvement within 90 days of Contract execution.

Y. The Contractor must participate in an annual evaluation component sponsored by the Washington Baltimore (W/B) HIDTA for eligible offenders/clients whose participation in service is fully or partially funded by HIDTA through a grant to the County. The primary mechanism for obtaining data for quantitative analysis is through information available in HATS. If qualitative information is being sought, the Contractor’s program will be asked to assist W/B HIDTA in locating current and/or former clients.
II. COMPENSATION

A. The County has established per diem rates for providers who have applied to provide services under this Contract. The County will pay the Contractor for those portions of the services it provides under this Contract that are not covered by client fees, Medical Payments, or third party reimbursements, up to the maximum amount for the level of service the Contractor applied to provide and according to each client’s phase of treatment using the rates shown in Attachment A. The County’s rates for this Contract will remain fixed through June 30, 2009, as provided in Article III, Price Adjustments. Any compensation from the County is contingent upon the appropriation and encumbrance of the funds necessary for this compensation.

B. The Contractor’s compensation from the County for the services it provides to a County-referred client under this Contract is not to exceed the Contractor's per diem rate as approved by its state or local jurisdiction for the level of services needed by the client and accepted by the County by its approval of the client's ITP and provided to the client by the Contractor, e.g., Level III.5 or Level II, minus amounts the Contractor collects from various non-County sources (such as client fees, Medical Assistance, third party reimbursements). In any case, no compensation will be paid by the County to the Contractor without an executed purchase order issued by the Director, Office of Procurement, for services provided under this Contract.

III. PRICE ADJUSTMENTS

Prices quoted are firm for a period of two years after execution of this Contract. Any request for a price adjustment, after this two-year period is subject to the following:

A. approval or rejection by the Director, Office of Procurement, or designee;

B. the request for a price adjustment must be submitted in writing to the Director, Office of Procurement, and accompanied by supporting documentation justifying the Contractor’s request. A request for any price adjustment may not be approved unless the Contractor submits to the County sufficient justification to support that the Contractor’s request is based on its net increase in costs in delivering the goods or services under this Contract.

C. the price adjustment request must be submitted sixty (60) days prior to this Contract’s expiration date, if this Contract is being amended;
Open Solicitation #3648001020
Approved Form Contract

Level III.5 Residential Substance Abuse Treatment Services
AND/OR
Level II Intensive Outpatient Program with a Residential Component

D. The request may not be approved which exceeds the amount of the annual percentage change of the Consumer Price Index (CPI) for the twelve-month period immediately prior to the date of the request. The request shall be based upon the CPI for all urban consumers issued for the Washington-Baltimore, DC-MD-VA-WV Metropolitan area by the United States Department of Labor, Bureau of Labor Statistics for ALL ITEMS.

E. The County will approve only one price adjustment for each contract term, if a price adjustment is approved.

F. If it is approved, the adjustment should be effective sixty (60) days from the date of receipt of the Contractor’s request; and

G. The price adjustment must be executed by written contract amendment.

IV. FEE COLLECTIONS AND REPORTING

A. The Contractor must establish and maintain a schedule of fees and a method of charging and collecting fees from clients which are subject to County approval. The Contractor must charge and collect fees from clients or third-party payors for services that are billable mental health or substance abuse counseling services. The Contractor must bill the applicable Managed Care Organization (MCO), Health Maintenance Organization (HMO), [or] Behavioral Health Organization (BHO), or AmericanPsych Systems aka M-APS MD for services that are eligible for reimbursement on behalf of each client who is eligible.

B. The Contractor will retain all fees collected from or on behalf of clients. The Contractor must credit fees to the County against the invoice in the month that the fees are received. Any fees that the Contractor collects which are received after the close of the County’s fiscal year (July 1st - June 30th) for services provided during the County’s fiscal year, must be credited and reconciled to the fiscal year in which services were provided. The Contractor must provide this information in a report to the County within 60 days of the end of the County’s fiscal year.

C. The Contractor must ensure that clients, who are eligible for billable mental health or substance abuse services, are registered as service recipients with AmericanPsych Systems aka M-APS MD, and that invoices for billable services are submitted in a timely manner for collection of payments from this entity, and every reasonable effort is made to collect those payments.
D. The Contractor must submit to the County a monthly client fee report delineating fees collected from clients, billings made to third party payors and payments collected from those payors.

V. INVOICES

The Contractor must submit invoices to the County, in a format approved by the County, within 30 days after the close of each month. The Contractor must submit an invoice format for the approved per diem rate to the County for review and approval within 30 days of execution of this Contract. The Contractor’s monthly invoices, in the approved format, must be sent to the County’s assigned Contract Monitor, Addiction Coordination Services and include an invoice number, purchase order number, fees collected, and client information.

VI. TERM

This Contract shall become effective upon signature by the County’s Director, Office of Procurement, and shall be for a two-year term. Before the contract term ends, and subject to fiscal appropriations, the Director may (but is not required to) renew this Contract, if the Director determines that renewal is in the best interests of the County. Contractor’s satisfactory performance does not guarantee renewal of this Contract. The County shall have the option to extend this Contract for two (2) additional two-year terms. Additional two-year terms must be with the written consent of the Contractor.

VII. GENERAL CONDITIONS

The County’s General Conditions of Contract Between County and Contractor (Attachment B) are incorporated by reference and made part of this Contract. The insurance requirements outlined in Attachment C supersede those outlined in the General Conditions.
Open Solicitation #3648001020
Approved Form Contract
Level III.5 Residential Substance Abuse Treatment Services
AND/OR
Level II Intensive Outpatient Program with a Residential Component

VIII. PRIORITY OF DOCUMENTS

The following documents are incorporated by reference into and made part of this contract and are listed in order of legal precedence below in the event of a conflict in their terms:

A. This Contract document;
B. The County’s General Conditions of Contract Between County & Contractor (Attachment B);

Attachments
Attachment A – Supplemental Per Diem Rates
Attachment B - County’s General Conditions of Contract Between County & Contractor
Attachment C – Mandatory Insurance Requirements

[SIGNATURE PAGE FOLLOWS]
This Contract which incorporates by reference the Instructions, completed Application Form, the Notice to Vendors and Minimum Qualifications, the Approved Form Contract with attached General Conditions of Contract Between County and Contractor, and other attachments, copies of which have been provided to the Contractor, is entered into this ______ day of ____________, 20______ by and between ______ ______________________ (the “Contractor”) and Montgomery County, Maryland (the “County”). This Contract will become effective on the date of signature by the Director, Office of Procurement. This Contract and any renewals or extensions of this Contract are subject to the appropriation of funds.

Part A: Contractor's Offer to Provide Services:

(Prospective Contractor Must Complete)

Contracting Corporation, Partnership Limited Liability Company OR Proprietorship

Agency Name

________________________________________

Signature

________________________________________

Typed

________________________________________

Title

________________________________________

Date

Part B: County Acceptance:

MONTGOMERY COUNTY, MARYLAND

________________________________________

Cherri Branson, Director
Office of Procurement

________________________________________

Date

RECOMMENDATION

________________________________________

Uma S. Ahluwalia, Director
Department of Health and Human Services

________________________________________

Date

This form has been approved as to form and legality by the Office of the County Attorney.
Each provider should already have a state-approved per diem rate for the Level of Care it has applied to provide. As provided for in the Approved Form Contract, the County will pay the Contractor a supplemental per diem rate per client for services rendered if the County’s requirements exceed the usual and customary Scope of Service. If the provider’s approved per diem rate(s) is higher than any of the rates shown below, then the County will pay the provider’s approved per diem rate(s) if the provider is able to demonstrate to the County’s that the scope of services offered exceeds the requirements stated in Article I. Scope of Services. For supplemental services, such as psychiatric evaluation and medication management, the provider must demonstrate to the County’s satisfaction that third party payments have been diligently pursued on behalf of the client, and collected to offset the cost of the client’s treatment. However, the County reserves the option of paying the lower of the rates shown if the County determines that the client’s treatment has been less intense than stipulated by the requirements stated in Article I. Scope of Services and the client’s treatment plan (ITP) as [and] approved by the County and/or if the provider has not taken reasonable steps, in the opinion of the County, to bill and collect third party payments on behalf of the client. The per diem rates shown below vary based on the client's phase of treatment, intensity of service offered, and the client’s ability to contribute to the cost of his/her care.

The County’s pre-determined supplemental per diem rates for these services are as follows:

Initial Phase (night 1-90 minimum) – Based on documentation of usual and customary treatment interventions and residential care, comparable to the requirements stated in Article I. Scope of Service, compensation will range from a minimum of $74 to a maximum of $91 for each night of service for the most intensive component of substance abuse treatment and residential services.

Transitional Phase (night 91-150, any extension beyond 150 days is based on ITP and must be approved in advance by the designated County authority) – Based on documentation of usual and customary treatment interventions and residential care, comparable to the requirements stated in Article I. Scope of Service, compensation will range from $55 to a maximum of $91 for each night of service for a reduced (step-down) intensity of substance abuse treatment and residential services likely to include full- or part-time employment.

Re-entry Phase (night 151-termination, based on ITP) during which the client/offender will be employed and experience a reduced level of supervision and intensity of substance abuse treatment with support to engage in Level I (Outpatient) treatment and 12 Step recovery and be compliant with conditions of the Court or its Agent – re-entry services will be provided at no cost by the provider or at a documented usual and customary rate known to be applicable for the Scope of Service the provider offers.

Medication Management or Psychiatric Evaluation

1. For those persons who are eligible under the Maryland Public Mental Health System (PMHS) through the State of Maryland’s Administrative Services Organization (ASO), the Contractor must pursue payment through AmericanPsych Systems aka M-APS MD.
2. For those persons who are not eligible under the PMHS, the County will pay the Contractor at the following rates, provided the Contractor submits to the County prior to the provision of services, a plan for medication management or psychiatric evaluation for each client who requires these services for the County’s review and approval:

   a. the County will reimburse the Contractor for the provision medication management, CPT code 90805, at a rate of $65 for a 15-30 minute medication management session; and/or

   b. The County will reimburse the Contractor for the provision of psychiatric evaluation, CPT code 90802, at a rate of $100 per 45-60 minute session.
GENERAL CONDITIONS OF CONTRACT BETWEEN COUNTY & CONTRACTOR

1. ACCOUNTING SYSTEM AND AUDIT, ACCURATE INFORMATION
The contractor certifies that all information the contractor has provided or will provide to the County is true and correct and can be relied upon by the County in awarding, modifying, making payments, or taking any other action with respect to this contract including resolving claims and disputes. Any false or misleading information is a ground for the County to terminate this contract for cause and to pursue any other appropriate remedy. The contractor certifies that the contractor's accounting system conforms with generally accepted accounting principles, is sufficient to comply with the contract's budgetary and financial obligations, and is sufficient to produce reliable financial information.

The County may examine the contractor's and any first-tier subcontractor's records to determine and verify compliance with the contract and to resolve or decide any claim or dispute arising under this contract. The contractor and any first-tier subcontractor must grant the County access to these records at all reasonable times during the contract term and for 3 years after final payment. If the contract is supported to any extent with federal or state funds, the appropriate federal or state authorities may also examine these records. The contractor must include the preceding language of this paragraph in all first-tier subcontracts.

2. AMERICANS WITH DISABILITIES ACT

3. APPLICABLE LAWS
This contract must be construed in accordance with the laws and regulations of Maryland and Montgomery County. The Montgomery County Procurement Regulations are incorporated by reference into, and made a part of, this contract. In the case of any inconsistency between this contract and the Procurement Regulations, the Procurement Regulations govern. The contractor must, without additional cost to the County, pay any necessary fees and charges, obtain any necessary licenses and permits, and comply with applicable federal, state and local laws, codes and regulations. For purposes of litigation involving this contract, except for contract Disputes discussed in paragraph 8 below, exclusive venue and jurisdiction must be in the Circuit Court for Montgomery County, Maryland or in the District Court of Maryland for Montgomery County.

The prevailing wage law (County Code §11B-33C) applies to construction contracts. Specifically, under County law, a County financed construction contract is subject to the Montgomery County Code regarding compliance with the prevailing wage paid to construction workers, as established for the County by the Maryland State Commissioner of Labor and Industry. Additional information regarding the County’s prevailing wage requirements is contained within this solicitation/contract (see the provision entitled “Prevailing Wage Requirements for Construction Contract Addendum to the General Conditions of Contract between County and Contractor”).

Furthermore, certain non-profit and governmental entities may purchase supplies and services, similar in scope of work and compensation amounts provided for in a County contract, using their own contract and procurement laws and regulations, pursuant to the Md. State Finance and Procurement Article, Section 13-101, et seq.

Contractor and all of its subcontractors must comply with the provisions of County Code §11B-35A and must not retaliate against a covered employee who discloses an illegal or improper action described in §11B-35A. Furthermore, an aggrieved covered employee under §11B-35A is a third-party beneficiary under this Contract, who may by civil action recover compensatory damages including interest and reasonable attorney’s fees, against the contractor or one of its subcontractors for retaliation in violation of §11B-35A. An aggrieved employee, is a third-party beneficiary who may, by civil action, recover the cash equivalent of any benefit denied in violation of §11B-33D or other compensable damages.

The contractor agrees to comply with the requirements of the Displaced Service Workers Protection Act, which appears in County Code, Chapter 27, Human Rights and Civil Liberties, Article X, Displaced Service Workers Protection Act, §§ 27-64 through 27-66.

4. ASSIGNMENTS AND SUBCONTRACTS
The contractor must not assign or transfer this contract, any interest herein or any claim hereunder, except as expressly authorized in writing by the Director, Office of Procurement. Unless performance is separately and expressly waived in writing by the Director, Office of Procurement, an assignment does not release the contractor from responsibility for performance of this contract. Unless otherwise provided in the contract, the contractor may not contract with any other party for furnishing any of the materials or services herein contracted for without the written approval of the Director, Office of Procurement. Any subcontract for any work hereunder must comport with the terms of this Contract and County law, and must include any other terms and conditions that the County deems necessary to protect its interests.

5. CHANGES
The Director, Office of Procurement, may unilaterally change the work, materials and services to be performed. The change must be in writing and within the general scope of the contract. The contract will be modified to reflect any time or money adjustment the contractor is entitled to receive. Contractor must bring to the Contract Administrator, in writing, any claim about an adjustment in time or money resulting from a change, within 30 days from the date the Director, Office of Procurement, issued the change in work, or the claim is waived. Any failure to agree upon a time or money adjustment must be resolved under the “Disputes” clause of this contract. The contractor must proceed with the prosecution of the work as changed, even if there is an unresolved claim. No charge for any extra work, time or material will be allowed, except as provided in this section.

6. CONTRACT ADMINISTRATION
A. The contract administrator, subject to paragraph B below, is the Department representative designated by the Director, Office of Procurement, in writing and is authorized to:
   (1) serve as liaison between the County and the contractor;
   (2) give direction to the contractor to ensure satisfactory and complete performance;
   (3) monitor and inspect the contractor's performance to ensure acceptable timeliness and quality;
   (4) serve as records custodian for this contract, including wage and prevailing wage requirements;
   (5) accept or reject the contractor's performance;
   (6) furnish timely written notice of the contractor's performance failures to the Director, Office of Procurement, and to the County Attorney, as appropriate;
   (7) prepare required reports;
   (8) approve or reject invoices for payment;
   (9) recommend contract modifications or terminations to the Director, Office of Procurement;
   (10) issue notices to proceed; and
   (11) monitor and verify compliance with any MFD Performance Plan.
B. The contract administrator is NOT authorized to make determinations (as opposed to recommendations) that alter, modify, terminate or cancel the contract, interpret ambiguities in contract language, or waive the County's contractual rights.

7. COST & PRICING DATA
Chapter 11B of the County Code and the Montgomery County Procurement Regulations require that cost & pricing data be obtained from proposed awardees/contractors in certain situations. The contractor guarantees that any cost & pricing data provided to the County will be accurate and complete. The contractor grants the Director, Office of Procurement, access to all books, records, documents, and other supporting data in order to permit adequate evaluation of the contractor's proposed price(s). The contractor also agrees that the price to the County, including profit or fee, may, at the option of the County, be reduced to the extent that the price was based on inaccurate, incomplete, or noncurrent data supplied by the contractor.

8. DISPUTES
Any dispute arising under this contract that is not disposed of by agreement must be decided under the Montgomery County Code and the Montgomery County Procurement Regulations. Pending final resolution of a dispute, the Contractor must proceed diligently with contract performance. Subject to subsequent revocation or alteration by the Director, Office of Procurement, the head of the County department, office or agency ("Department Head") of the contract administrator is the designee of the Director, Office of Procurement, for the purpose of dispute resolution. The Department Head, or his/her designee, must forward to the Director, Office of Procurement, a copy of any written resolution of a dispute. The Department Head may delegate this responsibility to another person (other than the contract administrator). A contractor must notify the contract administrator of a claim in writing, and must attempt to resolve a claim with the contract administrator prior to filing a dispute with the Director, Office of Procurement or designee. The contractor waives any dispute or claim not made in writing and received by the Director, Office of Procurement, within 30 days of the event giving rise to the dispute or claim, whether or not the contract administrator has responded to a written notice of claim or resolved the claim. The Director, Office of Procurement, must dismiss a dispute that is not timely filed. A dispute must be in writing, for specific relief, and any requested relief must be fully supported by affidavit of all relevant calculations, including cost and pricing information, records, and other information. At the County's option, the contractor agrees to be made a party to any related dispute involving another contractor.

9. DOCUMENTS, MATERIALS AND DATA
All documents, materials or data developed as a result of this contract are the County's property. The County has the right to use and reproduce any documents, materials, and data, including confidential information, used in the performance of, or developed as a result of, this contract. The County may use this information for its own purposes, including reporting to state and federal agencies. The contractor warrants that it has title to or right of use of all documents, materials or data used or developed in connection with this contract. The contractor must keep confidential all documents, materials, and data prepared or developed by the contractor or supplied by the County.

10. DURATION OF OBLIGATION
The contractor agrees that all of contractor's obligations and warranties, including all requirements imposed by the Minority Owned Business Addendum to these General Conditions, if any, which directly or indirectly are intended by their nature or by implication to survive contractor performance, do survive the completion of performance, termination for default, termination for convenience, or termination by mutual consent of the contract.

11. ENTIRE AGREEMENT
There are no promises, terms, conditions, or obligations other than those contained in this contract. This contract supersedes all communications, representations, or agreements, either verbal or written, between the parties hereeto, with the exception of express warranties given to induce the County to enter into the contract.

12. ETHICS REQUIREMENTS/POLITICAL CONTRIBUTIONS
The contractor must comply with the ethics provisions contained in Chapters 11B and 19A, Montgomery County Code, which include the following:

(a) a prohibition against making or offering to make certain gifts. Section 11B-51(a).
(b) a prohibition against kickbacks. Section 11B-51(b).
(c) a prohibition against a person engaged in a procurement from employing or offering to employ a public employee. Section 11B-52 (a).
(d) a prohibition against a contractor that is providing a recommendation to the County from assisting another party or seeking to obtain an economic benefit beyond payment under the contract. Section 11B-52 (b).
(e) a restriction on the use of confidential information obtained in performing a contract. Section 11B-52 (c).
(f) a prohibition against contingent fees. Section 11B-53.

Furthermore, the contractor specifically agrees to comply with Sections 11B-51, 11B-52, 11B-53, 19A-12, and/or 19A-13 of the Montgomery County Code. In addition, the contractor must comply with the political contribution reporting requirements currently codified under the Election Law at Md. Code Ann., Title 14.

13. GUARANTEE
A. Contractor guarantees for one year from acceptance, or for a longer period that is otherwise expressly stated in the County’s written solicitation, all goods, services, and construction offered, including those used in the course of providing the goods, services, and/or construction. This includes a guarantee that all products offered (or used in the installation of those products) carry a guarantee against any and all defects for a minimum period of one year from acceptance, or for a longer period stated in the County’s written solicitation. The contractor must correct any and all defects in material and/or workmanship that may appear during the guarantee period, or any defects that occur within one (1) year of acceptance even if discovered more than one (1) year after acceptance, by repairing, (or replacing with new items or new materials, if necessary) any such defect at no cost to the County and to the County’s satisfaction.

B. Should a manufacturer's or service provider's warranty or guarantee exceed the requirements stated above, that guarantee or warranty will be the primary one used in the case of defect. Copies of manufacturer's or service provider’s warranties must be provided upon request.

C. All warranties and guarantees must be in effect from the date of acceptance by the County of the goods, services, or construction.

D. The contractor guarantees that all work shall be accomplished in a workmanlike manner, and the contractor must observe and comply with all Federal, State, County and local laws, ordinances and regulations in providing the goods, and performing the services or construction.

E. Goods and materials provided under this contract must be of first quality, latest model and of current manufacture, and must not be of such age or so deteriorated as to impair their usefulness or safety. Items that are used, rebuilt, or demonstrator models are unacceptable, unless specifically requested by the County in the Specifications.
14. IMMIGRATION REFORM AND CONTROL ACT

The contractor must comply with these laws and must provide the County with copies of all relevant documents, including Material Safety Data Sheets, prior to performance of work or contemporaneous with delivery of goods.

15. HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) COMPLIANCE

In addition to the provisions stated above in Section 3, "Applicable Laws," contractor must comply with all requirements in the federal Health Insurance Portability and Accountability Act (HIPAA), to the extent that HIPAA is applicable to this contract. Furthermore, contractor must enter into the County’s standard Business Associate Agreement or Qualified Service Organization Agreement when contractor or the County, as part of this contract, may use or disclose to one another, to the individual whose health information is at issue, or to a third-party, any protected health information that is obtained from, provided to, made available to, or created by, or for, the contractor or the County.

16. IMMIGRATION REFORM AND CONTROL ACT

The contractor warrants that both the contractor and its subcontractors do not, and shall not, hire, recruit or refer for a fee, for employment under this contract or any subcontract, an alien while knowing the alien is an unauthorized alien, or any individual without complying with the requirements of the federal Immigration and Nationality laws, including any verification and record keeping requirements. The contractor further assures the County that, in accordance with those laws, it does not, and will not, discriminate against an individual with respect to hiring, recruitment, or referral for a fee, of an individual for employment or the discharge of an individual from employment, because of the individual’s national origin or, in the case of a citizen or prospective citizen, because of the individual’s citizenship status.

17. INCONSISTENT PROVISIONS

Notwithstanding any provisions to the contrary in any contract terms or conditions supplied by the contractor, this General Conditions of Contract document supersedes the contractor's terms and conditions, in the event of any inconsistency.

18. INDEMNIFICATION

The contractor is responsible for any loss, personal injury, death and any other damage (including incidental and consequential) that may be done or suffered by reason of the contractor's negligence or failure to perform any contractual obligations. The contractor must indemnify and save the County harmless from any loss, cost, damage and other expenses, including attorney's fees and litigation expenses, suffered or incurred due to the contractor's negligence or failure to perform any of its contractual obligations. If requested by the County, the contractor must defend the County in any action or suit brought against the County arising out of the contractor's negligence, errors, acts or omissions under this contract. The negligence of any agent, subcontractor or employee of the contractor is deemed to be the negligence of the contractor. For the purposes of this paragraph, County includes its boards, agencies, agents, officials and employees.

19. INDEPENDENT CONTRACTOR

The contractor is an independent contractor. The contractor and the contractor's employees or agents are not agents of the County.

20. INSPECTIONS

The County has the right to monitor, inspect and evaluate or test all supplies, goods, services, or construction called for by the contract at all reasonable places (including the contractor's place of business) and times (including the period of preparation or manufacture).

21. INSURANCE

Prior to contract execution by the County, the proposed awardee/contractor must obtain at its own cost and expense the insurance specified in the applicable table (See Tables A and B) or attachment to these General Conditions, with one or more insurance company(s) licensed or qualified to do business in the State of Maryland and acceptable to the County’s Division of Risk Management. The contractor must keep this insurance in full force and effect during the term of this contract, including all extensions. Unless expressly provided otherwise, Table A is applicable to this contract. The insurance must be evidenced by one or more Certificate(s) of Insurance and, if requested by the County, the proposed awardee/contractor must provide a copy of any and all insurance policies to the County. At a minimum, the proposed awardee/contractor must submit to the Director, Office of Procurement, one or more Certificate(s) of Insurance prior to award of this contract, and prior to any contract modification extending the term of the contract, as evidence of compliance with this provision. The contractor’s insurance must be primary. Montgomery County, MD, including its officials, employees, agents, boards, and agencies, must be named as an additional insured on all liability policies. Thirty days written notice to the County of cancellation or material change in any of the policies is required, unless a longer period is required by applicable law. In no event may the insurance coverage be less than that shown on the applicable table, attachment, or contract provision for required insurance. The Director, Office of Procurement, may waive the requirements of this section, in whole or in part.
### TABLE A - INSURANCE REQUIREMENTS

(See Paragraph #21 Under the General Conditions of Contract Between County and Contractor)

#### CONTRACT DOLLAR VALUES (IN $1,000’s)

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<th>Coverage Type</th>
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<th>Up to 100</th>
<th>Up to 1,000</th>
<th>Over 1,000</th>
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<td>Workers Compensation (for contractors with employees)</td>
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<td></td>
<td></td>
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<tr>
<td>Bodily Injury by Accident (each)</td>
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</tr>
<tr>
<td>Disease (policy limits)</td>
<td>500</td>
<td>500</td>
<td>500</td>
<td>Attachment</td>
</tr>
<tr>
<td>Disease (each employee)</td>
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<td>100</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>Commercial General Liability</td>
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<td>500</td>
<td>1,000</td>
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<tr>
<td>Minimum Automobile Liability</td>
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<td></td>
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<tr>
<td>Bodily Injury</td>
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<td>each person</td>
<td>100</td>
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</tr>
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<td>each occurrence</td>
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<td>1,000</td>
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<td>Property Damage</td>
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<tr>
<td>each occurrence</td>
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</tr>
</tbody>
</table>

**Certificate Holder**
Montgomery County Maryland (Contract #)
Office of Procurement
Rockville Center
255 Rockville Pike, Suite 180
Rockville, Maryland 20850-4166

*Professional services contracts only

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### TABLE B. - INSURANCE REQUIREMENTS
(See Paragraph #21 Under the General Conditions of Contract Between County and Contractor)

<table>
<thead>
<tr>
<th></th>
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<th>Up to 100</th>
<th>Up to 1,000</th>
<th>Over 1,000</th>
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</thead>
<tbody>
<tr>
<td>Commercial General Liability minimum combined single limit for bodily injury and property damage per occurrence, including contractual liability, premises and operations, independent contractors, and product liability</td>
<td>300</td>
<td>500</td>
<td>1,000</td>
<td>See Attachment</td>
</tr>
</tbody>
</table>

**Certificate Holder**
Montgomery County Maryland (Contract #)
Office of Procurement
Rockville Center
255 Rockville Pike, Suite 180
Rockville, Maryland 20850-4166

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22. INTELLECTUAL PROPERTY APPROVAL AND INDEMNIFICATION - INFRINGEMENT
If contractor will be preparing, displaying, publicly performing, reproducing, or otherwise using, in any manner or form, any information, document, or material that is subject to a copyright, trademark, patent, or other property or privacy right, then contractor must: obtain all necessary licenses, authorizations, and approvals related to its use; include the County in any approval, authorization, or license related to its use; and indemnify and hold harmless the County related to contractor’s alleged infringing or otherwise improper or unauthorized use. Accordingly, the contractor must protect, indemnify, and hold harmless the County from and against all liabilities, actions, damages, claims, demands, judgments, losses, costs, expenses, suits, or actions, and attorneys’ fees and the costs of the defense of the County, in any suit, including appeals, based upon or arising out of any allegation of infringement, violation, unauthorized use, or conversion of any patent, copyright, trademark or trade name, license, proprietary right, or other related property or privacy interest in connection with, or as a result of, this contract or the performance by the contractor of any of its activities or obligations under this contract.

23. NON-CONVICTION OF BRIBERY
The contractor hereby declares and affirms that, to its best knowledge, none of its officers, directors, or partners or employees directly involved in obtaining contracts has been convicted of bribery, attempted bribery, or conspiracy to bribe under any federal, state, or local law.

24. NON-DISCRIMINATION IN EMPLOYMENT
The contractor agrees to comply with the non-discrimination in employment policies and/or provisions prohibiting unlawful employment practices in County contracts as required by Section 11B-33 and Section 27-19 of the Montgomery County Code, as well as all other applicable state and federal laws and regulations regarding employment discrimination.

The contractor assures the County that, in accordance with applicable law, it does not, and agrees that it will not, discriminate in any manner on the basis of race, color, religious creed, ancestry, national origin, age, sex, marital status, disability, or sexual orientation.

The contractor must bind its subcontractors to the provisions of this section.

25. PAYMENTS
No payment by the County may be made, or is due, under this contract, unless funds for the payment have been appropriated and encumbered by the County. Under no circumstances will the County pay the contractor for legal fees. The contractor must not proceed to perform any work (provide goods, services, or construction) prior to receiving written confirmation that the County has appropriated and encumbered funds for that work. If the contractor fails to obtain this verification from the Office of Procurement prior to performing work, the County has no obligation to pay the contractor for the work.

If this contract provides for an additional contract term for contractor performance beyond its initial term, continuation of contractor’s performance under this contract beyond the initial term is contingent upon, and subject to, the appropriation of funds and encumbrance of those appropriated funds for payments under this contract. If funds are not appropriated and encumbered to support continued contractor performance in a subsequent fiscal period, contractor’s performance must end without further notice from, or cost to, the County. The contractor acknowledges that the County Executive has no obligation to recommend, and the County Council has no obligation to appropriate, funds for this contract in subsequent fiscal years. Furthermore, the County has no obligation to encumber funds to this contract in subsequent fiscal years, even if appropriated funds may be available. Accordingly, for each subsequent contract term, the contractor must not undertake any performance under this contract until the contractor receives a purchase order or contract amendment from the County that authorizes the contractor to perform work for the next contract term.

The County is expressly permitted to pay the vendor for any or all goods, services, or construction under the contract through either a procurement card ("p-card") or a Single Use Account ("SUA") method of payment, if the contractor accepts the noted payment method from any other person. In that event, the County reserves the right to pay any or all amounts due under the contract by using either a p-card (except when a purchase order is required) or a SUA method of payment, and the contractor must accept the County’s p-card or a SUA method of payment, as applicable. Under this paragraph, contractor is prohibited from charging or requiring the County to pay any fee, charge, price, or other obligation for any reason related to or associated with the County’s use of either a p-card or a SUA method of payment.

26. PERSONAL PROPERTY
All furniture, office equipment, equipment, vehicles, and other similar types of personal property specified in the contract, and purchased with funds provided under the contract, become the property of the County upon the end of the contract term, or upon termination or expiration of this contract, unless expressly stated otherwise.

27. PROTECTION OF PERSONAL INFORMATION BY GOVERNMENT AGENCIES
In any contract under which Contractor is to perform services and the County may disclose to Contractor personal information about an individual, as defined by State law, Contractor must implement and maintain reasonable security procedures and practices that: (a) are appropriate to the nature of the personal information disclosed to the Contractor; and (b) are reasonably designed to help protect the personal information from unauthorized access, use, modification, destruction, or destruction. Contractor’s requirement to implement and maintain reasonable security procedures and practices must include requiring any third-party to whom it discloses personal information that was originally disclosed to Contractor by the County to also implement and maintain reasonable security practices and procedures related to protecting the personal information. Contractor must notify the County of a breach of the security of a system if the unauthorized acquisition of an individual’s personal information has occurred or is reasonably likely to occur, and, if so, the contractor and the County will comply with all applicable laws and regulations regarding the protection of personal information.

28. TERMINATION FOR DEFAULT
The Director, Office of Procurement, may terminate the contract in whole or in part, and from time to time, whenever the Director, Office of Procurement, determines that the contractor is:
(a) defaulting in performance or is not complying with any provision of this contract;
(b) failing to make satisfactory progress in the prosecution of the contract; or
(c) endangering the performance of this contract.

The Director, Office of Procurement, will provide the contractor with a written notice to cure the default. The termination for default is effective on the date specified in the County’s written notice. However, if the County determines that default contributes to the curtailment of an essential service or poses an immediate threat to life, health, or property, the County may terminate the contract immediately upon issuing oral or written notice to the contractor without any prior notice or opportunity to cure. In addition to any other remedies provided by law or the contract, the contractor must compensate the County for additional costs that foreseeably would be incurred by the County, whether the costs are actually incurred or not, to obtain substitute performance. A termination for default is a termination for convenience if the termination for default is later found to be without justification.
29. **TERMINATION FOR CONVENIENCE**
This contract may be terminated by the County, in whole or in part, upon written notice to the contractor, when the County determines this to be in its best interest. The termination for convenience is effective on the date specified in the County’s written notice. Termination for convenience may entitle the contractor to payment for reasonable costs allocable to the contract for work or costs incurred by the contractor up to the date of termination. The contractor must not be paid compensation as a result of a termination for convenience that exceeds the amount encumbered to pay for work to be performed under the contract.

30. **TIME**
Time is of the essence.

31. **WORK UNDER THE CONTRACT**
Contractor must not commence work under this contract until all conditions for commencement are met, including execution of the contract by both parties, compliance with insurance requirements, encumbrance of funds, and issuance of any required notice to proceed.

32. **WORKPLACE SAFETY**
The contractor must ensure adequate health and safety training and/or certification, and must comply with applicable federal, state and local Occupational Safety and Health laws and regulations.

**THIS FORM MUST NOT BE MODIFIED WITHOUT THE PRIOR APPROVAL OF THE OFFICE OF THE COUNTY ATTORNEY.**
A. This contract is subject to the Wage Requirements Law, found at Section 11B-33A of the Montgomery County Code ("WRL" or "11B-33A"). A County contract for the procurement of services must require the contractor and any of its subcontractors to comply with the WRL, subject to the exceptions for particular contractors noted in 11B-33A (b) and for particular employees noted in 11B-33A (f).

B. Conflicting requirements (11B-33A (g)): If any federal, state, or County law or regulation requires payment of a higher wage, that law or regulation controls. If any applicable collective bargaining agreement requires payment of a higher wage, that agreement controls.

C. A nonprofit organization that is exempt from the WRL under 11B-33A (b)(3) must specify the wage the organization intends to pay to those employees who will perform direct, measurable work under the contract, and any health insurance the organization intends to provide to those employees. Section 11B-33A (c)(2).

D. A contractor must not split or subdivide a contract, pay an employee through a third party, or treat an employee as a subcontractor or independent contractor, to avoid the imposition of any requirement in 11B-33A.

E. Each contractor and subcontractor covered under the WRL must: certify that it is aware of and will comply with the applicable wage requirements; keep and submit any verifiable records necessary to show compliance; and conspicuously post notices approved and/or supplied by the County, informing employees of the wage requirements. Section 11B-33A (h).

F. An employer must comply with the WRL during the initial term of the contract and all subsequent renewal periods, and must pay the adjusted wage rate increase required under 11B-33A (e)(2), if any, which is effective July 1 of each year. The County will adjust the wage rate by the annual average increase in the Consumer Price Index for all urban consumers for the Washington-Baltimore metropolitan area, or successor index, for the previous calendar year and must calculate the adjustment to the nearest multiple of 5 cents.

G. An employer must not discharge or otherwise retaliate against an employee for asserting any right, or filing a complaint of a violation, under the WRL.

H. The sanctions under Section 11B-33 (b), which apply to noncompliance with nondiscrimination requirements, apply with equal force and scope to noncompliance with the wage requirements of the WRL.

I. The County may assess liquidated damages for any noncompliance by contractor or its subcontractor with the WRL based on the rate of 1% per day of the total contract amount, or the estimated annual contract value of a requirements contract, for each day of the violation. This liquidated damages amount includes the amount of any unpaid wages, with interest. In the event of a breach of contract under this paragraph, the Contractor must pay to the County liquidated damages noted above, in addition to any other remedies available to the County. Contractor and County acknowledge that damages that would result to the County as a result of a breach under this paragraph are difficult to ascertain, and that the liquidated damages provided for in this paragraph are fair and reasonable in estimating the damage to the County resulting from a breach of this paragraph by Contractor. If the County determines, as a result of a WRL audit that the Contractor has violated requirements of the WRL, including but not limited to the wage requirements, the County will assess the Contractor for the cost incurred by the County in conducting the audit. In addition, the contractor is jointly and severally liable for any noncompliance by a subcontractor. Furthermore, Contractor agrees that an aggrieved employee, as a third-party beneficiary, may by civil action against the violating contractor or subcontractor enforce the payment of wages due under the WRL and recover from the Contractor or subcontractor any unpaid wages with interest, a reasonable attorney’s fee, and damages for any retaliation by the Contractor or subcontractor arising from the employee asserting any right, or filing a complaint of violation, under the WRL.

J. The County has established a program of random audits to assure compliance with the WRL. The Director may conduct an on-site inspection(s) for the purpose of determining compliance. Some of the documents that may be required during an audit are listed on the Wage Requirements Law FAQ web page: http://www.montgomerycountymd.gov/PRO/DBRC/WRL.html

K. The Contractor is in breach of this contract if the Contractor fails to submit timely documentation demonstrating compliance with the WRL to the satisfaction of the Director, including: the Wage Requirements Law Payroll Report Form (PMMD-183), which is required to be submitted by the end of the month (January, April, July, October) following each quarter; documents requested in conjunction with a random or compliance audit being conducted by the County; or documents otherwise requested by the Director. In the event of a breach of contract under this paragraph, or for any other violation of the WRL, the County may assess, or withhold from payment to, Contractor, the liquidated damages noted in paragraph I. above, in addition to any other remedies available to the County. Contractor and County acknowledge that damages that would result to the County as a
result of a breach under this paragraph are difficult to ascertain, and that the liquidated damages provided for in this paragraph are fair and reasonable in estimating the damage to the County resulting from a breach of this paragraph by Contractor.

L. For any questions, please contact the Wage Requirements Law Program Manager at 240-777-9918 or WRL@montgomerycountymd.gov.

[Remainder of Page Intentionally Left Blank]
In the spaces below, provide the contact name and information of the individual designated by your firm to monitor your compliance with the County’s Wage Requirements Law, unless exempt under Section 11B-33A (b) (see Section B. below):

<table>
<thead>
<tr>
<th>Contact Name</th>
<th>Title</th>
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<tbody>
<tr>
<td>Phone Number</td>
<td>Fax Number</td>
</tr>
<tr>
<td>E-mail Address</td>
<td></td>
</tr>
</tbody>
</table>

In the event that you, the “Offeror,” are awarded the contract and become a Contractor, YOU MUST MARK ☑ or ☒ in ALL BOXES BELOW that apply.

A. Wage Requirements Compliance
This Contractor, as a “covered employer”, will comply with the requirements under County Code Section 11B-33A, “Wage Requirements” (“Wage Requirements Law” or WRL”). Contractor and its subcontractors will pay all employees not exempt under the WRL, and who perform direct measurable work for the County, the required wage rate effective at the time the work is performed. The offer price(s) submitted under this solicitation include(s) sufficient funds to meet the requirements of the WRL. A “covered employer” must submit (preferably via email) quarterly (by the end of January, April, July, and October for the quarter ending the preceding month) certified payroll records for each payroll period and for all employees of the contractor or a subcontractor performing services under the County contract governed by the Wage Requirements Law, to the Division of Business Relations and Compliance, Attn: Wage Requirements Law Program Manager. These payroll records must include the following: name; position/title; gender/race (for contracts awarded after October 1, 2015); daily straight-time hours worked; daily overtime hours worked; straight-time hourly pay rate; overtime hourly pay rate; both employer and employee share of health insurance premium; and total gross wages paid for each period. A sample of the Payroll Report Form can be found at the link below.
(www.montgomerycountymd.gov/PRO/DBRC/WRL.html). In lieu of the quarterly Payroll Report Form, payroll registers generally satisfy the requirement. Late submission or non-submission of this information, or any other violation of the WRL, may result in the County withholding contract payments and additional actions by the County, including but not limited to: assessing liquidated damages, terminating the contract, or otherwise taking action to enforce the contract or the Wage Requirements Law. The Contractor must ensure that NO Social Security number of any person, other than the last four digits, is included on the quarterly report.

B. Exemption Status (if applicable)
This Contractor is exempt from Section 11B-33A, “Wage Requirements,” because it is:
1. Reserved – [Intentionally left blank].
2. a contractor who, at the time a contract is signed, has received less than $50,000 from the County in the most recent 12-month period, and will be entitled to receive less than $50,000 from the County under that contract in the next 12-month period. Section 11B-33A (b)(1);
3. a public entity. Section 11B-33A (b)(2).
4. a non-profit organization that has qualified for an exemption from federal income taxes under Section 501(c)(3) of the Internal Revenue Code. Section 11B-33A (b)(3) (must complete item C below).
5. an employer expressly precluded from complying with the WRL by the terms of any federal or state law, contract, or grant. Section 11B-33A (b)(7) (must specify the law, or furnish a copy of the contract or grant).

C. Nonprofit Wage & Health Information
   This Contractor is a non-profit organization that is exempt from coverage under Section 11B-33A (b)(3). Accordingly, the contractor has completed the 501 (c)(3) Nonprofit Organization’s Employee’s Wage and Health Insurance Form, which is attached. See Section11B-33A (c)(2).

D. Nonprofit’s Comparison Price(s) (if desired)
   This Contractor is a non-profit organization that is opting to pay its covered employees the hourly rate specified in the wage requirements. Accordingly, Contractor is duplicating the blanket-cost quotation sheet on which it is submitting its price(s) in the RFP, and is submitting on this duplicate form its price(s) to the County had it not opted to pay its employees the hourly rate specified in the WRL. For proposal evaluation purposes, this price(s) will be compared to price(s) of another nonprofit organization(s) that is paying its employees an amount consistent with its exemption from paying the hourly rate under the WRL. This revised information on the duplicate cost sheet must be clearly marked as your nonprofit organization comparison price(s). In order for the County to compare your price(s), the revised information on the duplicate cost sheet must be submitted with your offer on or before the offer opening date, must show how the difference between your nonprofit organization price(s) and other organization comparison price(s) was calculated. Section 11B-33A (c)(2).

E. Sole Proprietorship
   Sole Proprietorships are subject to the WRL. In order to be excused from the posting and reporting requirements of the WRL, the individual who is the sole proprietor must sign the certifications below in order to attest to the fact that the Sole Proprietorship:
   (1) is aware of, and will comply with, the WRL, as applicable;
   (2) has no employees other than the sole proprietor; and
   (3) will inform the Montgomery County Office of Business Relations and Compliance if the sole proprietor employs any workers other than the sole proprietor.

Contractor Certification

CONTRACTOR SIGNATURE: Contractor submits this certification form in accordance with Section 11B-33A of the Montgomery County Code. Contractor certifies that it, and any and all of its subcontractors that perform services under the resultant contract with the County, adheres to Section 11B-33A of the Montgomery County Code.

<table>
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<tr>
<th>Authorized Signature</th>
<th>Title of Authorized Person</th>
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<tr>
<td>Typed or printed name</td>
<td>Date</td>
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### 501(c)(3) Nonprofit Organization’s Employee’s Wage and Health Insurance Form

**Business Name**

**Address**

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<th>City</th>
<th>State</th>
<th>Zip Code</th>
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<td><strong>Phone Number</strong></td>
<td><strong>Fax Number</strong></td>
<td><strong>E-Mail</strong></td>
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Please provide below the employee labor category of all employee(s) who will perform direct measurable work under this contract, the hourly wage the organization pays for that employee labor category, and any health insurance the organization intends to provide for that employee labor category:

<table>
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<tr>
<th>Employee Labor Category</th>
<th>Wage per Hour</th>
<th>Name of Health Insurance Provider(s) and Plan Name* (e.g. ABC Insurer, Inc., HMO Medical and Dental)</th>
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* IF NO HEALTH INSURANCE PLAN IS PROVIDED PLEASE STATE “NONE”.

**PMMD-177 Rev 09/15**
A. This contract is subject to the Montgomery County Code and the Montgomery County Procurement Regulations regarding participation in the Minority-Female-Disabled Person (MFD) procurement program.

B. Contractor must subcontract a percentage goals listed below of the total dollar value of the contract, including all modifications and renewals, to certified minority owned businesses. The MFD subcontracting goal may be waived under appropriate circumstances by submission of a letter to the Minority Business Program Manager. The letter must explain why a waiver is appropriate. The Director of the Office of Procurement or designee may waive, in whole or in part, the MFD subcontracting goal if the Director determines that a waiver is appropriate under Section 7.3.3.5 of the Montgomery County Procurement Regulations. In determining if a waiver should be granted, the Director may require the Contractor to submit additional information; the Director may require the Contractor to submit some or all of this information on forms approved by the Director.

For Goals by each purchasing category, please refer to [www.montgomerycountymd.gov/mfd](http://www.montgomerycountymd.gov/mfd)

C. The attached MFD Subcontractor Performance Plan, which must be approved by the Director, is an integral part of the contract between County and Contractor. In a multi-term contract, Contractor must submit a MFD Subcontract Performance Plan to be in effect for the life of the contract, including any renewal or modification.

D. Contractor must include in each subcontract with a minority owned business a provision that requires the use of binding arbitration with a neutral arbitrator to resolve disputes between the Contractor and the minority owned business subcontractor. This arbitration provision must describe how the cost of dispute resolution will be apportioned; the apportionment must not, in the judgment of the Director, attempt to penalize a minority owned business subcontractor for filing an arbitration claim.

E. County approval of the MFD Subcontractor Performance Plan does not create a contractual relationship between the County and the minority owned business subcontractor.

F. Contractor must notify and obtain prior written approval from the Director regarding any change in the MFD Subcontractor Performance Plan.

G. Before receiving final payment under this contract, Contractor must submit documentation showing compliance with the MFD Subcontracting Performance Plan. Documentation may include, at the direction of the Director, invoices, copies of subcontracts with minority owned businesses, cancelled checks, affidavits executed by minority owned business subcontractors, waivers, and arbitration decisions. The Director may require Contractor to submit periodic reports on a form approved by the Director. The Director may conduct an on-site inspection for the purpose of determining compliance with the MFD Subcontractor Performance Plan. If this is a multi-term contract, final payment means the final payment due for performance rendered for each term of the contract.

If the Contractor fails to submit documentation demonstrating compliance with the MFD Subcontractor Performance Plan, to the satisfaction of the Director, after considering relevant waivers and arbitration decisions, the Contractor is in breach of this contract. In the event of a breach of contract under this addendum, the Contractor must pay to the County liquidated damages equal to the difference between all amounts the Contractor has agreed under its Plan to pay minority owned business subcontractors and all amounts actually paid minority owned business subcontractors with appropriate credit given for any relevant waiver or arbitration decision. Contractor and County acknowledge that damages which would result to the County as a result of a breach under this addendum are difficult to ascertain, and that the liquidated damages provided for in this addendum are fair and reasonable in estimating the damage to the County of a breach of this addendum by Contractor. In addition, the County may terminate the contract. As the result of a breach under this addendum, The Director of the Office of Procurement must find the Contractor non-responsible for purposes of future procurement with the County for the ensuing three years.
It is the policy of the County to recruit actively, minority-owned businesses to provide goods and services to perform governmental functions pursuant to Section 11B-57 of the County Code. Minority-owned businesses are described in County law as Minority/Female/Disabled Person owned businesses (MFD). MFD businesses include certain non-profit entities organized to promote the interests of persons with a disability demonstrating (on a contract by contract basis) that at least 51% of the persons used by the non-profit entity to perform the services or manufacture the goods contracted for by the County, are persons with a disability. MFD firms also include those firms that are 51% owned, controlled and managed by one or more members of a socially or economically disadvantaged minority group, which include African Americans who are not of Hispanic origin, Hispanic Americans, Native Americans, Asian Americans, Women and Mentally or Physically Disabled Persons.

Section 7 - “Minority Contracting”, Montgomery County Procurement Regulations specifies the procedure to be followed and will govern the evaluation of offers received pursuant to this solicitation. A copy of Section 7 of the Procurement Regulations is available upon request.

Prior to awarding contracts with a value of $50,000 or more, a prospective Contractor (who is not a certified MFD firm) must demonstrate that a minimum percentage of the overall contract value as set by the County, will be subcontracted to certified MFD businesses. A decision as to whether the prospective Contractor has demonstrated a good faith effort to meet this subcontracting requirement will be made by the Director, Office of Procurement, or his/her designee, who may waive this requirement.

A sample of the MFD Report of payment Received is attached. This form is mailed to the MFD Subcontractor to complete for documentation of payment by the Prime Contractor. It is not to be completed by the Prime Contractor nor submitted with the MFD Subcontractor Performance Plan.

The Director, Office of Procurement, or his /her designee determines whether a waiver of MFD subcontracting would be appropriate, under Section 7.3.3.5 of the Procurement Regulations.

For further information regarding the MFD Business Program, please contact the MFD Program, Office of Business Relations and Compliance at (240) 777-9912.

Offerors are encouraged (but not required) to complete the following:

I hereby represent that this is a Minority Business firm as indicated below (CIRCLE ONE):

<table>
<thead>
<tr>
<th>AFRICAN AMERICAN</th>
<th>ASIAN AMERICAN</th>
<th>DISABLED PERSON</th>
</tr>
</thead>
<tbody>
<tr>
<td>FEMALE</td>
<td>HISPANIC AMERICAN</td>
<td>NATIVE AMERICAN</td>
</tr>
</tbody>
</table>

Attach one of the following certification documents from: Maryland Department of Transportation (MDOT); Virginia Small, Women & Minority-Owned Business: Federal SBA 8(a); MD/DC Minority Supplier Development Council, Women’s Business Enterprise National Council; or City of Baltimore.
MONTGOMERY COUNTY, MARYLAND
MINORITY, FEMALE, DISABLED PERSON SUBCONTRACTOR
PERFORMANCE PLAN

Contractor's Name:
Address:
City: State: Zip:
Phone Number: Fax Number: Email:

CONTRACT NUMBER/PROJECT DESCRIPTION:

A. Individual assigned by Contractor to ensure Contractor's compliance with MFD Subcontractor Performance Plan:

Name:
Title:
Address:
City: State: Zip:
Phone Number:

B. This Plan covers the life of the contract from contract execution through the final contract expiration date.

C. The percentage of total contract dollars, including modifications and renewals, to be paid to all certified minority owned business subcontractors, is ______% of the total dollars awarded to Contractor.

D. Each of the following certified minority owned businesses will be paid the percentage of total contract dollars indicated below as a subcontractor under the contract.

I hereby certify that the business(s) listed below are certified by one of the following: Maryland Department of Transportation (MDOT); Virginia Small, Woman and Minority Owned Business (SWAM); Federal SBA (8A); MD/DC Minority Supplier Development Council (MSDC); Women's Business Enterprise National Council (WBENC); or City of Baltimore.
A Certification Letter must be attached.
For assistance, call 240-777-9912.

1. Certified by:

Subcontractor Name:
Title:
Address:
City: State: Zip:
Phone Number:

CONTACT PERSON:

Circle MFD Type:
AFRICAN AMERICAN ASIAN AMERICAN DISABLED PERSON
FEMALE HISPANIC AMERICAN NATIVE AMERICAN

The percentage of total contract dollars to be paid to this subcontractor:

This subcontractor will provide the following goods and/or services:

PMMD-65 Rev. 06/15
2. Certified by: __________________________________________
   Subcontractor Name: __________________________________
   Title: ________________________________________________
   Address: _____________________________________________
   City: _________________________________________________
   State: ________ Zip: ________
   Phone Number: __________________ Fax Number: ____________ Email: __________________
   CONTACT PERSON: __________________________
   Circle MFD Type:
   AFRICAN AMERICAN ASIAN AMERICAN DISABLED PERSON
   FEMALE HISPANIC AMERICAN NATIVE AMERICAN
   The percentage of total contract dollars to be paid to this subcontractor: ____________________
   This subcontractor will provide the following goods and/or services: __________________________

3. Certified by: __________________________________________
   Subcontractor Name: __________________________________
   Title: ________________________________________________
   Address: _____________________________________________
   City: _________________________________________________
   State: ________ Zip: ________
   Phone Number: __________________ Fax Number: ____________ Email: __________________
   CONTACT PERSON: __________________________
   Circle MFD Type:
   AFRICAN AMERICAN ASIAN AMERICAN DISABLED PERSON
   FEMALE HISPANIC AMERICAN NATIVE AMERICAN
   The percentage of total contract dollars to be paid to this subcontractor: ____________________
   This subcontractor will provide the following goods and/or services: __________________________

4. Certified By: __________________________________________
   Subcontractor Name: __________________________________
   Title: ________________________________________________
   Address: _____________________________________________
   City: _________________________________________________
   State: ________ Zip: ________
   Phone Number: __________________ Fax Number: ____________ Email: __________________
   CONTACT PERSON: __________________________
   Circle MFD Type:
 PMMD-65 Rev. 06/15
The percentage of total contract dollars to be paid to this subcontractor:
This subcontractor will provide the following goods and/or services:

E. The following language will be inserted in each subcontract with a certified minority owned business listed in D above, regarding the use of binding arbitration with a neutral arbitrator to resolve disputes with the minority owned business subcontractor; the language must describe how the costs of dispute resolution will be apportioned:

F. Provide a statement below, or on a separate sheet, that summarizes maximum good faith efforts achieved, and/or the intent to increase minority participation throughout the life of the contract or the basis for a full waiver request.

G. A full waiver request must be justified and attached.

Full Waiver Approved: Date: Partial Waiver Approved: Date:
MFD Program Officer MFD Program Officer
Full Waiver Approved: Date: Partial Waiver Approved: Date:
Director Director
Cherri Branson Cherri Branson
Office of Procurement Office of Procurement

The Contractor submits this MFD Subcontractor Performance Plan (Plan Modification No. ) in accordance with the Minority Owned Business Addendum to General Conditions of Contract between County and Contractor.

CONTRACTOR SIGNATURE

USE ONE:

1. TYPE CONTRACTOR'S NAME: ____________________________

Signature

Typed Name

Date

PMM-65 Rev. 06/15
2. TYPE CORPORATE CONTRACTOR’S NAME: ____________________________________________

Signature

Typed Name

Date

I hereby affirm that the above named person is a corporate officer or a designee empowered to sign contractual agreements for the corporation.

Signature

Typed Name

Title

Date

APPROVED:

Cherri Branson, Director, Office of Procurement                                Date

Section 7.3.3.4(a) of the Procurement Regulations requires:
The Contractor must notify the Director, Office of Procurement of any proposed change to the Subcontractor Performance Plan.
BUSINESS ASSOCIATE AGREEMENT

This Business Associate Agreement (the “Agreement”) is made by and between Montgomery County, Maryland (hereinafter referred to as “Covered Entity”), and ___________________________ (hereinafter referred to as “Business Associate”). Covered Entity and Business Associate shall collectively be known herein as the “Parties.”

I. GENERAL

A. Covered Entity has a business relationship with Business Associate that is memorialized in Montgomery County Contract # _____________ (the “Underlying Agreement”), pursuant to which Business Associate may be considered a “business associate” of Covered Entity as defined in the Health Insurance Portability and Accountability Act of 1996, including all pertinent regulations (45 CFR Parts 160 and 164), issued by the U.S. Department of Health and Human Services, including Subtitle D of the Health Information Technology for Economic and Clinical Health Act (the “HITECH Act”), as codified in Title XIII of Division A and Title IV of Division B of the American Recovery and Reinvestment Act of 2009 (Pub. L. 111–5), and including any and all applicable Privacy, Security, Enforcement, or Notice (Breach Notification) Rules or requirements (collectively, “HIPAA”), as all are amended from time to time; and

B. The performance of the Underlying Agreement may involve the creation, exchange, or maintenance of Protected Health Information (“PHI”) as that term is defined under HIPAA; and

C. For good and lawful consideration as set forth in the Underlying Agreement, Covered Entity and Business Associate enter into this Agreement for the purpose of ensuring compliance with the requirements of HIPAA; and

D. This Agreement articulates the obligations of the Parties as to use and disclosure of PHI. It does not affect Business Associate’s obligations to comply with the Maryland Confidentiality of Medical Records Act (Md. Code Ann., Health-General I §§4-301 et seq.) (“MCMRA”) or other applicable law with respect to any information the County may disclose to Business Associate as part of Business Associate’s performance of the Underlying Agreement; and

E. This Agreement supersedes and replaces any and all Business Associate Agreements the Covered Entity and Business Associate may have entered into prior to the date hereof; and

F. The above premises having been considered and incorporated by reference into the sections below, the Parties, intending to be legally bound, agree as follows:

II. DEFINITIONS.

A. The terms used in this Agreement have the same meaning as the definitions of those terms in HIPAA. In the absence of a definition in HIPAA, the terms have their commonly understood meaning.
B. Consistent with HIPAA, and for ease of reference, the Parties expressly note the definitions of the following terms:

1. “Breach” is defined at 45 CFR § 164.402.

2. “Business Associate” is defined at 45 CFR § 160.103, and in reference to the party to this Agreement, shall mean ______________________________.

3. “Covered Entity” is defined at 45 CFR § 160.103, and in reference to the party to this Agreement, shall mean the County.

4. “Designated Record Set” is defined at 45 CFR §164.501.

5. “Individual” is defined at 45 CFR §§ 160.103, 164.501 and 164.502(g), and includes a person who qualifies as a personal representative.

6. “Protected Health Information” or “PHI” is defined at 45 CFR § 160.103.

7. “Required By Law” is defined at 45 CFR § 164.103.

8. “Secretary” means the Secretary of the U.S. Department of Health and Human Services or designee.

9. “Security Incident” is defined at 45 CFR § 164.304.

10. “Unsecured Protected Health Information” or “Unsecured PHI” means PHI that is not rendered unusable, unreadable, or indecipherable to unauthorized persons through the use of a technology or methodology, as specified by the Secretary in the guidance as noted under the HITECH Act, section 13402(h)(1) and (2) of Public Law 111-5, codified at 42 U.S.C. § 17932(h)(1) and (2), and as specified by the Secretary in 45 CFR 164.402.

III. PERMISSIBLE USE AND DISCLOSURE OF PHI

A. Except as otherwise limited in this Agreement, or by privilege, protection, or confidentiality under HIPAA, MCMRA, or other applicable law, Business Associate may use or disclose (including permitting acquisition or access to) PHI to perform applicable functions, activities, or services for, or on behalf of, Covered Entity as specified in the Underlying Agreement. Moreover, the provisions of HIPAA are expressly incorporated by reference into, and made a part of, this Agreement.

B. Business Associate may use or disclose (including permitting acquisition or access to) PHI only as permitted or required by this Agreement or as Required By Law.

C. Business Associate is directly responsible for full compliance with the relevant requirements of HIPAA.
D. Business Associate must not use or disclose (including permitting acquisition or access to) PHI other than as permitted or required by this Agreement or HIPAA, and must use or disclose PHI only in a manner consistent with HIPAA. As part of this, Business Associate must use appropriate safeguards to prevent use or disclosure of PHI that is not permitted by this Agreement or HIPAA. Furthermore, Business Associate must take reasonable precautions to protect PHI from loss, misuse, and unauthorized access, disclosure, alteration, and destruction.

E. Business Associate must implement and comply with administrative, physical, and technical safeguards governing the PHI, in a manner consistent with HIPAA, that reasonably and appropriately protect the confidentiality, integrity, and availability of the PHI that it creates, receives, maintains, or transmits on behalf of Covered Entity.

F. Business Associate must immediately notify Covered Entity, in a manner consistent with HIPAA, of: (i) any use or disclosure of PHI not provided for by this Agreement, including a Breach of PHI of which it knows or by exercise of reasonable diligence would have known, as required at 45 CFR §164.410; and, (ii) any Security Incident of which it becomes aware as required at 45 CFR §164.314(a)(2)(i)(C). Business Associate’s notification to Covered Entity required by HIPAA and this Section III.F must:

1. Be made to Covered Entity without unreasonable delay and in no case later than 14 calendar days after Business Associate: a) knows, or by exercising reasonable diligence would have known, of a Breach, b) becomes aware of a Security Incident, or c) becomes aware of any use or disclosure of PHI not provided for by this Agreement;

2. Include the names and addresses of the Individual(s) whose PHI is the subject of a Breach, Security Incident, or use or disclosure of PHI not provided for by this Agreement. In addition, Business Associate must provide any additional information reasonably requested by Covered Entity for purposes of investigating the Breach, Security Incident, or use or disclosure of PHI not provided for by this Agreement;

3. Be in substantially the same form as Exhibit A hereto;

4. Include a brief description of what happened, including the date of the Breach, Security Incident, or use or disclosure of PHI not provided for by this Agreement, if known, and the date of the discovery of the Breach, Security Incident, or use or disclosure of PHI not provided for by this Agreement;

5. Include a description of the type(s) of Unsecured PHI that was involved in the Breach, Security Incident, or use or disclosure of PHI not provided for by this Agreement (such as full name, Social Security number, date of birth, home address, account number, disability code, or other types of information that were involved);

6. Identify the nature and extent of the PHI involved, including the type(s) of identifiers and the likelihood of reidentification;
7. If known, identify the unauthorized person who used or accessed the PHI or to whom the disclosure was made;

8. Articulate any steps the affected Individual(s) should take to protect him or herself from potential harm resulting from the Breach, Security Incident, or use or disclosure of PHI not permitted by this Agreement;

9. State whether the PHI was actually acquired or viewed;

10. Provide a brief description of what the Covered Entity and the Business Associate are doing to investigate the Breach, Security Incident, or use or disclosure of PHI not provided for by this Agreement, to mitigate losses, and to protect against any further Breach, Security Incident, or use or disclosure of PHI not provided for by this Agreement;

11. Note contact information and procedures for an Individual(s) to ask questions or learn additional information, which must include a toll-free telephone number of Business Associate, along with an e-mail address, Web site, or postal address;

and

12. Include a draft letter for the Covered Entity to utilize, in the event Covered Entity elects, in its sole discretion, to notify the Individual(s) that his or her PHI is the subject of a Breach, Security Incident, or use or disclosure of PHI not provided for by this Agreement that includes the information noted in Section III.F.4 – III.F.11 above.

G. Business Associate must, and is expected to, directly and independently fulfill all notification requirements under HIPAA.

H. In the event of a Breach, Security Incident, or use or disclosure of PHI not provided for by this Agreement, Business Associate must mitigate, to the extent practicable, any harmful effects of said disclosure that are known to it.

I. In accordance with 45 CFR §§ 164.502(e)(1)(ii) and 164.308(b)(2), Business Associate agrees to ensure that any agent, subcontractor, or employee to whom it provides PHI (received from, or created or received by, Business Associate on behalf of Covered Entity) agrees to the same restrictions, conditions, and requirements that apply through this Agreement to Business Associate with respect to such information.

J. Business Associate must ensure that any contract or other arrangement with a subcontractor meets the requirements of paragraphs 45 CFR §164.314(a)(2)(i) and (a)(2)(ii) required by 45 CFR § 164.308(b)(3) between a Business Associate and a subcontractor, in the same manner as such requirements apply to contracts or other arrangements between a Covered Entity and Business Associate.

K. Pursuant to 45 CFR § 164.502(a)(4)(ii), Business Associate must disclose PHI to the Covered Entity, Individual, or Individual's designee, as necessary to satisfy a Covered
Entity's obligations under § 164.524(c)(2)(ii) and (3)(ii) with respect to an individual's request for an electronic copy of PHI.

L. To the extent applicable, Business Associate must provide access to PHI in a Designated Record Set at reasonable times, at the request of Covered Entity or as directed by Covered Entity, to an Individual specified by Covered Entity in order to meet the requirements under 45 CFR § 164.524.

M. A Business Associate that is a health plan, excluding an issuer of a long-term care policy falling within paragraph (1)(viii) of the definition of health plan, must not use or disclose PHI that is genetic information for underwriting purposes, in accordance with the provisions of 45 CFR 164.502.

N. To the extent applicable, Business Associate must make any amendment(s) to PHI in a Designated Record Set that Covered Entity directs or agrees to, pursuant to 45 CFR § 164.526, at the request of Covered Entity or an Individual.

O. Business Associate must, upon request with reasonable notice, provide Covered Entity access to its premises for a review and demonstration of its internal practices and procedures for safeguarding PHI.

P. Business Associate must, upon request and with reasonable notice, furnish to Covered Entity security and privacy audit results, risk analyses, security and privacy policies and procedures, details of previous Breaches and Security Incidents, and documentation of controls.

Q. Business Associate must also maintain records indicating who has accessed PHI about an Individual in an electronic designated record set and information related to such access, in accordance with 45 C.F.R. § 164.528. Business Associate must document such disclosures of PHI and information related to such disclosures as would be required for a Covered Entity to respond to a request by an Individual for an accounting of disclosures of PHI in accordance with 45 C.F.R. § 164.528. Should an Individual make a request to Covered Entity for an accounting of disclosures of his or her PHI pursuant to 45 C.F.R. § 164.528, Business Associate must promptly provide Covered Entity with information in a format and manner sufficient to respond to the Individual's request.

R. Business Associate must, upon request and with reasonable notice, provide Covered Entity with an accounting of uses and disclosures of PHI that was provided to it by Covered Entity.

S. Business Associate must make its internal practices, books, records, and any other material requested by the Secretary relating to the use, disclosure, and safeguarding of PHI received from Covered Entity available to the Secretary for the purpose of determining compliance with HIPAA. Business Associate must make the aforementioned information available to the Secretary in the manner and place as designated by the Secretary or the Secretary's duly appointed delegate. Under this Agreement, Business Associate must comply and cooperate with any request for documents or other information from the Secretary directed to
Covered Entity that seeks documents or other information held or controlled by Business Associate.

T. Business Associate may use PHI to report violations of law to appropriate Federal and State authorities, consistent with 42 C.F.R. § 164.502(j)(1).

U. Except as otherwise limited in this Agreement, Business Associate may disclose PHI for the proper management and administration of Business Associate or the Underlying Agreement, provided that disclosures are Required By Law, or Business Associate obtains reasonable assurances from the person to whom the information is disclosed that it will remain confidential and be used or further disclosed only as Required By Law or for the limited purpose for which it was disclosed to the person, and the person must agree to notify Business Associate of any instance of any Breach, Security Incident, or use or disclosure of PHI not provided for by this Agreement of which it is aware in which the confidentiality of the information has been breached.

V. Business Associate understands that, pursuant to 45 CFR § 160.402, the Business Associate is liable, in accordance with the Federal common law of agency, for a civil money penalty for a violation of the HIPAA rules based on the act or omission of any agent of the Business Associate, including a workforce member or subcontractor, acting within the scope of the agency.

IV. TERM AND TERMINATION.

A. Term. The Term of this Agreement shall be effective as of the effective date of the Underlying Agreement, and shall terminate: (1) when all of the PHI provided by Covered Entity to Business Associate, or created or received by Business Associate on behalf of Covered Entity, is destroyed or returned to Covered Entity; or, (2) if it is infeasible to return or destroy PHI, in accordance with the termination provisions in this Article IV.

B. Termination for Cause. Upon Covered Entity's knowledge of a material breach of this Agreement by Business Associate, Covered Entity shall:

1. Provide an opportunity for Business Associate to cure the breach or end the violation and, if Business Associate does not cure the breach or end the violation within the time specified by Covered Entity, have the right to terminate this Agreement and to terminate the Underlying Agreement, and shall report the violation to the Secretary;

2. Have the right to immediately terminate this Agreement and the Underlying Agreement if Business Associate has breached a material term of this Agreement and cure is not possible, and shall report the violation to the Secretary; or

3. If neither termination nor cure is feasible, report the violation to the Secretary.
4. This Article IV, Term and Termination, Paragraph B, is in addition to the provisions set forth in Paragraph 27, Termination for Default of the General Conditions of Contract Between County and Contractor, attached to the Underlying Agreement, in which “Business Associate” is “Contractor” and “Covered Entity” is “County” for purposes of this Agreement.

C. Effect of Termination.

1. Except as provided in Section IV.C.2, upon termination or cancellation of this Agreement, for any reason, Business Associate must return or destroy all PHI received from Covered Entity, or created or received by Business Associate on behalf of Covered Entity. This provision applies to PHI that is in the possession of a subcontractor(s), employee(s), or agent(s) of Business Associate. Business Associate must not retain any copies of the PHI.

2. In the event that Business Associate determines that returning or destroying the PHI is infeasible, Business Associate must provide to Covered Entity written notification of the nature of the PHI and the conditions that make return or destruction infeasible. After written notification that return or destruction of PHI is infeasible, Business Associate must extend the protections of this Agreement to such PHI and limit further use(s) and disclosure(s) of such PHI to those purposes that make the return or destruction infeasible, for so long as Business Associate maintains such PHI. Notwithstanding the foregoing, to the extent that it is not feasible to return or destroy such PHI, the terms and provisions of this Agreement survive termination of this Agreement with regard to such PHI.

3. Should Business Associate violate this Agreement, HIPAA, the Underlying Agreement, the MCMRA, or other applicable law, Covered Entity has the right to immediately terminate any contract then in force between the Parties, including the Underlying Agreement.

V. CONSIDERATION. Business Associate recognizes that the promises it has made in this Agreement shall, henceforth, be reasonably, justifiably, and detrimentally relied upon by Covered Entity in choosing to continue or commence a business relationship with Business Associate.

VI. CAUSES OF ACTION IN THE EVENT OF BREACH. As used in this paragraph, the term “breach” has the meaning normally ascribed to that term under the Maryland law related to contracts, as opposed to the specific definition under HIPAA related to PHI. Business Associate hereby recognizes that irreparable harm will result to Covered Entity in the event of breach by Business Associate of any of the covenants and assurances contained in this Agreement. As such, in the event of breach of any of the covenants and assurances contained in this Agreement, Covered Entity shall be entitled to enjoin and restrain Business Associate from any continued violation of this Agreement. Furthermore, in the event of breach of this Agreement by Business Associate, Covered Entity is entitled to reimbursement and indemnification from Business Associate for Covered Entity's reasonable attorneys' fees and expenses and costs that were reasonably incurred as a proximate result of Business Associate's breach. The causes of action
contained in this Article VI are in addition to (and do not supersede) any action for damages and/or any other cause of action Covered Entity may have for breach of any part of this Agreement. Furthermore, these provisions are in addition to the provisions set forth in Paragraph 18, “Indemnification”, of the General Conditions of Contract Between County and Contractor, attached to the Underlying Agreement in which “Business Associate” is “Contractor” and “Covered Entity” is “County”, for purposes of this Agreement.

VII. MODIFICATION; AMENDMENT. This Agreement may be modified or amended only through a writing signed by the Parties and, thus, no oral modification or amendment hereof shall be permitted. The Parties agree to take such action as is necessary to amend this Agreement, from time to time, as is necessary for Covered Entity to comply with the requirements of HIPAA, including its Privacy, Security, and Notice Rules.

VIII. INTERPRETATION OF THIS AGREEMENT IN RELATION TO OTHER AGREEMENTS BETWEEN THE PARTIES. Should there be any conflict between the language of this Agreement and any other contract entered into between the Parties (either previous or subsequent to the date of this Agreement), the language and provisions of this Agreement, along with the Underlying Agreement, shall control and prevail unless the Parties specifically refer in a subsequent written agreement to this Agreement, by its title, date, and substance and specifically state that the provisions of the later written agreement shall control over this Agreement and Underlying Agreement. In any event, any agreement between the Parties, including this Agreement and Underlying Agreement, must be in full compliance with HIPAA, and any provision in an agreement that fails to comply with HIPAA will be deemed separable from the document, unenforceable, and of no effect.

IX. COMPLIANCE WITH STATE LAW. The Business Associate acknowledges that by accepting the PHI from Covered Entity, it becomes a holder of medical records information under the MCMRA and is subject to the provisions of that law. If HIPAA conflicts with another applicable law regarding the degree of protection provided for Protected Health Information, Business Associate must comply with the more restrictive protection requirement.

X. MISCELLANEOUS.

A. Ambiguity. Any ambiguity in this Agreement shall be resolved to permit Covered Entity to comply with HIPAA.

B. Regulatory References. A reference in this Agreement to a section in HIPAA means the section in effect, or as amended.

C. Notice to Covered Entity. Any notice required under this Agreement to be given Covered Entity shall be made in writing to:

    Joy Page, Esq.
    Deputy Privacy Official
    Montgomery County, Maryland
    401 Hungerford Drive, 7th Floor
    Rockville, Maryland 20850
Notice to Business Associate. Any notice required under this Agreement to be given Business Associate shall be made in writing to:

Address: ________________________________
_______________________________________

Attention: ________________________________

Phone: ________________________________

D. Maryland Law. This Agreement is governed by, and shall be construed in accordance with, applicable federal law and the laws of the State of Maryland, without regard to choice of law principles.

E. Incorporation of Future Amendments. Other requirements applicable to Business Associates under HIPAA are incorporated by reference into this Agreement.

F. Penalties for HIPAA Violation. In addition to that stated in this Agreement, Business Associate may be subject to civil and criminal penalties noted under HIPAA, including the same HIPAA civil and criminal penalties applicable to a Covered Entity.

SIGNATURE PAGE FOLLOWS
IN WITNESS WHEREOF and acknowledging acceptance and agreement of the foregoing, the Parties affix their signatures hereto.

MONTGOMERY COUNTY, MARYLAND

By: _______________________________   By: _______________________________
Name: _______________________________   Name: _______________________________
Title: _______________________________   Title: _______________________________
Date: _________________   Date: _______________
EXHIBIT A
FORM OF NOTIFICATION

This notification is made pursuant to Section III.F of the Business Associate Agreement between:

- Montgomery County, Maryland, (the “County”) and
- ____________________________________________ (Business Associate).

Business Associate hereby notifies the County that there has been a Breach, Security Incident, or use or disclosure of PHI not provided for by the Business Associate Agreement (an “Incident”) that Business Associate has used or has had access to under the terms of the Business Associate Agreement.

Description of the Incident:

____________________________________________________________________________________

Date of the Incident: ___________________________

Date of discovery of the Incident: _______________________

Does the Incident involve 500 or more individuals? Yes/No

If yes, do the people live in multiple states? Yes/No

Number of individuals affected by the Incident:

____________________________________________________________________________________

Names and addresses of individuals affected by the Incident:

(Attach additional pages as necessary)

The types of unsecured PHI that were involved in the Incident (such as full name, Social Security number, date of birth, home address, account number, or disability code):

____________________________________________________________________________________

Description of what Business Associate is doing to investigate the Incident, to mitigate losses, and to protect against any further Incidents:

____________________________________________________________________________________
Contact information to ask questions or learn additional information:

Name: __________________________________________________________

Title: __________________________________________________________

Address: _________________________________________________________

____________________________________________________________________

Email Address: ____________________________________________________

Phone Number: ____________________________________________________
Attachment C

Insurance Requirements

Prior to the execution of the Contract by the County, the Contractor must obtain at its own cost and expense and keep in effect until termination of the contractual relationship with the County the following insurance with insurance company/companies licensed to do business in the State of Maryland and acceptable to the Division of Risk Management evidenced by a certificate of insurance and/or copies of the insurance policies. Contractor's insurance must be primary.

Commercial General Liability
A minimum limit of liability of one million dollars ($1,000,000), combined single limit, for bodily injury and property damage coverage per occurrence including the following coverages:

- Contractual Liability
- Premises and Operations
- Independent Contractors
- Products and Completed Operations during and for two years after the work is completed

Professional Liability
Professional liability insurance covering errors and omissions and negligent acts committed during the period of contractual relationship with the County with a limit of liability of at least one million dollars ($1,000,000) per claim and aggregate and a maximum deductible of $25,000. The Contractor agrees to provide a one-year discovery period under this policy.

Automobile Liability
A minimum limit of liability of five hundred thousand dollars ($500,000) combined single limit for bodily injury and property damage coverage per occurrence including the following:

- owned automobiles
- hired automobiles
- non-owned automobiles

Worker’s Compensation/Employer’s Liability
Meeting all requirements of Maryland Law and with the following minimum limits:

Bodily Injury by Accident - $100,000 each accident
Bodily Injury by Disease - $500,000 policy limits
Bodily Injury by Disease - $100,000 each employee

Additional Insured
Montgomery County, Maryland, its elected and appointed officials, officers, consultants, agents and employees must be named as an additional insured on Contractor’s Commercial and Excess/Umbrella Insurance for liability arising out of Contractor’s products, goods and services provided under this Contract.
Open Solicitation #3648001020
Level III.5 Residential Substance Abuse Treatment Services
AND/OR
Level II Intensive Outpatient Program with a Residential Component

Attachment C
Insurance Requirements

Policy Cancellation
Forty-five (45) days written notice of cancellation or material change of any of the policies is required.

Certificate Holder
Montgomery County, Maryland
Department of Health and Human Services
Contract Management Team
401 Hungerford Drive, Sixth Floor
Rockville, Maryland 20850