2014 PURCHASE OF SERVICE CONTRACT

Contract No.: 40-14945-400B Federal I.D. No.: 39-0808464

This Contract between Milwaukee County, a Wisconsin municipal body corporation represented by the Milwaukee County Department of Health and Human Services, Delinquency and Court Services Division, 10201 W. Watertown Plank Road, Wauwatosa, WI 53226 (hereinafter called County) and Wisconsin Community Services, Inc., 3732 W. Wisconsin Avenue, Suite 200, Milwaukee, WI 53208, (hereinafter called Contractor) becomes effective on May 1, 2014.

Contact Person: Hollis Patzer Phone Number: 414-290-0418

Email Address: hpatzer@wiscs.org

WITNESS THAT:

WHEREAS, Purchaser is a governmental subunit of Milwaukee County managing and providing mental health, substance abuse and/or health and social services.

WHEREAS, Purchaser also arranges for the provision and purchase of such services from Mental Health and Health and Social Services Providers for adults, children and families in Milwaukee County-operated programs or programs managed by Purchaser; and

WHEREAS, Contractor desires to provide such services for Purchaser.

NOW, THEREFORE, in consideration of the mutual promises herein stated, it is agreed by and between the parties that the Contractor shall provide the services at the rates set forth in the attachment identified as "Attachment I — Schedule of Services to be Purchased" and that said services will cover the following duties and obligations.

1. SCOPE OF SERVICE

Contractor shall specifically perform all of the services and achieve the objectives as set forth in its application submitted to County, and as indicated in the Attachment I, Schedule of Services to be Purchased. The Milwaukee County Department of Health and Human Services Year 2014 Purchase of Service Guidelines - Program and Technical Requirements, the provisions of Contractor's proposal, and the Milwaukee County Department of Health and Human Services Administrative Probation Policy for Noncompliance with Contract and Fee-for-Service Requirements, are incorporated herein by reference and made a part of this Contract as if physically attached hereto and Contractor shall comply therewith.

2. DATES OF PERFORMANCE

This Contract is for the period of May 1, 2014 through December 31, 2014.

3. CONTRACTOR OBLIGATIONS

CONTRACTOR OBLIGATIONS FOR DIRECT SERVICE PROVIDERS AND INDIRECT STAFF

Contractor shall provide all personnel required to perform the services under this Contract with a minimum of two (2) Direct Service Provider for each Covered Service or program, unless exempted from this requirement by the DHHS program or division. Such personnel shall not be employees of, or have any other contractual relationships with County. Any replacement of personnel listed in Contractor's proposal shall be by persons of like qualifications, which shall be attested to by Contractor. Written notification of replacement of personnel shall be provided to County prior to replacement. Contractor shall not replace named personnel without the prior written approval of County, which approval shall not be unreasonably withheld. Any proposed replacement of named personnel shall be by persons of equal qualification. It is understood that final authority for determining eligibility to be a Direct Service Provider, Independent Service Provider, or Indirect Staff rests with the County.

Contractor understands and agrees that all provisions of this Contract are in effect at all times that Covered Services are provided.

In the event that this Contract establishes a different standard or obligation on a given matter than Federal, State, or Local laws, rules, or other regulations, the greater standard shall apply. In the event that there are any inconsistencies between this document and other documents incorporated herein, the following order of precedence shall be followed:

- 1) This document
- 2) Other DHHS Policies and Procedures
- 3) Email or other written communication, unless it specifically is authorizing a waiver or exemption to 1 or 2, above

If an individual employee (Direct Service Provider, Independent Service Provider or Indirect Staff) is removed or otherwise determined not approved, s/he cannot fill a different position connected with Covered Services (for example, a suspended, terminated, or otherwise removed Direct Service Provider may not become an Indirect Staff and vice versa).

Except as provided herein, Contractor shall determine the methods, procedures, and personnel policies to be used in initiating and furnishing services to eligible clients or patients.

Contractor understands and agrees that the **employment** status of individual Direct Service Providers or Indirect Staff with Contractor is not dependent on approval, denial, or any other administrative action by County and is solely a matter of Contractor discretion. Any administrative decision by County only affects eligibility of Direct Service Provider and/or Indirect Staff to provide Covered Services, and does not affect employment eligibility of individual with Contractor.

Contractor agrees to abide by the terms of the Milwaukee County Caregiver Resolution and the Wisconsin Caregiver Law requiring Background Checks on all caregivers as set forth in Section Three (Compliance with Caregiver Background Checks) of this Agreement.

In addition to compliance with Caregiver Background Checks (Section 23) and the Milwaukee County Caregiver Resolution 99-233, Contractor will also consider conviction history of any candidate before requesting to add as a Direct Service Provider and/or Indirect Staff to determine suitability based on a substantially related test as described in DHS 12.06 (http://docs.legis.wisconsin.gov/code/admin_code/dhs/12.pdf). In instances of multiple (2 or more), recent (within five years), or felony convictions, or for any charges with open dispositions, Contractor may be required to obtain a copy of the Criminal Complaint from the Clerk of Court's Office, to determine whether a conviction is substantially related to care of a client. This documentation shall be retained in the personnel file and submitted to County upon request. County reserves the right to make a final determination regarding conviction records and whether a conviction is substantially related to the Covered Service in question.

County will also consider status of probation/parole, extended supervision, deferred prosecution agreement, or participation in a Driver Safety Plan in evaluating eligibility to be added as a Direct Service Provider or Indirect Staff under this contract.

Contractor shall conduct subsequent background checks at intervals no greater than those prescribed by the Wisconsin Caregiver Law and/or the Milwaukee County Caregiver Resolution 99-233, or as often as is necessary to ensure that Individual Direct Service Providers and/or Indirect Staff have suitable backgrounds and are free of any barred convictions at all times that services are delivered.

Contractor shall have a written policy which is communicated to all Direct Service Providers upon hire and annually thereafter requiring immediate (within 24 hours of the event) notification to Contractor of any new arrests or convictions. Communication of this policy shall be documented with the employee's signature, dated, and kept in the employee file. Upon notification from Direct Service Provider to Contractor as described above, Contractor shall notify County within two business days.

Contractor shall obtain a minimum of two work related references, to be documented in writing, for any candidate requested to be added as a Direct Service Provider or Indirect Staff. This documentation shall be retained in the personnel file and submitted to County upon request. County reserves the right to consider education in lieu of work experience.

Contractor agrees to notify County if individual Direct Service Provider or Indirect Staff are employed by any other Provider in addition to the one with whom this Contract is executed.

Where education or degree requirements exist for Direct Service Provider or Indirect Staff positions, Contractor agrees that only coursework and degrees from accredited schools shall be recognized by County, as they may appear on either the United States Department of Education, Office of Postsecondary Education (http://www.ope.ed.gov/accreditation/) or the Council of Higher Education Accreditation (http://www.chea.org/search/) databases. Contractor is responsible for the supervision of Direct Service Providers and Indirect Staff and accountable for the accuracy and completeness of all required Service Documentation. Contractor is responsible for preparing and maintaining written documentation that identifies the hierarchy for oversight of all Direct Service Providers and Indirect Staff, Contractor procedure for communication of County's Policies and Procedures to Direct Service

Providers and Indirect Staff, and Contractor plan related to supervision of all Direct Service Providers and Indirect Staff, including the process for review and approval of Service Documentation. Contractor is responsible for being the point of contact to mediate any and all matters between County and Direct Service Providers and/or Indirect Staff.

Contractor shall comply with all Federal, State, and local laws and regulations and shall maintain in good standing all licenses, permits, and certifications relating to the services referred to herein.

A valid driver's license is required to be held by any Direct Service Provider and/or Indirect Staff who uses a vehicle for any purpose related to the provision of Covered Services. Contractor must obtain an initial driver's license abstract prior to requesting staff be added, which is then updated at intervals no greater than annually (365 days) thereafter, or as often as is necessary to ensure that license remains valid at all times that services are delivered.

Contractor shall have a written policy which is communicated to all Direct Service Providers upon hire and annually thereafter requiring immediate (within 24 hours of the event) notification to Contractor of any change in validity (suspended, revoked, expired, surrendered, etc.) of driver's license. Communication of this policy shall be documented with the employee's signature, dated, and kept in the employee file. Upon notification from Direct Service Provider to Contractor as described above, Contractor shall immediately suspend the Direct Service Provider from driving for any purpose related to Covered Services and shall notify County within two (2) business days. If a Contractor fails to report the suspension, revocation, or expiration of his/her license and services are billed during the non-valid period, that provider will be immediately terminated from providing Covered Services, and all services paid during the non-valid period will be subject to recovery.

Where a State of Wisconsin program, agency or direct service provider license or certification is required to provide a Covered Service, Contractor agrees to notify County within 2 business days if there is an occurrence of negative findings such as license revocation or request of forfeiture, fines, plan(s) of correction due to licensing violations that occur.

County reserves the right to remove a Direct Service Provider or Indirect Staff providing services under this Contract at any time. If Contractor is unable to provide authorized Covered Services, this must be reported to County. If Direct Service Provider or Indirect Staff is terminated from Contractor agency for any reason connected to Covered Services, County must be notified in writing within two (2) business days. Failure to provide such notice may result in termination of this Contract or other sanctions provided for in this Contract.

Contractor agrees not to use Direct Service Providers in the provision of Covered Services or Indirect Staff who are suspended, debarred, or under investigation by County or other Federal, State, or Local entities, without prior notification to and approval from County. Contractor shall have more than one employee or Independent Service Provider at their agency, and at least two Direct Service Providers for each Covered Service unless prior written approval is obtained, or unless otherwise allowed per County Policy and Procedure. A request must include a plan which demonstrates formal arrangements for coverage arising from absences, illness, vacation, etc., and/or variations in program volume.

Contractor agrees to notify County in writing within 5 business days of any of the following changes or conditions:

- 1. Agency name;
- 2. Agency ownership;
- 3. Agency director/CEO;
- 4. Any change in status of Executive Director, senior management, or any corporate officer;
- 5. Agency business or billing address(es);
- 6. Telephone or fax number;
- 7. E-mail address;
- 8. Federal Employers Tax ID (FEIN) number;
- 9. Change of insurance carrier or insurance coverage
- 10. Change in or restriction of license(s), including occurrence of negative findings such as license revocation or request of forfeiture, fines, plan(s) of correction due to licensing violations that occur.. This condition carries a notification requirement of TWO DAYS.
- 11. Any arrests or convictions of DSP and/or Indirect Staff; This condition carries a notification requirement of TWO DAYS.
- 12. Inability to accept referrals within the timelines defined in Purchaser Policies and Procedures, including if Provider has wait lists
- 13. Discontinuation of agreed upon service(s);
- 14. Being excluded, debarred, suspended, or otherwise declared ineligible or voluntarily excluded from covered transactions by any other federal, state, county or local governmental department or agency.

Contractor agrees to provide notification prior to making changes in ownership structure or location of any site where Covered Services are provided, to ensure that proposed organizational changes are consistent with Contract. Changes in location and/or ownership structure may result in termination of this Contract.

Contractor agrees that its own policies and procedures are enforceable under this Agreement, and that those policies and procedures shall be submitted upon request of Purchaser.

Contractor shall fully cooperate with any and all program evaluation efforts as may be required by Purchaser during the term of this Contract.

Provider shall comply with all applicable wage and payment laws dealing with compensation of DSPs and Indirect Staff, particularly as they relate to withholding pay, wage deductions, and/or making payment of wages conditional upon payment for outcome based services. Payment of wages cannot be made conditional on payment from Purchaser unless such arrangement conforms with the parameters of Chapter 109 of Wisconsin Statutes.

In accordance with Wisconsin Fair Employment Law and Department of Workforce Development/Equal Rights Division, an anti-harassment policy must be developed and adhered to by Providers. A strong and effective policy is required prohibiting workplace harassment, and procedures for addressing such matters when they arise. The policy must be communicated to all current DSP and Indirect Staff (DSP's) no later than March 30, 2014 and during orientation of new staff (no later than 30 days of hire). DSP's must receive a copy of the agency policies regarding harassment and the procedures for reporting it. Agency must provide and document training sessions related to harassment and retain

documentation that all DSP's have received a copy of the agency harassment policies and procedures.

Guidance for creating an anti-harassment policy can be found at following link: http://dwd.wisconsin.gov/er/discrimination_civil_rights/publication_erd_10449 p.htm

CONTRACTOR OBLIGATIONS FOR SERVICE RECIPIENTS

Contractor agrees to provide Covered Services for Participants/Service Recipients in accordance with County's Policies and Procedures, referral form and Service Plan. Any deviations, exceptions, waivers, etc., must be in writing.

Contractor agrees to provide Covered Services on a one on one, face-to-face basis unless otherwise specified by County Policy or Procedure.

Unless otherwise indicated by Purchaser Policy or Procedure, the following are not billable activities:

- 1) Travel time to and from Covered Services
- 2) Non face-to-face activity, including collateral contacts and phone calls to or regarding client
- 3) No shows
- 4) Service Documentation

Provider shall have a Critical Incident policy and comply therewith. Critical Incidents are defined as any events or situations that jeopardize the health or safety of Service Recipients or of staff. These situations include, but are not limited to, the following:

- 1. Death.
- 2. Physical injury.
- 3. Fire setting.
- 4. Commission of a serious offense to or by the service recipient, DSP, or Indirect Staff.
- 5. Service Recipient attempts suicide or is actively suicidal.
- 6. Any event that could result in media exposure.
- 7. Physical or sexual assault on or by Service Recipient, DSP, or Indirect Staff
- 8. Other An incident of a critical nature that may not be identified above (i.e., death threat made to a Service Recipient, DSP, or Indirect Staff, etc.).

Critical Incidents <u>must be reported in writing to Purchaser within 24 hours of becoming aware of the incident. In addition, Provider must immediately report Critical Incidents to the parent/guardian, Care Coordinator, Care Management/Support and Service Coordination Agency, Case Management Agency, Recovery Support Coordinator, or Human Service Worker/Juvenile Justice Worker.</u>

Critical incident and notifications shall be documented in the Case Notes.

Contractor who identifies a need to terminate services while in progress must provide a 15 day Written Prior Notice of Termination of Services via letter to the family and service coordinator. No services can be terminated without notification and signature by the parent on a Written Prior Notification Form. Services can be terminated earlier if the parent agrees and request to do so. Procedure to terminate the Contractor with Purchaser is described elsewhere in the agreement.

Contractor may not terminate services to particular client due to poverty or other circumstances that suggest discriminatory practices or reduce, restrict or deny service provision based on a family's circumstance or a review of public records, or conduct a background checks on families without full permission or full disclosure to family of how the information is utilized and maintained by Contractor agency.

CONTRACTOR OBLIGATIONS FOR SERVICE DOCUMENTATION

In the case of a minor, client records shall be retained until the Participant becomes 19 years of age or until seven (7) years after Covered Services have been completed, whichever is longer. In the case of an adult, records shall be retained for a minimum of seven (7) years after Covered Services have completed. Upon Termination of Contractors' affiliation with the Purchaser request for files or collateral reports may be made and must be complied within 30 days of such termination, this essentially include all records that verify the treatment according to Federal, state and County services and billing standards.

Contractor agrees to maintain Service Documentation as required by this Agreement and Policies and Procedures including a service specific consent for services signed and dated by the Service Recipient (if a legal adult) or parent/guardian. If the Service Recipient is to be transported by a Direct Service Provider, a Transportation Consent Form must also be signed and dated by the child's parent/legal guardian or adult Service Recipient prior to providing transportation (unless otherwise indicated by policy and procedure). This documentation shall be retained in the case/client file and submitted to County upon request.

Contractor agrees to provide ongoing progress notes, evaluations and assessments for each child must be provided to the service coordinator and family on a routine basis. And on request made available within 48 hours to Milwaukee County and various federal and State officials

Contractor agrees to maintain and retain Service Documentation as required by all applicable Policies and Procedures. See definition of Case Notes for required elements. County reserves the right not to pay for units of Covered Services reported by Contractor that are not supported by Service Documentation required under this Contract.

Any correction, creation of, or addition to Service Documentation after billing must receive prior approval. Service Documentation otherwise created or obtained subsequent to billing or in response to site review findings (including affidavits) will not be accepted as support for payment).

Unless otherwise waived by County, or program policy and procedure, all Covered Services require the Participant's or Service Recipient's signature on Service Documentation. In addition, Service Documentation is required by Purchaser Policies and Procedures, and/or state and federal regulations.

Contractor agrees to ensure that Direct Service Providers complete and retain Case Notes prior to billing for Covered Services. In no case shall Case Notes be completed more than 30 days after the provision of Covered Service unless otherwise specified in County Policies and Procedures.

Contractor utilizing any electronic systems for Case Notes or other Service Documentation agrees to abide by County's Electronic Record Keeping Systems requirements as follows:

Contractor may maintain case notes electronically if Contractor has a written policy describing the record and the authentication and security policy, in accordance with state and federal standards and laws related to electronic medical records/electronic health records or electronic case notes. This policy shall be submitted to County upon request.

Electronic software systems (ESS) must conform to HIPAA security rules requiring appropriate administrative physical and technical safeguards to ensure the confidentiality, integrity and security of electronic protected health information. ESS must include at a minimum; data integrity, password protection, a back-up system, client confidentiality, as well as safeguards to protect against modification of the record, or unauthorized access.

Direct service provider's electronic signatures may only be used by the person who makes the entry. Contractor must possess a statement signed and dated by the Direct Service Provider, which certifies that only the Direct Service Provider shall use the electronic representation via use of a personal password. This statement shall be kept in the Direct Service Provider's personnel file and shall be submitted to County upon request.

OTHER CONTRACTOR OBLIGATIONS

Except where noted in Policy and Procedure, all non-clinical Covered Services (where DSP is not licensed). Contractor shall have a curriculum to include, at a minimum:

- 1) A summary description of the purpose of the service, a description of the general activities engaged in, and any evidence based support for the service model.
- 2) A description of activities by session, stage, or other interval.
- 3) The specific learning objectives or intended benefit of the service, as well as the intervals and methods for measuring benefit/objectives, and the intervals and methods used to determine whether continuation of services is warranted.
- 4) Any other protocols.

Contractor shall ensure that DSPs are oriented/trained to the curriculum for all Covered Services they are authorized to provide initially within 30 days of hire. Documentation of orientation/training shall be retained by Contractor and provided to County upon request.

For all clinical Covered Services (AODA and mental health services, where DSP is licensed), Contractor shall develop and maintain a written description of the therapeutic approach, service model, and/or evidence based support for the service model, as well as a description of the intervals and methods used to determine whether continuation of services is warranted.

Contractor is responsible for providing **initial training** to all DSP's within 30 days from the date of hire unless otherwise indicated per Purchaser Policy and Procedure. For ongoing DSPs, Contractor is responsible for providing **updated training** on an annual basis (not to exceed 365 days).

Per Purchaser Policy and Procedure, Initial and Updated Training must be fully documented (and retained in agency or personnel record) to include the following information: subject(s) of training, trainer(s) name, date(s) of training and duration of training(s). Contractor training must cover but not limited to the following subjects: service description(s), as defined by Purchaser and/or state statue or regulations, Contractor curriculum, documentation and billing requirements, agency and program applicable policies and procedures, POS contract (in full, or pertinent sections), as well as all other applicable county, state, federal rules and regulations.

Contractor agrees to review services periodically (at least once a year minimally) to ensure alignment with Federal, State and/or County service requirements..

Contractor agrees not to start a new service or modify or expand an existing services without prior written approval of Purchaser. In such cases Contractor is obligated to provide the Purchaser with up to date program information detailing the goals and outcomes of the program as well as location and the qualifications of staff providing the services, and proposed rates.

Contractor shall not utilize a home based business/site for any office based Covered Services without prior written approval.

Contractor agrees to obtain, retain, and monitor current credentials and licenses for Contractor and all DSPs and Indirect Staff, including subcontractors, as required by federal, state, and county regulations and/or Purchaser Policies and Procedures throughout the term of this Agreement. Contractor agrees to cooperate with any credentialing procedures, which Purchaser may elect to establish. All licensing and/or credentialing requirements are understood to be in effect at all times that Covered Services are provided.

Contractor understands and agrees that this Agreement may create obligations that exceed those required under licensure and/or other Federal, State, or Local laws and regulation, and that maintaining a license in good standing does not discharge or waive any obligations under this Contract. Where this Contract creates obligations in addition to, or which exceed, those required under licensing, Contractor shall meet the obligations of the Contract in addition to those required by licensure.

Where a State of Wisconsin program, agency or DSP license (including a driver's license) or certification is required to provide a Covered Service, Contractor agrees to notify Purchaser within 2 business days if there is an occurrence of negative findings such as license surrender, suspension, revocation, expiration, or request of forfeiture, fines, plan(s) of correction due to licensing violations that occur.

Contractor acknowledges and agrees that it will perform its obligations hereunder in compliance with all applicable state, local or federal law, rules, regulations and orders. This Agreement shall be interpreted and enforced under the laws and jurisdiction of the State of Wisconsin.

Contractor agrees to work collaboratively with Purchaser and its agents, and other Contractors in the provision of Covered Services to Participants/Service Recipients.

Contractor agrees that in cases of a physical illness or injury of a Participant or Service Recipient, Contractor shall notify the emergency contact as identified in the Referral Form. (Note: Purchaser is not responsible to pay for services related to a physical illness or injury of a Participant or Service Recipient.)

Contractor assures that adequate steps have been taken to safeguard sensitive client and administrative information contained in Purchaser's automated systems. Contractor also assures that only authorized personnel, employees, ISP or subcontractors are accessing the Purchasers automated systems for purposes required under this agreement and not for any other purpose. Further, Contractor also assure that the Contractors and User of the Purchaser's automated systems are aware of Purchaser's Use of technology and limitation of use policies and have adequate network security while accessing the Purchaser's automated systems.

4. COMPENSATION

Payment for services under this Contract will be made upon presentation of a written, itemized and verified statement upon such forms and in such detail as may be required by County.

Basis for payments: This is a cost reimbursement contract. Contractor shall be compensated for the services performed as stated in Attachment I, Schedule of Services to Be Purchased and Attachment II, Payment Method, attached hereto and made a part of this Contract. Final settlement of the Contract will be based on the County review of audit. (See Section 8. "Audit Requirements"). If County has waived the audit requirement under Wisconsin Statute s.46.036 for this Contract, Contractor shall submit an un-audited schedule of program revenue and expenses as a final accounting to determine final settlement under this Contract.

Milwaukee County will not compensate Contractor for service(s) provided by a direct care provider/caregiver prior to having obtained a state-wide criminal background check for said provider as provided for in this Contract.

Milwaukee County will not compensate any Contractor for services rendered by a provider whose credentials are not in conformity with the requirements of both the State of Wisconsin and Milwaukee County, as administered by the Department of Health and Human Services and its respective divisions, and shall so conform throughout the term of this Agreement.

Contractor recognizes that the total service needs of the community may not be met and shall furnish the services within the specific levels stated in the Attachment I. County is unable to guarantee the volume of requests funded by this Contract. If Contractor requires preauthorization of service(s), under no circumstances shall Contractor provide, nor shall Purchaser compensate, for services provided to Service Recipients which have not been preauthorized by Purchaser. Pre Authorization shall follow Purchaser Policies and Procedures, and shall consist, minimally, of electronic or written documentation indicating the name of the Service Recipient, the quantity and type of services being authorized, and the period for

which the authorization is valid. The parties agree that section 66.0135, Wisconsin Statutes, Prompt Pay Law, shall not apply to payment for services provided hereunder.

Pursuant to s.46.036(5m) and s.49.34(5m) of Wisconsin Statutes, as affected by 1993 Wisconsin Act 380, and subject to the limitations and conditions set forth therein, Contractor may retain a reserve on programs funded by the state Department of Health Services (DHS), Department of Work Force Development (DWD), Department of Children & Families (DCF), and Department of Corrections (DOC) when revenue exceeds allowable expenses. Under Act 380, Contractor may retain as a reserve any surplus which may be created if the amount paid by County for rate-based services under this contract exceeds the allowable costs attributable to those services as determined by the Wisconsin Department of Health Services (DHS) Allowable Cost Policy Manual, Wisconsin Department of Children and Families Allowable Cost Policy manual and the Wisconsin Provider Agency Audit Guide, 1999 revision issued by WI Department of Corrections and Workforce Development or Department of Health Service Audit Guide (DHSAG), Latest Revision issued by Wisconsin Department of Health Services.

The statutes allow reserves when the agency is a non-profit, non-stock corporation organized under Wisconsin Statute 181 and the agency provides client services on the basis of a unit rate per unit of client service (Units-times-price agreements). Retained and accumulated reserves shall not be considered an allowable cost for purposes of calculating the amount of such a surplus. County reserves the right to require the Contractor to repay to the County the full amount of any such surplus.

Wisconsin Statute 46.036(3c) indicates that Contracts for proprietary (for-profit) agencies may include a percentage add-on for profit according to the rules promulgated by the Wisconsin Department of Health Services (DHS). The profit and reserve are limited by expenditures on allowable costs that the Contractor incurs in performing the services purchased under this Contract.

Allowable costs, profit, and reserve are defined in the Wisconsin Department of Health Services *Allowable Cost Policy Manual* available online at:

http://www.DHS.state.wi.us/grants/Administration/ACPM.HTM

and Wisconsin Department of Children and Families Allowable Cost Policy (online at dcf.wisconsin.gov/contractsgrants/pdf/allowable_cost_manual.pdf).

The maximum allowable profit is 10%. Contractor is not allowed to retain both a reserve and a profit on the same contract/agreement for the same period.

All Milwaukee County Department of Health and Human Services Purchase of Service contracts, regardless of payment method, are ultimately cost reimbursement contracts, as defined by Wisconsin Statutes §46.036. Reimbursable costs, also referred to as allowable costs, are defined by federal regulation, Wisconsin statute and regulation, and contract terms between the Contractor and Milwaukee County.

For each kind of Contractor (i.e., non-profit, for profit), there is a set of Federal principles for determining allowable costs. Allowability of costs shall be determined in accordance with the cost principles applicable to the entity incurring the costs. Thus, allowability of costs

incurred by non-profit organizations is determined in accordance with the provisions of OMB Circular A-122, Cost Principles for Non-Profit Organizations. The allowability for costs incurred by hospitals is determined in accordance with the provisions of Appendix E of 45 CFR part 74, Principles for Determining Costs Applicable to Research and Development Under Grants and Contracts with Hospitals. The allowability of costs incurred by commercial organizations and those non-profit organizations listed in Attachment B to Circular A-122 is determined in accordance with the provisions of the Federal Acquisition Regulation (FAR) at 48 CFR Part 31 - Contract Cost Principles and Procedures.

Allowable Costs are also governed by Wisconsin statute and regulation. Those rules are found in the Wisconsin Department of Health Services (DHS) Allowable Cost Policy Manual, Wisconsin Department of Children and Families Allowable Cost Policy, the Wisconsin DHS Provider Agency Audit Guide, 1999 revision issued by WI Department of Corrections and Workforce Development or Department of Health Services Audit Guide (DHSAG), Latest Revision issued by the Wisconsin Department of Health Services, and Wisconsin Statutes §46.036.

In addition, Milwaukee County Purchase of Service contracts limit allowability of costs. The Milwaukee County Department of Health and Human Services Year 2014 Purchase of Service Guidelines - Program and Technical Requirements, and Contractor's Year 2014 application with all required submission including final approved budget are incorporated herein by reference and made a part of this Contract as if physically attached hereto and Contractor shall comply therewith. Those costs that are allowable under the federal and Wisconsin rules and regulations, but which exceed the individual budget line amounts of the approved program budget by the greater of 10% of the budget line item or 3% of the total budgeted costs are unallowable under this contract. Costs falling within a budget line item for which there are no dollars budgeted are unallowable in their entirety. In order to be compensated for costs which exceed the individual budget line amounts of the approved program budget by the greater of 10% of the budget line item or 3% of the total budgeted costs, Contractor must submit to County a proposed amended budget along with detailed justification for the proposed budget prior to the end of the contract year to which the budget relates. Contractor will not be compensated for costs in excess of the above limitations until the proposed amended budget has been received, reviewed, and accepted by the County in its entirety. County reserves the right to disallow budget change proposed by Contractor in part or in its entirety.

Limitations to allowable costs apply to the monthly expense submissions for those contracted services compensated on either the "cost reimbursement" or the "lower of cost incurred or units provided times unit rate" basis. Limitations on allowable costs also apply to the final accounting for program costs in the annual audit provided by the Contractor.

Payor of Last Resort

Milwaukee County human service contract funds are intended to be the "payor of last resort" after all other public and private funds restricted to the services being purchased, including medical insurance and restricted contributions, have been exhausted. Any surplus restricted program revenues (temporarily restricted net assets) are to be returned to the County as unspent funds.

No funds within this Agreement may be used to supplant Health Insurance, or services funded by, or eligible to be funded by Medicaid Title XIX, any Medicaid Waiver program, a Health Maintenance Organization, including Medicaid HMOs, Wisconsin Family Care or any other Care Management Organizations (CMO), IRIS, Birth to Three, as applicable, or other special managed care programs.

PROVISIONS FOR PURCHASED OR LOANED PROPERTY

Any furniture, fixtures or equipment (hereinafter called "property") purchased by Contractor or County, with program funds under this Contract, remains the sole property of County, and in its discretion, County may require such property to be returned to County upon termination of the Contract or any certified service related to the use of the property. An inventory of property acquisitions expensed under this contract must be maintained by Contractor. Property expenditures of \$5,000 or more per item are not an allowable cost under this Contract. A listing of such inventory must be submitted to County before the final payment can be made to Contractor.

Any furniture, fixtures, or equipment including software and software licenses (herein referred to as "Property") provided to Contractor by County under this Contract, or other agreement(s), remains the sole property of County, and in its discretion, County may require such property to be returned to County upon termination of this Contract, or other agreement(s), or any certified service related to the use of the property. The use of County property shall be limited to the provision of services under this Contract, or other agreement(s) between County and Contractor. Contractor assumes all risk of loss and damage to Property for any cause and agrees that the Property will be returned to County in as good condition as when issued to the Contractor, normal wear and tear excepted. Normal wear and tear shall be defined by County. Returned condition shall be assessed and determined by County. If Contractor is unable to return the equipment in as good condition as when received, normal wear and tear excepted, the Contractor will be financially liable for a dollar amount determined by County up to but not exceeding the replacement value of the Property. In the event of loss or damage to the loaned Property, the County may recover damages owed under this Contract or any other agreement(s) with Contractor by means of a setoff against amounts due to Contractor from any subsequent payments due under this Contract, or from future agreements, or due under any other service agreement with the A listing of such property inventory will be attached by "Exhibit P - - Property Inventory" or by attachment to loan agreement(s).

5. BILLING

Contractors shall have E-Mail access and the ability to submit electronic, Internet-based online invoices to Milwaukee County DHHS Accounting or designee. All billing and invoice formats and procedures shall be determined by Milwaukee County.

Contractor shall provide County with billings for services provided in accordance with Attachment II, Payment Method and shall be paid in accordance therewith. Contractor agrees to comply with all policies and procedures related to documentation of services provided under this contract as a condition of billing for said services, and shall submit to County billing reports for services provided on or before the tenth (10th) working day of the month following delivery of purchased services. Payment by County of Contractor's invoice does not absolve the Contractor from a final accounting and settlement upon submission and

review of Contractor's annual audit, or from audit recoveries arising from an on-site audit of Contractor's case records or other documentation in support of services billed. Billing reports received twenty (20) days after the termination of this Contract will not be considered for payment by County.

6. RECORD KEEPING AND ACCESS TO RECORDS

The Contractor shall maintain in secure and locked cabinets, individualized client files that include all appropriate assessments, service and treatment plans, case contact notes, and all other documents as determined by County.

In accordance with 42 CFR § 431.107 of the federal Medicaid regulations, the Contractor agrees to keep any records necessary to document the extent of services provided to recipients for a period of 7 years.

Upon request, Contractor further agrees to furnish to Milwaukee County DHHS, the Wisconsin DHS, the federal Department of Health and Human Services, or the state Medicaid Fraud Control Unit, any information regarding services provided and payments claimed by the Contractor for furnishing services under any Milwaukee County DHHS program, Wisconsin Medicaid, or Wisconsin Medicaid Waiver program. For state policy related to record retention see DHS 106.02, Wis. Administrative Code or the DLTC numbered memo addressing record retention available at

http://dhs.wisconsin.gov/dsl_info/NumberedMemos/DSL/CY_2001/NMemo2001-07.htm. This provision shall survive the termination of this Agreement regardless of the reason.

Contractor agrees to provide Covered Services on a one-on-one, face-to-face basis unless otherwise specified by County Policy or Procedure.

Contractor agrees to maintain Service Documentation as required by this Contract and Policies and Procedures including a service specific consent as required by applicable DHS Administrative Code for services, signed and dated by the Service Recipient and parent/guardian, if applicable.

Contractor agrees to maintain and retain Service Documentation as required by all applicable Policies and Procedures. See definition of Case Notes for required elements. County reserves the right not to pay for units of Covered Services reported by Contractor that are not supported by Service Documentation required under this Contract.

Any correction, creation of, or addition to Service Documentation after billing must receive prior approval. Service Documentation otherwise created or obtained subsequent to billing or in response to site review findings will not be accepted as support for payment (including affidavits).

Contractor agrees to ensure that Direct Service Providers complete and retain Case Notes prior to billing for Covered Services. In no case shall Case Notes be completed more than 30 days after the provision of Covered Service unless otherwise specified in County Policies and Procedures.

It is further understood that in the case of a minor, case records shall be retained until the participant becomes 19 years of age or until seven (7) years after treatment or other services have been completed, whichever is later.

Contractor shall maintain such records and financial statements as required by state and federal laws, rules, and regulations. Contractor shall retain all documentation necessary to adequately demonstrate the time, duration, location, scope, intervention, and effectiveness of services rendered under the Contract. County reserves the right to deny payment of, or require repayment for units of services reported by Contractor that are not supported by documentation required under this Contract notwithstanding that Contractor may have provided the services.

Contractor shall maintain and, upon request, furnish to County, at no cost to County, any and all information requested by County relating to the quality, quantity, and cost of services covered by this Contract and shall allow authorized representatives of County, the Milwaukee County Department of Audit, and County's funding sources to have access to all records necessary to confirm Contractor's compliance with law and the specifications of this Contract and any current relevant policies and procedures. Purchaser may require submission of requested documentation prior to payment for Covered Services. This provision shall survive the termination of this Agreement regardless of the reason.

It is agreed that County representatives, the Milwaukee County Department of Audit and representatives of appropriate Federal, State or local agencies, not inconsistent with the applicable provisions of state and federal laws and regulations relating to the confidentiality of case records, shall have the right to inspect at all reasonable times case records, medical records, program and financial records and such other records of Contractor as may be requested to evaluate or confirm Contractor's program objectives, client case files, costs, rates and charges for the care and service or as may be necessary to evaluate or confirm Contractor's delivery of the care and service. This provision shall survive the termination of this Agreement regardless of the reason.

Such reviews may be conducted for a period of at least seven (7) years following the latter of Agreement termination, or receipt of audit report, if required. It is further agreed that files, records and correspondence for this engagement must be retained for a period of at least seven (7) years from the date of issuance of certified financial and compliance audit reports. Records shall be retained beyond the seven-year period if an audit or review is in progress or exceptions have not been resolved. This provision shall survive the termination of this Agreement regardless of the reason.

County has authority to adjust pending billings and payments due to the Contractor against any overpayment or any recovery resulting from site review, CPA reviews or other reviews by Milwaukee County representatives and/or representatives of any other local, state, or federal governmental unit. This provision shall survive the termination of this Agreement regardless of the reason.

The Contractor consents to the use of statistical sampling and extrapolation as the means to determine the amounts owed by the Contractor to the DHHS or the Wisconsin Medicaid program as a result of an investigation or audit conducted by the DHHS or its agents, the Milwaukee County Department of Audit, the Wisconsin DHS, the Department of Justice Medicaid Fraud Control Unit, the federal Department of Health and Human Services, the Federal Bureau of Investigation, or an authorized agent of any of these. This provision shall survive the termination of this Agreement regardless of the reason.

County reserves the right to submit findings resulting from quality or fiscal reviews to appropriate federal, state or local agencies and licensing/credentialing entities. This provision shall survive the termination of this Agreement regardless of the reason.

PROVISION FOR DATA AND INFORMATION SYSTEMS COMPLIANCE

Contractor shall either utilize computer applications that comply with County standards in maintaining program data related to the contract, or bear full responsibility for the cost of converting program data into formats useable by County applications. Contractor will comply with all applicable federal, state and county laws, rules and regulations, applicable to data processing and information systems compliance as may be applicable including, but not limited to, the provisions of the Milwaukee County Resolution on Security Policy and Guidelines, File No. 92-546, as it applies to data processing security and the "Milwaukee County Use of Technologies Policy" (See:

http://county.milwaukee.gov/ImageLibrary/Public/MilwaukeeCounty/AdministrativeServices/IMSD/MC_Tech_Policy.pdf.).

7. INSPECTION OF PREMISES AND COUNTY SITE AUDITS

Contractor shall allow visual inspection of Contractor's premises to County representatives and to representatives of any other local, state, or federal government unit. Inspection shall be permitted without formal notice at any times that care and services are normally being furnished.

Contractor and County mutually agree that County or County's representatives including the Milwaukee County Department of Health and Human Services and the Milwaukee County Department of Audit as well as state and federal officials, reserve the right to review Board approved by-laws, minutes, policies and procedures, employee files and employment records, client attendance and case records, billing and accounting records, financial statements, certified audit reports, auditor's supporting work papers and computer disks, or other electronic media, which document the audit work, and perform such additional audit procedures as may be deemed necessary and appropriate, it being understood that additional overpayment refund claims or adjustments to prior claims may result from such reviews. Such reviews may be conducted for a period of at least seven (7) years following the latter of Contract termination, or receipt of audit report, if required.

8. AUDIT REQUIREMENTS

A. Contractor shall submit to Milwaukee County, on or before June 30, 2015 or such later date that is mutually acceptable to Contractor and Milwaukee County, two (2) original copies of an Agency-wide Audit for Calendar Year 2014 if the total amount of annual funding provided by Milwaukee County through this and other contracts and agreements is \$25,000 or more, unless waived by Milwaukee County. Contractor may request, and with written consent of County provide an annual Program Audit in lieu of the annual Agency-wide Audit. The audit shall be performed by an independent certified public accountant (CPA) licensed to practice by the State of Wisconsin. CPA audit reports are required under Wisconsin Statutes, Section 46.036 (4)(c). This provision shall survive the termination of this Agreement regardless of the reason.

Contractors reporting on a fiscal year other than a calendar year shall be considered in compliance with the audit requirements upon submittal of Contractor's fiscal year audit, meeting the audit requirements in Section Eleven, part A subparts (1),(2), and (3) below, within 180 days of the fiscal year closing, plus financial statements including required supplemental schedules covering the period from the start of the fiscal year beginning in 2014 through December 31, 2014, compiled by a CPA licensed to practice by the State of Wisconsin. Compiled supplemental schedules are due by June 30, 2015. This provision shall survive the termination of this Agreement regardless of the reason.

Non-profit Contractors who received aggregate federal financial assistance of \$500,000 or more, either directly or indirectly, shall submit to Milwaukee County, on or before June 30, 2015 or such later date that is mutually acceptable to Contractor and County, two (2) original copies of a certified audit report for Calendar Year 2014 performed in accordance with the Office of Management and Budget (OMB) Circular A-133, Audits of States, Local Governments and Non-Profit Organizations (on line at www.whitehouse.gov/omb/circulars) if the Contractor meets the criteria of that Circular for needing an audit in accordance with that Circular. This provision shall survive the termination of this Agreement regardless of the reason.

All audits submitted by Contractor per above requirements shall also be conducted in conformance with the following standards:

- 1. The Wisconsin *Provider Agency Audit Guide*, 1999 revision *issued by WI Department of* Corrections and Workforce Development *or Department of Health Service Audit guide (DHSAG) Latest Revision* issued by Wisconsin Departments of Health Services (on line at www.DHS.state.wi.us/grants);
- 2. Standards applicable to financial audits contained in *Government Auditing Standards* (GAS), December 2011 Revision published by the Comptroller General of the United States; and
- 3. Generally accepted auditing standards (GAAS) adopted by the American Institute of Certified Public Accountants (AICPA).

Requests for substitution of Program Audit for Agency-wide Audit, audit waiver, and/or extension requests must be in writing. Requests for substitution of Program Audit for Agency-wide Audit, audit waiver and/or extension requests must be sent to the following

address no later than five months after the end of the Contractor's fiscal year, or such later date mutually agreed to by Contractor and Milwaukee County. Extensions of the deadline for submission of the audit are at the sole discretion of County. If Contractor determines an extension is necessary, County must receive a request for an extension not later than thirty (30) days prior to the due date for the audit. A request for an extension must include:

- (1) an explanation as to why an extension is necessary;
- (2) the date upon which the County will receive the audit;
- (3) the unaudited financial statements of the Contractor; and,
- (4) any additional information Contractor deems relevant to County's determination.

No extension will be granted for a period greater than ninety (90) days beyond the original date that the audit was due. Requests for extension of audit due date or waiver must be submitted to:

Milwaukee County Department of Health and Human Services
Contract Administrator
1220 W. Vliet Street, Suite 300
Milwaukee, WI 53205

Financial Statements shall be prepared in conformity with accounting principles generally accepted in the United States of America and on the accrual basis of accounting. Contractor must request, and receive written consent of County to use other basis of accounting in lieu of accrual basis of accounting. CPA audits and reports referenced above shall contain the following Financial Statements, Schedules and Auditors' Reports:

(1) Financial Statements and Supplemental Schedules:

- a. Comparative Statements of Financial Position For Agency-wide audits only.
- b. **Statement of Activities** For Agency-wide audits only.
- c. Statement of Cash Flows For Agency-wide audits only.
- d. Program Revenue and Expense Schedule for each program or activity identified as a single line item on Attachment I of the Purchase of Service Contract, or for each facility provided under a Community Based Residential Facility (CBRF), Adult Family Home (AFH), or Children's Residential Program Contract with the County, or each program under a Fee-for-Service Agreement with Milwaukee County. If more than one program is provided under this Contract, or any other Contract with this or other divisions of Milwaukee County DHHS, or under a Community Based Residential Facility (CBRF), Adult Family Home (AFH) or Children's Residential Program Contract a separate Program Revenue and Expense Schedule must be prepared for each program or facility. For program schedules required under this contract, the schedule must follow the format and content of the sample

schedule contained in the Milwaukee County Department of Health and Human Services Year 2014 Purchase of Service Guidelines, Technical Requirements – Audit and Reporting section. Do not combine multiple line items on the Schedule of Program Revenue and Expenses into a single line item or separate a single line item into multiple line items.

- e. Schedule of Revenue and Expense by Funding Source (Agency-wide) is required of all Contractors. This schedule must follow the format and content of the sample schedule contained in the Milwaukee County Department of Health and Human Services Year 2014 Purchase of Service Guidelines, Technical Requirements Audit and Reporting booklet. Do not combine multiple line items into a single line item or separate a single line item into multiple line items.
- f. Allowable administrative and other allocated overhead (collectively, indirect costs) will be limited to 10% of net allowable direct program costs (excluding such allocated costs) for agencies/Contractors electing to provide a program audit in lieu of an agency-wide audit.
- g. Reserve Supplemental Schedule is required for all non-profit Contractors that provide participant services on the basis of a unit rate per unit of participant service (units-times-price agreements). A separate schedule must be completed for each contract/facility, or for each program under a Fee-for-Service Agreement with County. For Contractors whose fiscal year is other than a calendar year, the period covered by the schedule must be the most recently completed calendar year for all DHHS-funded programs.

The schedule must identify revenue from each Purchaser (earned under each contract) separately, and include total units of service provided to all Purchasers for each contract/facility and total units of service provided under the Contract with County, as well as the items required by the *Provider Agency Audit Guide* (Section 7.1.6), or Department of Health Service Audit Guide (DHSAG), Latest Revision for the most recently completed calendar year. The schedule and allowable additions to reserves shall be by contract/facility or by program category. Schedule of Profit for For-Profit Contractors Which Provide Participant Care.

h. For-profit Contractors shall include a schedule in their audit reports showing the total allowable costs and the calculation of the allowable profit by contract/facility, or for each rate-based program (service) within a facility. Wis. Stat. 46.036 (3) (c) indicates that contracts for proprietary agencies may include a percentage add-on for profit according to the rules promulgated by the Department of Health Services. These requirements are in the DHS Allowable Cost Policy Manual, which indicates that allowable profit is determined by applying a percentage equal to 7½ % of net allowable operating costs plus 15% applied to the net equity, the sum of which may not exceed 10% of net allowable operating costs. For agencies/Contractors electing to provide a program audit in lieu of an agency-wide audit,

- allowable profit will be restricted to 7 1/2% of net allowable operating costs of the program only, without regard to any net assets of the program.
- Units of service provided under the Contract, if not disclosed on the face of i. the financial statements, are required for Contractors that provide participant services on the basis of a unit rate per unit of participant service (units-timesprice agreements). Contractor's auditors shall review and report on the extent of support for the number of units for each type of service billed to County, and compare units billed to Contractor's accounting/billing records that summarize units provided per participant. auditors shall reconcile billing records to supporting underlying documents in participant case files on a test basis, and report on any undocumented units billed to County that exceed the materiality threshold of the DHS Provider Agency Audit Guide, 1999 revision issued by WI Department of Corrections and Workforce Development or Department of Health Service Audit Guide (DHSAG), Latest Revision issued by Wisconsin Departments of Health Services. The disclosure must include total units of service provided to all Participants for each program, facility, or rate-based program within a facility; and total units of service provided under the Contract or Service Agreement with County for the most recently completed calendar year.
- j. Notes to financial statements including disclosure of related-party transactions, if any (See Section 20 "Required Disclosures" of this Contract). Rental cost under less-than-arms-length leases are allowable only up to the amount that would be allowed had title to the property vested with the Contractor. Rental cost under sale and leaseback arrangements are allowable only up to the amount that would be allowed had the Contractor continued to own the property.
 - Contractor's auditors must disclose the actual costs of ownership, by property, for the property(ies) in question, as well as the amount of such costs to be allocated to each DHHS program, the amount of rent originally charged, and the amount of such rent that is an unallowable cost.
- k. Schedule of Federal and State Awards broken down by contract year. The schedule shall identify the name of the Milwaukee County Department as pass-through grantor, the contract number as pass-through grantor's identifying number, and the program name and number from the Attachment I of the Contract. Each program under County Contract must be reported as a separate line item by contract year.

(2) Independent Auditors Reports and Comments:

a. "Opinion on Financial Statements and Supplementary Schedule of Expenditures of Federal and State Award" including comparative statements of financial position, and related statements of activities and cash flow of entire agency.

Or, for Program Audits

"Opinion on the Financial Statement of a Program in Accordance with the Program Audit."

b. Report on Compliance and Internal Control over Financial Reporting Based on an Audit of Financial Statements Performed in Accordance with Government Auditing Standards (GAS), and the *Provider Agency Audit Guide*, 1999 revision issued by WI Department of Corrections and Workforce Development or Department of Health Service Audit Guide (DHSAG), Latest Revision issued by Wisconsin Department of Health Services.

Or, for Program Audits

"Report on Compliance with Requirements Applicable to the Program and on Internal Control over Compliance Performed in Accordance with the Program Audit."

- c. "Report on Compliance with Requirements Applicable to Each Major Program and Internal Control over Compliance in Accordance with OMB Circular A-133" (applicable only if the audit is also in accordance with OMB Circular A-133).
- d. Schedule of findings and questioned costs to include:
 - Summary of auditor's results on financial statements, internal control over financial statements and compliance, and if applicable; the type of report that the auditor issued on Compliance for Major Federal Programs;
 - Findings related to the financial statements of the Contractor or of the program which are required to be reported in accordance with Generally Accepted Government Auditing Standards (GAGAS);
 - Findings and Questioned Costs for Federal Awards which shall include audit findings as defined in section .510(a) of OMB Circular A-133, if applicable;
 - Doubt on the part of the auditors as to the auditee's ability to continue as a going concern;
 - Other audit issues related to grants/contracts with funding agencies that require audits to be performed in accordance with the Provider Agency Audit Guide, 1999 revision issued by WI Department of Corrections and Workforce Development or Department of Health Service Audit Guide (DHSAG), Latest Revision issued by Wisconsin Department of Health Services; and
 - Whether a Management Letter or other document conveying audit comments was issued as a result of the audit.
- e. A copy of the Management Letter or other document with auditor's comments issued in conjunction with the audit shall be provided to County, along with Management's response to the Management Letter. If no Management Letter

was issued, the schedule of findings and questioned costs shall state that no Management Letter was issued.

(3) Contractor Prepared Schedules and Responses:

- a. Schedule of prior-year audit findings indicating the status of prior-year findings related to County funded programs. The schedule shall include the items required by the *Provider Agency Audit Guide*, 1999 Revision issued by WI Department of Corrections and Workforce Development, or *Department of Health Service Audit Guide (DHSAG)*, *Latest Revision* issued by Wisconsin Departments of Health Services. If no prior year findings were reported, the schedule must state that no prior year findings were reported.
- b. Corrective Action Plan (CAP), for all current-year audit findings related to County funded programs and/or financial statements of the Contractor. The Corrective Action Plan shall be prepared by Contractor, and must include the following: name of the contact person responsible for the preparation and implementation of the corrective action plan; the planned corrective action; and, the dates of implementation and anticipated completion.
- c. Management's responses to each audit comment and item identified in the auditor's Management Letter.

(4) General:

The following is a summary of the general laws, rules and regulations with which the auditor should be familiar in order to satisfactorily complete the audit.

- a. Government Auditing Standards, (Standards for Audit of Governmental Organizations, Programs, Activities, and Functions), December 2011 Revision.
- b. OMB Circular A-133, Audits of States, Local Governments and Non-Profit Organizations, including revisions published in *Federal Register* 06/27/03.
- c. OMB Circular A-133, Appendix B: 2000 Compliance Supplement
- d. OMB Circular A-122, Cost Principles for Non-Profit Organizations.
- e. OMB Circular A-87, Cost Principles for State, Local and Indian Tribal Governments.
- f. OMB Circular A-21, Cost Principles for Educational Institutions.
- g. Appendix E of 45 CFR part 74, Principles for Determining Costs Applicable to Research and Development Under Grants and Contracts with Hospitals.
- h. The allowability of costs incurred by commercial organizations and those non-profit organizations listed in Attachment B to OMB Circular A-122 is determined in accordance with the provisions of the Federal Acquisition Regulation (FAR) at 48 CFR Part 31 Contract Cost Principles and Procedures.

- i. OMB Circular A-102, Grants and Cooperative Agreements with State and Local Governments.
- j. OMB Circular A-110, Uniform Administrative Requirements for Grants and Agreements With Institutions of Higher Education, Hospitals, and Other Non-Profit Organizations.
- k. Wisconsin State Statutes, Sections 46.036, 49.34, Purchase of Care and Services.
- 1. State of Wisconsin, Department of Administration Single Audit Guidelines Latest Revision.
- m. State of Wisconsin Department of Health Services, Provider Agency Audit Guide 1999 Revision issued by WI Department of Corrections and Workforce Development.
- n. Department of Health Services Audit Guide (DHSAG) Latest Revision issued by Wisconsin Department of Health Services.
- o. State of Wisconsin Department of Health Services, Allowable Cost Policy Manual Latest Revision.
- p. State of Wisconsin Department of Children and Families Allowable Cost Policy Manual, Latest Revision.
- q. AICPA Generally Accepted Auditing Standards.
- B. Contractor hereby authorizes and directs its Certified Public Accountant, if requested, to share all work papers, reports, and other materials generated during the audit with County or County's representative(s) including the Milwaukee County Department of Health and Human Services and the Milwaukee County Department of Audit as well as state and federal officials. Such direct access shall include the right to obtain copies of the work papers and computer disks, or other electronic media, which document the audit work. Contractor shall require its CPA to retain work papers for a period of at least seven (7) years following the latter of Contract termination, or receipt of audit report by County. This provision shall survive the termination of this Agreement regardless of the reason.
- C. Contractor and County mutually agree that County or County's representative(s), including the Milwaukee County Department of Health and Human Services and the Milwaukee County Department of Audit, as well as state and federal officials, reserve the right to review certified audit reports, supporting workpapers, or financial statements, and perform additional audit work as deemed necessary and appropriate, it being understood that additional overpayment refund claims or adjustments to prior claims may result from such reviews. Such reviews may be conducted for a period of at least seven (7) years following the latter of contract termination, or receipt of audit report, if required. This provision shall survive the termination of this Agreement regardless of the reason.
- D. Contractors reporting on a <u>fiscal year other than a calendar year shall be considered in compliance with contract reporting requirements</u> upon submittal of the following unaudited schedules:

- (1) A schedule of revenue and allowable costs allocated by funding source, and by program, covering the period from the end of the Contractor's fiscal year ended in 2014 through December 31, 2014, for each program or activity identified as a fee for service agreement with Milwaukee County, referenced as a line item on the Attachment I of a Purchase of Service Contract and for each Community Based Residential Facility (CBRF).

 The schedule(s) shall be compiled by Contractor's independent public accountant, with an accountant's compilation report, for the period from the close of Contractor's fiscal year through the end of the calendar year, on or before June 30, 2015, or such later date that is mutually acceptable to Contractor and County.
- (2) If Contractor's fiscal year encompasses two contract years, Contractor shall submit a "bridging schedule" prepared by a CPA, which identifies program revenues and allowable costs for each of the two calendar year contract periods. The "bridging schedule" shall reconcile the two calendar year contract periods to the fiscal year totals for each program reported in the most current fiscal year audit report.
- E. Contractor shall maintain records for audit purposes for a period of at least seven (7) years following the latter of contract termination or receipt of audit report by County. This provision shall survive the termination of this Agreement regardless of the reason.

F. Contractor's Subrecipients

Contractors who subcontract with other providers for the provision of care and services are required by federal and state regulations to monitor their subrecipients.

Contractors shall have on file, and available for review by Milwaukee County and its representatives, copies of subrecipient's CPA audit reports and financial statements. These reports and financial statements shall be retained for a period of at least seven (7 years following the latter of contract termination, or receipt of audit report, if required. This provision shall survive the termination of this Agreement regardless of the reason.

Subrecipient shall maintain and, upon request, furnish to County, at no cost to County, any and all information requested by County relating to the quality, quantity, or cost of services covered by the subcontract and shall allow authorized representatives of County, the Milwaukee County Department of Audit and County's funding sources to have access to all records necessary to confirm subrecipient's compliance with law and the specifications of this Contract and the subcontract. This provision shall survive the termination of this Agreement regardless of the reason.

It is agreed that County representatives, the Milwaukee County Department of Audit and representatives of appropriate state or federal agencies shall have the right of access to program, financial and such other records of subrecipient as may be requested to evaluate or confirm subrecipient's program objectives, participant case files, costs, rates and charges for the care and service, or as may be necessary to evaluate or confirm subrecipient's delivery of the care and service. It is further understood that files, records and correspondence for subcontracted engagement must be retained by subrecipient for a period of at least seven (7) years following the latter of contract termination, or receipt of subrecipient's audit report, if

required. This provision shall survive the termination of this Agreement regardless of the reason.

Subrecipient shall allow visual inspection of subrecipient's premises to County representatives and to representatives of any other local, state, or federal government unit. Inspection shall be permitted without formal notice at any time that care and services are being furnished.

G. Failure to Comply with Audit Requirements:

If Contractor fails to have an appropriate audit performed or fails to provide a complete audit-reporting package to the County as required by this Contract within the specified timeframe, the County may:

- a. Conduct an audit or arrange for an independent audit of Contractor and charge the cost of completing the audit to Contractor;
- b. Charge Contractor for all loss of Federal or State aid or for penalties assessed to County because Contractor did not submit a complete audit report within the required time frame;
- c. Disallow the cost of the audit that did not meet the applicable standards; and/or
- d. Withhold or suspend any or all payments due the Contractor from County.
- e. Suspend, reduce or terminate the Contract/Agreement, or take other actions deemed by County to be necessary to protect the County's interests.
- f. In the event of selection by County of an organization or individual to complete an audit of Contractor's financial statements, County shall withhold from future payments due to the Contractor from County an amount equal to any additional costs incurred by the County for the completion of an audit of Contractor's records by an auditor selected by County.
- g. County may withhold or recover a sum of \$1,500.00 from payments due to the Contractor from County as liquidated damages.
- h. These provisions shall survive the termination of this Agreement regardless of the reason.
- i. Upon receipt of the audit report, County will complete preliminary review of all audits received to determine whether additional information is required and notify Contractor of any additional information required to complete review. Once the complete audit is received, County will complete a compliance review and notify Contractor of County's actions on the audit report.
- j. Contractor agrees to submit to DHHS plans for correcting weaknesses identified in audit reviews. Failure on the part of the Contractor to comply with these requirements

shall result in withholding of any payments otherwise due the Contractor from DHHS and ineligibility for future agreements/contracts with DHHS until six months after such time as these requirements are met. This provision shall survive the termination of this Agreement regardless of the reason.

- k. Contractor agrees that the DHHS is entitled to repayment of amounts identified as a result of the audit required under this section and acknowledges that failure to repay such amounts may result in legal action as determined by Milwaukee County Corporation Counsel. Interest and any legal expenses incurred by DHHS in collection of these amounts shall be charged the Contractor on outstanding repayments as set forth in s46.09 (4) (h) Milwaukee County General Ordinances. This provision shall survive the termination of this Agreement regardless of the reason.
- 1. Contractor and County mutually agree that the Milwaukee County DHHS or its agents, the Milwaukee County Director of Audits, as well as state and federal officials, reserve the right to review certified audit reports or financial statements and perform additional audit work as deemed necessary and appropriate. It is understood that additional overpayment refund claims or adjustments to prior claims may result from such reviews. This provision shall survive the termination of this Agreement regardless of the reason.
- m. The Contractor consents to the use of statistical sampling and extrapolation as the means to determine the amounts owed by the Contractor for any DHHS programs, or Fee-for-Service Provider Networks as a result of an investigation or audit conducted by DHHS or its agents, the Milwaukee County Department of Audit, the Wisconsin Department of Health Services, the Department of Justice Medicaid Fraud Control Unit, the federal Department of Health and Human Services, the Federal Bureau of Investigation, or an authorized agent of any of these. This provision shall survive the termination of this Agreement regardless of the reason.
- n. If the County has waived the audit requirement for this Contract under Wisconsin Statute s.46.036, this waiver does not absolve Contractor from meeting any federal audit requirements that may be applicable or any audit requirements of other contracts. Waiver of the audit, or failure of Contractor to receive County funding under this Contract and other County Agreements at a level that would require an audit does not absolve Contractor from submitting an un-audited schedule of program revenue and expenses as a final accounting to determine final settlement under this Contract. This provision shall survive the termination of this Agreement regardless of the reason.

9. <u>NON-DISCRIMINATION, AFFIRMATIVE ACTION, CIVIL RIGHTS, AND EQUAL EMPLOYMENT OPPORTUNITY</u>

No eligible client or patient shall be unlawfully denied services or be subjected to discrimination because of age, race, religion, color, national origin, sex, sexual orientation, location, handicap, physical condition, or developmental disability as defined in s. 51.01(5) Wisconsin Statutes.

Contractor agrees not to unlawfully discriminate against any employee or applicant for employment because of age, race, religion, color, national origin, sex, sexual orientation, handicap, physical condition, or developmental disability as defined in s. 51.01(5) Wisconsin Statutes.

Contractor agrees to comply with the provisions of Section 56.17 County General Ordinances which is attached hereto by reference and incorporated herein as though fully set forth herein.

10. <u>INDEMNITY & INSURANCE</u>

- A. Contractor agrees to the fullest extent permitted by law, to indemnify, defend and hold harmless, the County, its officers and employees, from and against all loss or expense including costs and attorney's fees by reason of liability for damages including suits at law or in equity, caused by any wrongful, intentional, or negligent act or omission of the Contractor, or its (their) agents or Subcontractor(s) or Independent Service Providers, which may arise out of or are connected with the activities covered by this Agreement.
- B. Contractor agrees to evidence and maintain proof of financial responsibility to cover costs as may arise from claims of tort, malpractice, errors and omissions, statutes and benefits under Workers' Compensation laws and/or vicarious liability arising from employees, board members and volunteers. Such evidence shall include insurances covering Workers' Compensation claims as required by the State of Wisconsin, Commercial General Liability and/or Business Owner's Liability, Automobile Liability and Professional Liability (where applicable) in the minimum amounts listed below. Contractor must obtain all required coverage or confirm that applicable coverage has been obtained by County approved Independent Service Provider(s) or approved Subcontractor(s).
- C. Automobile insurance that meets the Minimum Limits as described in this Contract is required for all agency vehicles (owned, non-owned, and/or hired). In addition, Contractor shall have Automobile Liability Insurance that meets the Minimum Limits for non-owned and/or hired autos as described in this Contract.

Contractor hereby certifies that Contractor's Direct Service Providers who use personal vehicles for any purpose related to the provision of Covered Services have in effect insurance policies in companies licensed to do business in the State of Wisconsin providing protection against all liability, including public liability and property damage, arising out of the use of their automobiles during the course of their employment. Contractor further certifies that said Direct Service Providers have a Driver's License valid in the state of Wisconsin.

- D. If the services provided under the contract constitute professional services, Contractor shall maintain Professional Liability coverage as listed below. Treatment providers (including psychiatrists, psychologists, social workers) who provide treatment off premises must obtain General Liability coverage (on premises liability and off-premise liability), to which Milwaukee County is added as an additional insured, unless not otherwise obtainable.
- E. It being further understood that failure to comply with insurance requirements may result in suspension:

TYPE OF COVERAGE	MINIMUM LIMITS
Wisconsin Workers' Compensation Employer's Liability	\$100,000/\$500,000/\$100,000
Commercial General and/or Business Owner's Liability	
Bodily Injury & Property Damage (Incl. Personal Injury, Fire, Legal	\$1,000,000 - Per Occurrence
Contractual & Products/Completed Operations)	\$1,000,000 - General Aggregate
Automobile Liability Bodily Injury & Property Damage	\$1,000,000 Per Accident
All Autos - Owned, Non-Owned and/or Hired Uninsured Motorists	Per Wisconsin Requirements
Professional Liability **	
To include Certified/Licensed Mental Health and AODA Clinics and Providers and	\$1,000,000 Per Occurrence \$3,000,000 Annual Aggregate
Hospital, Licensed Physician or any other qualified healthcare provider under Sect 655 Wisconsin Patient Compensation Fund Statute	As required by State Statute
Any non-qualified Provider under Sec 655 Wisconsin Patient Compensation Fund Statute State of Wisconsin (indicate if Claims Made or Occurrence)	\$1,000,000 Per Occurrence/Claim \$3,000,000 Annual Aggregate
Other Professionals	\$1,000,000 Per Occurrence \$1,000,000 Annual aggregate or Statutory limits whichever is higher

^{**} Please check (enter an X) in the box next to Professional Liability, if Professional Liability Insurance is required for this agreement.

Should the statutory minimum limits change, it is agreed the minimum limits stated herein

Should the statutory minimum limits change, it is agreed the minimum limits stated herein shall automatically change as well

F. Milwaukee County, as its interests may appear, shall be named as, and receive copies of, an "additional insured" endorsement, for general liability, automobile insurance, and umbrella/excess insurance. Milwaukee County must be afforded a thirty day (30) written notice of cancellation, or a non-renewal disclosure must be made of any non-standard or restrictive additional insured endorsement, and any use of non-standard or restrictive additional insured endorsement will not be acceptable.

Exceptions of compliance with "additional insured" endorsement are:

1. Transport companies insured through the State "Assigned Risk Business" (ARB).

- 2. Professional Liability where additional insured endorsement is not allowed by the insurance company.
- G. Workers Compensation coverage is required for all Contractors, regardless of organizational structure or size (includes one-employee providers as well as Contractors composed solely of independent contractors). A Waiver of Subrogation for Workers' Compensation by endorsement in favor of Milwaukee County is also required. A copy of the endorsement shall be provided to DHHS.
- H. Contractor shall furnish County annually on or before the date of renewal, evidence of a Certificate indicating the above coverage (with the Milwaukee County Department of Health and Human Services named as the "Certificate Holder") shall be submitted for review and approval by County throughout the duration of this Agreement. If said Certificate of Insurance is issued by the insurance agent, it is Contractor's responsibility to ensure that a copy is sent to the insurance company to ensure that the County is notified in the event of a lapse or cancellation of coverage.

CERTIFICATE HOLDER

Milwaukee County Department of Health and Human Services
Contract Administrator
1220 W. Vliet Street, Suite 300
Milwaukee, WI 53205

I. If Contractor's Professional Liability insurance is underwritten on a Claims-Made basis, the Retroactive date shall be prior to or coincide with the date of this Agreement, the Certificate of Insurance shall state that professional malpractice or errors and omissions coverage, if the services being provided are professional services coverage is Claims-Made and indicate the Retroactive Date, Contractor shall maintain coverage for the duration of this Agreement and for six (6) years following the completion of this Agreement.

It is also agreed that on Claims-Made policies, either Contractor or County may invoke the tail option on behalf of the other party and that the Extended Reporting Period premium shall be paid by Contractor.

- J. Binders are acceptable preliminarily during the Contractor application process to evidence compliance with the insurance requirements.
- K. All coverages shall be placed with an insurance company approved by the State of Wisconsin and rated "A" per Best's Key Rating Guide. Additional information as to policy form, retroactive date, discovery provisions and applicable retentions, shall be submitted to County, if requested, to obtain approval of insurance requirements.
- L. Any deviations, including use of purchasing groups, risk retention groups, etc., or requests for waiver from the above requirements shall be submitted in writing to the Milwaukee County Risk Manager for approval prior to the commencement of activities under this Agreement:

Milwaukee County Risk Manager
Milwaukee County Courthouse – Room 301
901 North Ninth Street

Milwaukee, WI 53233

The insurance requirements contained in this Agreement are subject to periodic review and adjustment by the County Risk Manager.

11. WITHHOLDING OF PAYMENTS

Failure of Contractor to comply with contract requirements may result in withholding or forfeiture of any payments otherwise due Contractor from County by virtue of any County obligation to Contractor until such time as the contract requirements are met. County reserves the right to withhold payment or adjust Contractor's invoice and the payment procedures contained in the Attachment II, Payment Method, where Contractor fails to deliver the contracted services in accordance with the terms of this Contract, or any other relevant Milwaukee County Department of Health and Human Services' administrative policies. Contractor shall cooperate fully in all utilization review, quality assurance, and complaint/grievance procedures, and submit in a timely manner (if required) annual audit reports, corrective action plans, or any other requests for additional information by County. County may withhold payment entirely until requested or required information is received or, if applicable, until a written corrective action plan for improvement in services, compliance, or internal accounting control is received and approved by County.

12. CONTRACT TERMINATION

This contract may be terminated Forty Five (45) days following written notice by County for any reason, with or without cause, unless an earlier date is determined by County to be essential to the safety and well-being of the clients and patients covered by this Contract with the exception of those facilities which must meet the notification requirements as applicable in Chapter 50 licensing.

Termination shall not release the Provider of its obligation to complete treatment of Participants receiving treatment until transfer/transition of the Participant/Service Recipient can be accomplished with minimal disruption to the continuity of service or 180 days from the date of termination notice, whichever is earlier. Purchaser shall pay for Covered Services as provided in the Agreement. Provider should assist in orderly transfer/ transition of Participants/Service Recipients to new provider(s) as directed by Purchaser and provide to new Provider copies of all required service documentation, case notes, medical files and personal records, which are required by the new Provider to provide proper services to the Participants/Service Recipients. Failure to comply with this requirement may result in liquidated damages/claims against the Provider and may bar the Provider from other contracting opportunities with County or may be a cause for termination of other contracts with County. This provision shall survive the termination of this Agreement regardless of the reason.

Failure to maintain in good standing required licenses, permits and/or certifications, may, at the option of the County, result in immediate termination of this contract. Failure to comply with any part of this Contract may be considered cause for early termination by the offended party.

It is understood that the ability of Milwaukee County to contract for these services is dependent upon the receipt of funds from the budget. County, therefore, reserves the unilateral right to terminate participation in such service upon ten (10) days written notice when, (1) it appears that the funds budgeted (or provided through grants) for such purpose will be exhausted or terminated, or (2) failure of Contractor to fulfill its obligations under this Contract.

If circumstances exist which threaten imminent harm or safety and well being of Participants/Service Recipients or which results in Provider being legally unable to deliver covered services, this may justify or require immediate termination

Failure on the part of Contractor to comply with this Contract may be cause for early termination of the Contract without the right to cure the breach of Contract.

Failure on the part of Contractor to provide deliverables (reports, supporting documents etc.) or frequency thereof, as required under this contract and/or required by the County will result in immediate cessation of work under this Contact. In such instance the work under this contract cannot be resumed unless such deliverables are provided to County's satisfaction and a written notice to resume work is received by the Contractor. Such breach may also result in early termination of the Contract without the right to cure the breach of the agreement.

In the event of termination, the County will only be liable for State reimbursable services rendered through the date of termination and not for the uncompleted portion, or any materials or services purchased or paid for by Contractor for use in completing this Contract.

This Contract may be renegotiated in the event of changes required by law, regulations, court action, or inability of either party to perform as required in this Contract Revision of this Contract must be agreed to by both parties as evidenced by an addendum signed by their authorized representatives.

Contractor shall notify County, in writing, whenever it is unable to provide the required quality or quantity of services, or key personnel proposed in the application for contract are no longer available to provide services. Upon such notification, County and Contractor shall determine whether such inability will require a revision or early termination of this Contract.

In the event of termination, the Contractor will be notified in writing in accordance with the Section of this Contract regarding "Notices".

Should County reimbursement from state or federal sources not be obtained or continued at a level sufficient to allow for payment for the quantity of services in this Contract, the obligations of each party shall be terminated. Reduction in reimbursement or payment from state or federal sources shall be sufficient basis for County to reduce the amount of payment to Contractor notwithstanding that Contractor may have provided the services.

County reserves the right to withdraw any qualified recipient from the program, service, institution or facility of the Contractor at any time, when in the judgment of County, it is in the best interest of County or the qualified recipient so to do.

Should Purchaser reimbursement from state, federal or other sources not be obtained or continued at a level sufficient to allow for payment for the quantity of services in this Agreement, the obligations of each party shall be terminated. Reduction in reimbursement or payment from state, federal or other sources shall be sufficient basis for Purchaser to reduce the amount of payment to Contractor notwithstanding that Contractor may have provided the services.

When agreement is terminated, the Contractor shall not incur new obligations for the terminated agreement after the effective date, and shall be responsible for all outstanding obligations after the effective date of the termination. The Purchaser shall not allow credit to the Contractor for the Purchaser's share of any obligations incurred by the Contractor after termination except for the services provided under clause "B" above. This provision shall survive the termination of this Agreement regardless of the reason.

The Contractor shall, within 30 days, refund any unearned County funds advanced to the Contractor. This provision shall survive the termination of this Agreement regardless of the reason.

The Contractor shall submit, within 30 days of the date of termination final invoice/billings and shall submit within 120 days all other financial, performance, and other reports required by the terms of the agreement. The Purchaser may extend the due date for any report upon receiving a justified request from the Contractor and may waive any report which is not needed. This provision shall survive the termination of this Agreement regardless of the reason.

If an Contract is terminated without audit, the Purchaser retains the right up to five years to disallow and recover an appropriate amount, after fully considering any recommended disallowances resulting from an audit which may be conducted later. This provision shall survive the termination of this Agreement regardless of the reason.

The termination of this Contract does not affect the Contractor's responsibilities with respect to return of/disposal of property purchased with Purchaser's funding or with respect to any program income or other recovery for which the Contractor is still accountable as provided by law. This provision shall survive the termination of this Agreement regardless of the reason.

Amounts payable to the Purchaser under any of the provisions of this agreement shall constitute a debt or debts owed by the Contractor to the Purchaser, and shall be recovered from the Contractor or its successor or assignees by setoff or other action as provided by law this provision shall survive the termination of this Contract regardless of the reason.

13. CONTRACT RENEGOTIATION

This Contract may be renegotiated in the event of changes required by law, regulations, court action, or inability of either party to perform as committed in this Contract. Revision of this Contract must be agreed to by both parties as evidenced by an addendum signed by their authorized representatives.

14. INDEPENDENT CAPACITY AND RELATIONSHIP

Nothing contained in this Contract shall constitute or be construed to create a partnership, joint venture or employee-employer relationship between County or its successors or assigns and Contractor or its successors or assigns. In entering into this Contract and in acting in compliance herewith, Contractor is at all times acting and performing as an independent contractor, duly authorized to perform the acts required of it hereunder. Parties hereto agree that the Contractor, its officers, agents and employees, in the performance of this contract shall act in the capacity of an independent contractor and not as an officer, employee or agent of the Contractor or County. Further Contractor agrees to take such steps as may be necessary to ensure that each Independent Service Provider and/or subcontractor of the Contractor will be deemed to be an independent contractor and will not be considered or permitted to be an agent, officer, employee, servant, joint venture, or partner of the Contractor or County.

15. CONTRACT ADJUSTMENTS

As set forth in section 46.09(1), Milwaukee County Code of General Ordinances, no contract or contract adjustment, except for services defined in subsection (3), shall take effect until approved by resolution of the County Board.

16. ASSIGNMENT AND SUBCONTRACT LIMITATION

This contract shall be binding upon and inure to the benefit of the parties and their successors and assigns provided, however, that neither party shall assign its obligations hereunder without the prior written consent of the other. Contractor shall neither assign nor transfer any interest or obligation in this Contract without the prior written consent of County, unless otherwise provided herein.

Contractor may not subcontract this agreement in part or in whole, including agreements with Independent Service Providers, without prior written consent of County. Any such subcontract or Independent Service Provider agreement must be in writing and must use: for Independent Service Provider - the standard Independent Service Provider Agreement developed by County; for Subcontractors – Pre-approved Subcontract Agreement containing all the provisions of this Contract with prior approval of the County, before provision of any service under this Contract.

17. RESOLUTION OF DISPUTES

Contractor may file a formal grievance or otherwise appeal decisions of County in accordance with County Policies and Procedures, and Milwaukee County Ordinances.

18. PROHIBITED PRACTICES

During the period of the Agreement, Contractor shall not hire, retain, or utilize for compensation any member, officer, or employee of the Milwaukee County Department of Health and Human Services representing County or any person who, to the knowledge of Contractor, has a conflict of interest, unless approved in writing by the Director of the Department of Health and Human Services. No employee of the Milwaukee County Department of Health and Human Services representing County shall be an officer, member of the Board of Directors, or have a proprietary interest in Contractor's business unless approved in writing by the Director of the Department of Health and Human Services.

Contractor attests that it is familiar with Milwaukee County's Code of Ethics, Chapter 9 of Milwaukee County Code of General Ordinances which states in part, "No person shall offer or give to any public official or employee, directly or indirectly, and no public official or employee shall solicit or accept from any person, directly or indirectly, anything of value if it could reasonably be expected to influence the public official's or employee's vote, official actions or judgment, or could reasonably be considered as a reward for any official action or inaction or omission by of the public official or employee."

Said Chapter further states, "No person(s) with a personal financial interest in the approval or denial of a contract being considered by a County department or with an agency funded and regulated by a County department, may make a campaign contribution to any candidate for an elected County office that has final authority during its consideration. Contract considerations shall begin when a contract is submitted directly to a County department or to an agency until the contract has reached its final disposition, including adoption, county executive action, proceedings on veto (if necessary) or departmental approval."

Contractor is prohibited from offering other providers, or any other person(s), monetary compensation or any other type of reciprocal compensation for making referrals to Contractor for services under this Contract.

The use or disclosure by any party of any information concerning eligible clients or patients who receive services from Contractor, for any purpose not connected with the administration of Contractor's or County's responsibilities under this Contract is prohibited, except with the informed written consent of the eligible client or patient or the guardian of the client or patient.

19. REQUIRED DISCLOSURES

The Contractor agrees to comply with the disclosure requirements of 42 CFR Part 455, Subpart B, as now in effect or as may be amended. To meet those requirements, and address real or potential conflict of interest that may influence service provision, the Contractor shall furnish, upon request, to the Milwaukee County DHHS and upon request, to the Wisconsin DHS in writing:

- (a) The names and addresses of all vendors of drugs, medical supplies or transportation, or other providers in which it has a controlling interest or ownership;
- (b) The names and addresses of all persons who own or have a controlling interest in the Contractor;

- (c) Whether any of the persons named in compliance with (a) and (b) above are related to any owner or to a person with a controlling interest as spouse, parent, child or sibling;
- (d) The names and addresses of any subcontractors who have had business transactions with the Contractor;
- (e) The identity of any person, named in compliance with (a) and (b) above, who has been convicted of a criminal offense related to that person's involvement in any program under Medicare, Medicaid or Title XIX services programs since the inception of those programs.

Contractor shall furnish County with written disclosure of any financial interest, purchase or lease agreements, employment relationship, or professional services/consultant relationship which any of Contractor's employees, officers, board members, stockholders, or members of their immediate family may have with respect to any supplier to Contractor of goods and services under this Contract. The relationship extends to partnerships, trusts, corporations or any proprietary interest which could appear to or would allow one party to influence the other party in a related party transaction.

Contractor shall notify County, in writing, within 30 days of the date payment was due of any past due liabilities to the federal government, state government, or their agents for income tax withholding, FICA, Worker's Compensation, garnishments or other employee related liabilities, sales tax, income tax of Contractor, or other monies owed in excess of \$5,000 in the aggregate. The written notice shall include the amount(s) owed, the reason the monies are owed, the due date, the amount of any penalties or interest, known or estimated, the unit of government to which the monies are owed, the expected payment date and other related information.

Contractor shall notify County, in writing, within 30 days of the date payment was due of any past due liabilities to any entity(ies) in excess of \$10,000 in the aggregate, related to the operation of this Contract, for which County has or will reimburse Contractor. The written notice shall include the amount(s) owed, the reason the monies are owed, the due date, the amount of any penalties or interest, known or estimated, the creditor to which the monies are owed, the expected payment date and other related information. If the liability is in dispute, the written notice shall contain a discussion of facts related to the dispute and information on steps being taken by Contractor to resolve the dispute.

20. <u>CERTIFICATION REGARDING DEBARMENT AND SUSPENSION</u>

Contractor certifies to the best of its knowledge and belief, that Contractor's Business Entity; its Principals, including all owners, partners, or stockholders; and Contractor's Personnel, including, but not limited to, Contractor's employees, officers, directors, board members, consultants, contractors, and agents whether defined as "Key Personnel" or not, billed for under this Contract:

A. Are not currently excluded, debarred, suspended, proposed for debarment, or otherwise ineligible to participate in any Federal health care program, or in Federal procurement or non-procurement programs; or

- B. Have not been charged with a criminal offense that falls within the ambit of 42 U.S.C. s. 1320a-7(a), but for which they have not yet been excluded, debarred, suspended, or otherwise declared ineligible; or
- Have not been excluded, debarred, suspended, or otherwise declared ineligible or voluntarily excluded from covered transactions by any other federal, state, county or local governmental department or agency;
- D. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal, state, county or local governmental department or agency;
- E. Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining or attempting to obtain, or performing a public (federal, state or local) transaction or Agreement under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- F. Are not presently indicted for or otherwise criminally charged by a governmental entity (federal, state or local) with commission of any of the offenses enumerated in (D); and
- G. Have not within a three-year period preceding this Agreement had one or more public transactions (federal, state or local) terminated for cause or default.

21. CONDITIONAL STATUS, SUSPENSION, TERMINATION AND DEBARMENT

Contractor understands and agrees that Purchaser can request or impose a condition of Corrective Action based on a review of Service Documentation, Complaint/Grievance, violation of Policy and Procedure, and/or any other fiscal, quality, or client safety related matter. Notwithstanding appeal procedures defined by Chapter 110 of Milwaukee County Code of General Ordinances, or other applicable Federal or State laws, Purchaser has final authority for determination of substantiation of findings which may lead to a condition of Corrective Action. Contractor shall be required to implement and comply with provisions of Corrective Action as a condition of this contract.

Contractor understands and agrees that Purchaser has final authority for the approval, denial, modification of, and determination of adherence to, a Corrective Action Plan. A Corrective Action may or may not be associated with Conditional Status or Suspension as defined below.

Conditional Status, Suspension, Termination and Debarment applies to agency Contractors, as well as individual Direct Service Providers, and Indirect Staff

A. Conditional Status

"Conditional Status" is defined as a period of time for up to one year when an agency will be more closely monitored and reviewed for compliance with the provisions of this Contract. This monitoring may include site visits and requests for documentation/records review.

For agencies on Conditional Status, the following conditions may apply solely or in combination:

- 1. Restriction in the number of new referrals the Contractor may receive;
- 2. Restriction or reduction in the number of currently approved Covered Services the Contractor is allowed to provide;
- 3. Suspension of currently approved Covered Services the Contractor is providing;
- 4. Suspension of current services, including removal of Service Recipients.
- 5. Withholding payment to Contractor for Covered Services pending receipt and satisfactory review of requested information and/or documentation.

Agencies Subject to Conditional Status Include:

1. New Contractors

New Contractors will be subject to Conditional Status for one year from the effective date of the initial Contract.

2. Current Contractors

Current Contractors may be placed on Conditional Status when one of the following conditions occurs:

- a. Previous suspension, which may or may not include compliance with a corrective action plan.
- b. Critical incident/complaint, which may or may not include compliance with a corrective action plan.

Lack of compliance with a corrective action plan can lead to further sanctions as referenced in this Contract and the "Milwaukee County Department of Health and Human Services Administrative Probation Policy for Non-Compliance with Contract and Fee-For-Service Requirements." (See http://www.milwaukeecounty.org/ContractAdministrati9853.htm.)

B. Suspension

County shall have the right to suspend the Contractor for a period to be determined by County for any or all of the following reasons:

- 1. Failure to maintain in good standing required licenses, permits, certifications and/or insurance required by this Agreement.
- 2. Contractor has failed to comply or cooperate with a Quality Assurance Review or Audit.

- 3. Contractor has failed to correct findings or other conditions identified in a Milwaukee County audit, or annual independent audit.
- 4. Contractor is under investigation as a result of a Critical Incident/Complaint.
- 5. Contractor is under investigation for fraudulent business practices.
- 6. Contractor has failed to comply with a corrective action plan from a previous audit/critical incident/complaint finding.
- 7. Findings resulting from a site review or audit of the Contractor that document quality and/or fiscal concerns related to County policies, procedures, or services.
- 8. Failure of Contractor to respond to communication from County for a period of 30 days or more.
- 9. Other breaches of this Contract.

Contractors that are suspended will be prohibited from receiving new referrals, may be prohibited from adding Direct Service Providers, may be prohibited from adding new services/programs under this Contract, and/or may be prohibited from providing any and all Covered Services for any DHHS clients. Additionally, if the safety or wellbeing of clients is deemed by County to be at risk, County has the right to immediately remove existing clients from said Contractor without notice. Suspension may apply to a single service or to all services within a program or to all programs/services under a contractual relationship with County.

County reserves the right to determine the scope and duration of the suspension, as well as the process/methodology of any investigation resulting from the circumstances leading to the suspension.

The Contractor will be notified in writing in accordance with Section 28 (Notices) of this Contract of the reason for the suspension and the decision regarding reinstatement or termination.

Contractor will not be allowed to provide Covered Services or enter into or sign a new agreement with Milwaukee County programs even after the suspension or termination period is over if an amount due from Contractor remains outstanding and/or if an approved and current repayment plan (with no overdue installments) is not in place.

Payments to Contractors Under Suspension

Suspended Contractors may be paid for authorized and substantiated services provided for clients before or during a suspension. If the suspension is for a specific service or specific service within a specific program, the Contractor may be paid for other approved services provided during the suspension period. However, County reserves the right to withhold payment for all authorized and billed services if the nature of the suspension is for undocumented or otherwise unsubstantiated care provided by the Contractor to a Milwaukee County client or other actions by Contractor which have harmed or threatened to harm the welfare of Milwaukee County clients.

Withholding such payments will remain in effect until a County review of the suspension is completed and a determination for reinstatement or termination of Contract is made.

C. Termination

Contractor may have any or all Agreements with County terminated for cause for commission of, but not limited to, the following offenses: Commission of Fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing under a contract or agreement with DHHS; violation of federal or state antitrust statutes; commission of embezzlement, theft, forgery or bribery; falsification or destruction of records including, but not limited to, case records, financial records, or billing records; making false statements; receiving stolen property; engaging in conduct or practices that endanger the health or safety of participants/families; failure to comply/cooperate with DHHS Quality Assurance Site Reviews or audits; failure to permit access to or provide documents and records requested by the DHHS; failure to correct findings or other conditions identified in a Quality Assurance Site Review, County audit, or annual independent audit; any other breaches of this Agreement.

Any Contractor that has had one or more agreements with County terminated for cause or default shall not be permitted to apply for, or engage in, providing Covered Services under any agreement with the DHHS for a minimum of two (2) years from commencement date of termination.

D. Debarment by Milwaukee County

Contractor may have any or all agreements with Milwaukee County terminated for cause, and/or may be debarred from future contracting opportunities with County for commission of, but not limited to, the following offenses: Commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing under a contract or agreement with the County; violation of Federal or State antitrust statutes; commission of embezzlement, theft, forgery or bribery; falsification or destruction of records including, but not limited to, case records, financial records, or billing records; making false statements; receiving stolen property; engaging in conduct or practices that endanger the health or safety of participants/families; failure to comply/cooperate with County Quality Assurance reviews or audits; failure to permit access to or provide documents and records requested by the County; failure to correct findings or other conditions identified in a Quality Assurance review, County audit or annual independent audit; any other breaches of this Agreement.

Department action debarring Contractors from future contractual relationships with the County extends to all owners, partners, officers, board members, or stockholders of Contractor and to all organizations, regardless of legal form of business, in which Contractor or any of the above individuals have any interest, as an employee, partner, officer, board member, or stockholder, or any other proprietary interest in a partnership, trust, corporation, or any other business which would allow them to influence an organization that is in a contractual relationship with, or attempting to obtain a contract or agreement with the County.

Any Contractor that has had one or more agreements with the County terminated for cause or default, or that has been debarred from contracting opportunities with the County for commission of any of the offenses enumerated above, shall not be permitted to apply for, or engage in, providing Services under any agreement with the County for a minimum of two years from commencement date of termination or debarment.

As provided for in section 1128(c)(3)(B) of the Social Security Act (Act), any Contractor convicted of theft by fraud under Medicare, Medicaid, or any Federal health care program as defined in section 1128B(f) of the Act shall be excluded from eligibility to participate in the Medicare and Medicaid programs, and all Federal health care programs for a minimum of five (5) years. The Act defines a Federal health care program as any plan or program that provides health benefits, whether directly, through insurance, or otherwise, which is funded directly, in whole or in part, by the United States government.

Contractor, and/or its owners, partners, officers, board members, or stockholders of Contractor and all organizations, regardless of legal form of business, in which Contractor or any of the above individuals have any interest, as an employee, partner, officer, board member, or stockholder, or any other proprietary interest in a partnership, trust, corporation, or any other business, will not be allowed to provide Covered Services or enter into or sign a new contract with Milwaukee County programs even after the suspension or termination period is over if an amount due from Contractor remains outstanding and/or if an approved and current repayment plan (no overdue installments) has been in place for less than 2 years.

22. HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996

General Provision of Intent. Both parties to this Contract confirm their complete intention of complying with the provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and will undertake any and all changes in their respective data collection and sharing systems, in their patient and consumer relations programs, and in their medical record and information sharing systems to address current or future requirements of HIPAA as determined by the U.S. Department of Health and Human Services (HHS) or the Wisconsin Office of the Commissioner of Insurance.

Changes to the Contract. Both parties agree that changes to the contract that might be necessary for one or both parties to meet the requirements of the Health Insurance Portability and Accountability Act shall be made upon discussion and execution of a document containing the necessary changes. Neither party will withhold agreement to reasonable modifications necessary to the Contract that are necessary for one or both parties to comply with HIPAA.

Contractors are subject to compliance with the HIPAA regulations as "covered entities." To the extent that the HIPAA regulations apply to Contractor, Contractor agrees to comply with the HIPAA regulations and shall have required documents available for inspection upon request. Covered entities that fail to comply with the applicable standards may be subject to a written complaint filed with the Secretary of Health and Human Services. This provision shall survive the termination of this Agreement regardless of the reason.

Generally, Contractor or vendors are not business associates of payers. Therefore, unless specifically identified by Purchaser via a separate business associate agreement, Contractors are not considered business associates of Purchaser.

23. COMPLIANCE WITH CAREGIVER BACKGROUND CHECKS

County and Contractor agree that the protection of Participants/Service Recipients served under this Agreement is paramount to the intent of this Agreement. Contractor certifies that it will comply with the provisions of DHS 12, Wis. Admin. Code State of Wisconsin Caregiver Law (searchable online at:http://docs.legis.wisconsin.gov). Purchaser may also request from Contractor or obtain conviction records through the Wisconsin Circuit Court Access (WCCA) system, formerly known as CCAP, online at: http://wcca.wicourts.gov, and may consider convictions found through WCCA which may or may not appear through the Wisconsin Criminal History Records Request process (the DOJ report)

Contractor further certifies that it will comply with the provisions of the Milwaukee County Caregiver Resolution requiring Background Checks as set forth in Attachment A of this Agreement.

Prior to the provision of Covered Services, and dated no more than 90 days prior to requesting to add a particular staff as a Direct Service Provider or Indirect Staff, Contractor shall conduct background checks at its own expense on all Direct Service Providers, Indirect Staff, contract staff, Independent Service Provider or volunteers who have regular, direct contact with Service Recipients or the personal property of the Service Recipients. Background checks obtained from other entities are not transferrable. Contractor shall retain in its personnel files all pertinent information to include: 1) a Background Information Disclosure (BID) Form (F-82064A); 2) a Wisconsin Criminal History Records Request (Form DJ-LE 250) from the Department of Justice Crime Information Bureau (CIB) indicating a "no record found" response or a criminal record transcript, 3) a Department of Health Services (DHS) letter that reports the status of a person's administrative findings or license restrictions; and 4) a search of out-of-state records, tribal court proceedings and military records if indicated based on the Wisconsin Caregiver Program Manual guidelines. This includes a good faith effort to obtain a background check from any other state in which the individual has resided during the previous three (3) years, either by obtaining the record from the state, or by obtaining an FBI fingerprint check. Details for obtaining an FBI found fingerprint check http://www.doj.state.wi.us/dles/cib/volunteers children act.asp

In addition, Contractor agrees to the following:

- A. Contractor shall submit the results of *all* Department of Justice reports, even those indicating "no record found".
- B. After the initial background check, Contractor is required to conduct a new background check every four (4) years (on or before the four year anniversary of the prior DOJ/CIB report), or at any time within that period when Contractor has reason to believe a new check should be obtained. Contractor shall submit the results of all subsequent background checks which show arrest or conviction events which occurred since the initial request.
- C. Contractor shall maintain background check documentation for the most recent five year period for every employee and Independent Service Provider who meets the definition of Caregiver under DHS12.
- D. Contractor shall maintain the results of background checks on its own premises for a period of at least four (4) years following the termination of this Contract or any other Agreement

with the DHHS. County may audit Contractor's personnel files to assure compliance with the *Wisconsin Caregiver Program Manual*. (online at http://DHS.wisconsin.gov/caregiver/publications/CgvrProgMan.htm).

- E. Contractor must notify County within two (2) business days if an existing employee, direct service provider or caregiver has been charged with or convicted of any crime specified in DHS 12.07(2) and/or of any offenses referenced in numbers 6, 7, and 11 of the Milwaukee County Resolution Requiring Background Checks on Department of Health and Human Services Contract Agency Employees Providing Direct Care and Services to Children and Youth.
- F. Contractor shall read, sign, and return Attachments B and C with this agreement (if applicable based on services being provided).

24. CIVIL RIGHTS COMPLIANCE PLAN

Contractor agrees that it will comply with the provisions of the *CRCP for Profit and Non-Profit Entities* which includes <u>Affirmative Action</u>, <u>Equal Opportunity and Limited English</u> Proficiency Plans, online at:

http://www.dhs.wisconsin.gov/civilrights/Index.HTM

Consistent with the requirements of the U.S. Department of Health and Human Services, the State of Wisconsin Department of Workforce Development (DWD) and the Department of Health Services (DHS), Contractor with 25 Employees AND any combination of funding in the amount of \$25,000 or more from County and/or the State are required to complete a Civil Rights Compliance Plan (CRCP) to include Affirmative Action, Equal Opportunity, and Limited English Proficiency (LEP) Plans prior to execution of this agreement.

Contractor with direct State contracts with DWD or DHS with fewer than 25 employees, or Network Contractors receiving less than \$25,000 in direct State funding are required to file a Letter of Assurance with DWD or the DHS. Contractor with fewer than 25 employees or Contractors receiving less than \$25,000 in funding or payment from Milwaukee County are required to file a Letter of Assurance with Milwaukee County Audit Services, Milwaukee County City Campus 9th Floor, 2711 W. Wells Street, Milwaukee, WI 53208.

Completion forms, instructions, sample policies and plans are posted on the State website at: Completion forms, instructions, sample policies and plans are posted on the State website listed above.

DHHS will take constructive steps to ensure compliance of the contractor with the provisions of this subsection. Contractor agrees to comply with Civil Rights monitoring reviews performed by DHHS including the examination of records and relevant files maintained by Contractor. Contractor further agrees to cooperate with DHHS in developing, implementing, and monitoring corrective action plans that result from any reviews.

25. EMERGENCY MANAGEMENT PLAN (EMP)

In order for Contractor and Participant/Service Recipients that Contractor serves to be prepared for a natural or man-made disaster, or any other internal or external hazard that threatens Participant/Service Recipients, staff, and/or visitor life and safety, and in order to comply with federal and state requirements, Contractor shall have a written Emergency Management Plan (EMP), to be retained by the Contractor and made available to DHHS upon request. All employees shall be oriented to the proposed plan and trained to perform assigned tasks.

"Emergency Management Plan" (Disaster Plan) means the procedures, developed by the Contractor organization, to manage an internal or external hazard that threatens Residents/Service Recipients, staff, and/or visitor life and safety.

"Alternate Care Site" means a building or facility to which Residents/Service Recipients from the evacuated facility/residential provider can be taken to for continued care and treatment and shelter.

The EMP must identify the steps Contractor has taken or will be taking to prepare for an emergency and address, at a minimum, the following areas and issues:

- a. Contractor's order of succession and emergency communications plan, including who at the facility/organization will be in authority to make the decision to execute the plan to evacuate or shelter in place and what will be the chain of command;
- b. Develop a continuity of operations business plan using an all-hazards approach (e.g., floods, tornadoes, blizzards, fire, electrical blackout, bioterrorism, pandemic influenza or other natural or man-made disasters) that could potentially affect current operations or site directly and indirectly within a particular area or location;
- c. Identify Covered Services deemed "essential", and any other Covered Services that will remain operational during an emergency (Note, Contractors who offer case management, residential, or personal care for individuals with medical, cognitive, emotional or mental health needs, or to individuals with physical or developmental disabilities are deemed to be Providers of essential services);
- d. Identify and communicate procedures for orderly evacuation or other response approved by local emergency management agency during a fire emergency;
- e. Plan a response to serious illness, including pandemic, or accidents;
- f. Prepare for and respond to severe weather including tornado and flooding;
- g. Plan a route to dry land when a facility or site is located in a flood plain;
- h. For any facility or residence licensed for out of home care, identify the location of an Alternate Care Site for Residents/Service Recipients (Note, this should include a minimum of two alternate facilities, with the second being at least 50 miles from the current facility);

- i. Identify a means, other than public transportation, of transporting residents to the Alternate Care location (Note, for Alternate Care Sites and transportation, a surge capability assessment and Memorandum of Understanding (MOU) with Alternate Care Site and alternative transportation provider should be included in the development of the emergency plan);
- j. Identify the role(s) of staff during an emergency, including critical personnel, key functions and staffing schedules (Note, in the case of Personal Care Workers, staff should be prepared to accompany the Service Recipient to the Alternate Care Site, or local emergency management identified Emergency Shelter);
- k. Identify how meals will be provided to Residents/Service Recipients at an Alternate Care Site. In addition, a surge capacity assessment should include whether the Contractor, as part of its emergency planning, anticipates the need to make housing and sustenance provisions for the staff and/or the family of staff;
- Identify how Providers who offer case management, residential care, or personal care for individuals with substantial cognitive, medical, or physical needs shall assist Service Recipients to individually prepare for an emergency and obtain essential services during an emergency, including developing a Care Plan that includes an emergency plan on an individual level.
- m. Ensure that current assessment and treatment plan for each Resident/Service Recipient with specific information about the characteristics and needs of the individuals for whom care is provided is available in an emergency and accompanies the Resident/Service Recipient to the Alternate Care Site. This should include: Resident identification, diagnosis, acuity level, current drugs/prescriptions, special medical equipment, diet regimens and name and contact of next of Kin/responsible person/POA.
- n. Identify staff responsible for ensuring availability of prescriptions/medical equipment and Service Recipient information at Alternate Care Site;
- Communicate and Collaborate with local emergency management agencies to ensure the development of an effective emergency plan (typically the fire chief, or his/her designee);
 and
- p. Collaborate with Suppliers and Personal Services Providers.

Contractors shall have agreements or MOUs with other agencies or operators of Alternate Care Sites and assess the availability of volunteer staff for such emergencies.

Contractors can find resources for EMPs including sample plans, Mutual Aid Agreement and templates at the following websites:

http://dhs.wi.gov/rl_dsl/Providers/SamplEmergPlans.htm

http://dDHS.wisconsin.gov/rl_DSL/Providers/EvacSheltTemplate.pdf

http://dhs.wisconsin.gov/rl_DSL/EmergencyPreparedness/EmPrepIndex.htm

If Contractor organization serves persons with special needs receiving in-home care, or care in a supportive apartment, it should have the Service Recipient, the caregiver or someone upon whom the Service Recipient relies for personal assistance or safety complete the below referenced "DISASTER PREPAREDNESS CHECKLIST FOR INDIVIDUALS WITH SPECIAL NEEDS".

http://www.dhs.wisconsin.gov/preparedness/pdfs/IndPrepChecklist.pdf

26. CONFIDENTIALITY

Contractor shall not use or disclose any information concerning eligible Participants who receive Covered Services from the Contractor for any purpose not connected with the administration of the Contractor's responsibilities under this Agreement, or those of County, except with the informed written consent of the Participant and/or the Participant's legal guardian as described in Chapter DHS 92-Confidentiality of Treatment Records and other such confidentiality provisions of the State of Wisconsin Administrative Code and any applicable County's Policy(s). Contractors who are providing services to Alcohol and Drug Abuse participants will comply with the Code of Federal Regulations Title 42, Chapter One, Part 2, Confidentiality of Alcohol and Drug Abuse Patient Records.

27. CLIENT RIGHTS

Contractor must honor the right of every Participant/Service Recipient as stated in the Mental Health Act Wisconsin Statute, Chapter 51 State Alcohol, Drug Abuse, Developmental Disabilities and Mental Health Act, 51.30 Records and 51.61 Patient Rights; The Wisconsin Administrative Code — Chapter DHS 94 — Patient Rights and Resolution of Patient Grievances, Milwaukee County General Ordinances and Resolutions, and any other applicable federal, state, local laws, or County Policies and Procedures.

At a minimum, client rights shall include a policy of non-retaliation and the option of filing complaints anonymously.

28. PERFORMANCE MEASUREMENT

A. County may consider Contractor performance history in consideration of Service Recipient referrals and in termination or non-renewal decisions about this Agreement. Contractor Performance Measures may be developed which reflect Service Recipient satisfaction, complaints against Contractors, compliance with Contract and/or Policies and Procedures, and Service Recipient outcomes, conformance with evidence based practices or required service protocols, status of Corrective Action Plan(s), or other performance domains. Purchaser reserves the right of non-renewal or early termination of contract for low referral or service activity.

County reserves the right to publish and distribute Contractor Performance scores to Service Recipients, families/guardians, Care Coordinators/Care Management/Support and Service Coordinators/Case Managers/Recovery Support Coordinators, and other attentive and

affected audiences, and will encourage the consideration of Performance history in the selection of Providers.

29. WHISTLEBLOWER POLICY

County and Contractor agree that ensuring that employees providing services under this Contract are afforded protection under state and/or federal whistleblower protection laws is paramount to the intent of this Agreement. Contractor certifies that it will comply with the provisions of the Sarbanes-Oxley Act of 2002 (SOX), which is applicable to all nonprofit organizations, as well as other state and/or federal whistleblower protection laws. The Milwaukee County Department of Health and Human Services (DHHS) requires all Providers contracting with the department under this contract, or any other agreement with DHHS, to adopt and implement a whistleblower policy. The policy must contain the following key elements:

- a. The Contractor's board of directors must approve the adoption of a whistleblower policy and include it in the Employee Handbook or similar document.
- b. The whistleblower policy must be given to and acknowledged by all employees.
- c. The Chief Executive Officer, or his/her designee, will ensure that whistleblower protection notification is posted in conspicuous location(s) in the workplace(s) as required under state and/or federal law.
- d. If any employee, contract staff, Independent Service Provider or volunteer reasonably believes that some policy, practice, or activity of Contractor is in violation of law, a written complaint may be filed by that person with the Chief Executive Officer.
- e. An employee, contract staff, Independent Service Provider or volunteer is protected from retaliation if any of the persons named above bring the alleged unlawful activity, policy, or practice to the attention of Contractor and provides Contractor with a reasonable opportunity to investigate and correct the alleged unlawful activity.
- f. Contractor will not retaliate against an employee, contract staff, Independent Service Provider or volunteer who, in good faith, has made a protest or raised a complaint against some practice of Contractor, or of another individual or entity with whom Contractor had a business relationship, on the basis of a reasonable belief that the practice is in violation of law or a clear mandate of public policy.
- g. Contractor will not retaliate against an employee, contract staff, Independent Service Provider or volunteer who discloses or threatens to disclose to a supervisor or a public body any activity, policy, or practice of Contractor that the employee reasonably believes is in violation of a law, or a rule, or regulation mandated pursuant to law or is in violation of a clear mandate or public policy concerning health, safety, welfare, or protection of the environment.
- h. Contractor will obtain employee's signature to document employee's receipt and understanding of the Policy, and verify that employee has been provided with an opportunity to ask questions about the Policy.

Notwithstanding any other remedies available to employee under law, retaliation by Contractor against any employee, or any of the persons named in (d), (e), (f) and (g) above, who, in good faith, have made a protest or raised a complaint against some practice of Contractor, may lead to further sanctions as referenced in this Contract and the "Milwaukee County Department of Health and Human Services Administrative Probation Policy for Non-Compliance with Contract and Fee-For-Service Requirements" including, but not limited to, early termination of this Contract.

30. NOTICES

Notices to County provided for in this Contract shall be sufficient if sent by certified or registered mail, postage prepaid, USPS or other courier or by email with acknowledgement by the recipient, and notices to Contractor shall be sufficient if sent by certified or registered mail, postage prepaid USPS or other courier or by email with acknowledgement by the recipient to the respective addresses or email addresses provided in this Contract or to such other respective addresses as the parties may designate to each other in writing. It is agreed by Contractor, that in conduct of its meetings, it will be guided by Wisconsin Statutes 19.81 et. seq.

31. CONTRACT CONTENT

This Contract shall be interpreted and enforced under the laws and jurisdiction of the State of Wisconsin. The Contractor agrees to provide or arrange (as referenced in Section 1, Scope of Service), the provision of Covered Services in accordance with the description of services, including any other policies, bulletins, and memoranda as endorsed by the Milwaukee County Department of Health and Human Services and its respective divisions. Definition used in this Contract have meaning set forth in Attachment C except where the context is clear that such meanings are not intended. This document, with all attached exhibits and attachments, together with the Milwaukee County Department of Health and Human Services Year 2014 Purchase of Services Guidelines - Program and Technical Requirements, and the Milwaukee County Department of Health and Human Services Administrative Probation Policy for Noncompliance with Contract and Fee-for-Service Requirements and Contractor's Year 2014 application as negotiated, constitute the entire Contract of the parties.

This Contract supersedes all oral agreements and negotiations and all writings not herein referred to and incorporated. This Contract may be executed in two or more counterparts each of which shall be deemed as original.

If any provision(s) of this Contract is (are) waived by Milwaukee County the remaining provisions of the Contract shall remain in effect.

If any provision(s) of this Contract shall be held to be invalid, illegal, unenforceable or in conflict with the law of its jurisdiction, the validity, legality and enforceability of the remaining provisions shall not in any way be affected or impaired thereby. Contractor acknowledges and agrees that it will perform its obligations hereunder in compliance with all applicable state, local or federal law, rules, regulations and orders.

32. <u>APPROVAL</u>

It is expressly understood and agreed that the parties' obligations hereunder are subject to state approval and federal concurrences with this Contract.

County enters into this Contract as authorized by the Milwaukee County Board of Supervisors and ratified by the Milwaukee County Executive. Contractor enters into this Contract pursuant to and by authority of its Board of Directors at its meeting of March 21, 2013. (The above authorization for County Board is not applicable to contracts in amounts that are under \$100,000).

IN WITNESS WHEREOF, the parties to this Contract have caused this instrument to be executed by their respective proper officers effective as of the day and year first above written.

Signatures must be in BLACK or BLUE ink only.

FOR: MILWAUKEE COUNT	ГҮ	FOR: CONTRACTOR	
—Docusigned by: Hector Colon	6/17/2014	Hollis Patrer	5/14/2014
Héang Paking Director	Date	(Sign Merce)0914F8	Date
Milwaukee County	Date		
Department of Health and Huma	in Services	Hollis Patzer	
Τ		(Please print name of person s	signing)
DIVISION APPROVAL:			
B. Thomas Wanta	5/22/2014		
B. Thuntas Wanta, Administrato	ır		
Milwaukee County DHHS	5 8 9		
Delinquency and Court Services	Division		
Approved for Execution by Co	orporation Counsel:	RISK MANAGEMENT AP	PROVAL
		DocuSigned by:	
		Amy Pechacek	5/14/2014
Milwaukee County Corporation	Counsel	Risk Wanager Fent	
minuance county corporation			
COMPTROLLER APPROVA	(L.		
DocuSigned by:			
Comptroller	6/23/2014		
00.11.	0,23,232.		
SeottsManskets€omptroller Milwaukee County			
Willwaukee County		Approved by County Execu	tive:
			5/27/2014
		1 cm	
		ChrisephologoMilwaukee Cou	nty Executive

ATTACHMENT A CERTIFICATION REGARDING FILE 99-233 REQUIRING BACKGROUND CHECKS FOR AGENCIES SERVING YOUTH

Applicant certifies that it will comply with the provisions of the Milwaukee County Resolution Requiring Background Checks, File No. 99-233. Agencies under contract shall conduct background checks at their own expense.

RESOLUTION REQUIRING BACKGROUND CHECKS ON DEPARTMENT OF HEALTH AND HUMAN SERVICES CONTRACT AGENCY EMPLOYEES PROVIDING DIRECT CARE AND SERVICES TO CHILDREN AND YOUTH

Provisions of the Resolution requiring criminal background checks for current or prospective employees of DHHS contract agencies and agencies/organizations with which the DHHS has reimbursable agreements providing <u>direct care and services to Milwaukee County children and youth</u> were initially passed by the County Board in September, 1999.

In May 2000, the County Board adopted a modification of the resolution that separates individuals who have committed crimes under the Uniform Controlled Substances Act under Chapter 961 Wisconsin Statutes from the felony crimes referenced in the original Resolution and those referenced under Chapter 948 of the Statutes.

The Resolution shall apply only to those employees who provide direct care and services to Milwaukee County children and youth in the ordinary course of their employment, and is not intended to apply to other agency employees such as clerical, maintenance or custodial staff whose duties do not include direct care and services to children and youth.

- 1. DHHS contract agencies and agencies/organizations with which the DHHS has reimbursable agreements shall certify, by written statement to the DHHS, that they have a written screening process in place to ensure background checks, extending at least three (3) years back, for criminal and gang activity, for current and prospective employees providing direct care and services to children and youth. The background checks shall be made prior to hiring a prospective employee on all candidates for employment regardless of the person's place of residence.
- 2. DHHS contract agencies and agencies/organizations with which the DHHS has reimbursable agreements shall certify, by written statement to the DHHS, that they are in compliance with the provisions of the Resolution; that the statement shall be subject to random verification by the DHHS or its designee; and, that the DHHS or its designee shall be submitted, on request, at all reasonable times, copies of any or all background checks performed on its employees pursuant to this Resolution.
- 3. DHHS contract agencies and agencies/organizations with which the DHHS has reimbursable agreements which do not submit to the DHHS or its designee, copies of any or all background checks, on request, at all reasonable times, pursuant to this Resolution, shall be issued a letter of intent within 10 working days by the DHHS or its designee to file an official 30-day notice of termination of the contract, if appropriate action is not taken by the contract agency towards the production of said documents.

- 4. DHHS contract agencies and agencies/organizations with which the DHHS has reimbursable agreements shall perform criminal background checks on current employees who provide direct care and services to children and youth by January 31, 2001 and, after 48 months of employment have elapsed, criminal background checks shall be performed every four (4) years within the year thereafter.
- 5. DHHS contract agencies and agencies/organizations with which the DHHS has reimbursable agreements shall hire prospective employees after January 31, 2001 conditioned on the provisions stated above for criminal background checks and, after four (4) years within the year thereafter, and for new employees hired after January 31, 2001.
- 6. DHHS contract agencies and agencies/organizations with which the DHHS has reimbursable agreements which determine that a current or prospective employee was convicted of one or more of the following offenses shall notify the DHHS or its designee immediately. Offenses include: homicide (all degrees); felony murder; mayhem; aggravated and substantial battery; 1st and 2nd degree sexual assault; armed robbery; administering dangerous or stupefying drugs; and, all crimes against children as identified in Chapter 948 of Wisconsin Statutes.
- 7. DHHS contract agencies and agencies/organizations with which the DHHS has reimbursable agreements which determine that a current or prospective employee was convicted of any other offense not listed in Number 6 shall notify the DHHS or its designee immediately. Offenses include but are not limited to: criminal gang member solicitations; simple possession; endangering public safety; robbery; theft; or, two (2) or more misdemeanors involving separate incidences within the last three (3) years.
- 8. DHHS contract agency employees and employees of agencies/organizations with which the DHHS has reimbursable agreements who provide direct care and services to children and youth, charged with any of the offenses referenced in Number 6 and Number 7, shall notify the DHHS or its designee within two (2) business days of the actual arrest.
- 9. Upon notification from a contract agency or from agencies with other reimbursable agreements that their screening process has identified a current or prospective employee with a conviction as stated in Number 6, or a conviction that occurred less than three (3) years from the date of employment as stated in Number 7, the DHHS or its designee shall issue a letter of intent within 10 working days to file an official 30-day notice of termination of the contract if appropriate action is not taken towards the exclusion of said individual from having any contact with children or youth in the direct provision of care and services to children and youth.
- 10. The DHHS or its designee, upon receipt of notification of potentially disqualifying past criminal misconduct or pending criminal charges as stated in Number 6 and Number 7 of this Resolution, shall terminate the contract or other agreement if, after 10 days' notice to the contract agency, the DHHS or its designee has not received written assurance from the agency that the agency has taken appropriate action towards the convicted current or prospective employee consistent with the policy expressed in this Resolution.
- 11. DHHS contract agencies and agencies/organizations with which the DHHS has reimbursable agreements which determine that a current or prospective employee was convicted of any

- crime under the Uniform Controlled Substances Act under Chapter 961 of Wisconsin Statutes, excluding simple possession, and the conviction occurred within the last five (5) years from the date of employment or time of application, shall notify the DHHS or its designee immediately.
- 12. Upon notification from a contract agency or from agencies with other reimbursable agreements that their screening process has identified a current or prospective employee with a conviction under the Uniform Controlled Substances Act under Chapter 961 of Wisconsin Statutes, excluding simple possession, the DHHS or its designee shall issue a letter of intent, within 10 working days, to file an official 30-day notice of termination of the contract if appropriate action is not taken towards the exclusion of said individual from having any contact with children or youth in the direct provision of care and services to children and youth. Current or prospective employees of DHHS contract agencies or other reimbursable agreements who have not had a conviction within the last five (5) years under the Uniform Controlled Substances Act Under Chapter 961 of Wisconsin Statutes, excluding simple possession, shall not be subject to the provisions of this Resolution.

MILWAUKEE COUNTY DEPARTMENT OF HEALTH AND HUMAN SERVICES (DHHS)

Certification Statement - Resolution Regarding Background Checks on Employees of DHHS Contract Agencies and Agencies/Organizations having Reimbursable Agreements
Providing Direct Services to Children and Youth

CERTIFIC	CATION REGARDING FILE 99-233 CHECKS FOR AGENCIES SERVI	
This is to cert	fy thatWisconsin Community Services, I(Enter Name of Agency/Organ	
BACK AGEN	ceived and read the enclosed, "PROVISI GROUND CHECKS ON DEPARTMENT CY EMPLOYEES PROVIDING DIR AUKEE COUNTY CHILDREN AND YOU	ECT CARE AND SERVICES TO
activit and yo	written screening process in place to ensure y for current and prospective employees prouth; and,	viding direct care and services to enituren
(3) is in c	ompliance with the provisions of File No. 99 s.	-233, the Resolution requiring background
Hollis Patre		5/14/2014
Authorized S Hollis Patz		Date ive Director
	arty Name and Title (please print)	
	ommunity Services, Inc.	
Agency Nam	e (please print)	
	RETURN SIGNED FORM WITH 2014 Pt	urchase of Service Contract

CERTIFICATION STATEMENT ATTACHMENT B

RESOLUTION REGARDING CAREGIVER AND CRIMINAL BACKGROUND CHECKS

(Applies to all agencies with employees who meet the definition of "caregiver", per definition below)

Contract agencies and agencies with which the DHHS has reimbursable agreements shall certify, by written statement, that they will comply with the provisions of ss.50.065 and ss.146.40 Wis. Stats. and Chapters DHS 12 and DHS 13, Wis. Admin. Code State of Wisconsin Caregiver Program (all are online at http://www.legis.state.wi.us/rsb/code.htm). Agencies under contract shall conduct background checks at their own expense.

DEFINITION: EMPLOYEES AS CAREGIVERS (Wisconsin Caregiver Program Manual, http://dhs.wisconsin.gov/caregiver/pdffiles/Chap2-CaregiverBC.pdf)

A caregiver is a person who meets all of the following:

- is employed by or under contract with an entity;
- has regular, direct contact with the entity's clients or the personal property of the clients; and
- is under the entity's control.

This includes employees who provide direct care and may also include housekeeping, maintenance, dietary and administrative staff, if those persons are under the entity's control and have regular, direct contact with clients served by the entity.

This is to certify that	Wisconsin Community Services, Inc.	
imo io to comiy mu	(Enter Name of Agency/Organization)	
is in compliance with t Wis. Admin. Code - St	the provisions of ss.50.065 and ss.146.40 Wis. State of Wisconsin Caregiver Program	Stats. and DHS 12 and DHS 13
DocuSigned by:		
Hollis Patzer		5/14/2014
D617E95440914F8		Data
Authorized Signature		Date
Hollis Patzer	Executive Director	
Authorized Party Nam	e and Title <i>(please print)</i>	
Wisconsin Community	/ Services, Inc.	
Agency Name (please	print)	9

ATTACHMENT C

DEFINITIONS

As used in this Agreement, the following terms shall have the meanings set forth herein, except where the context is clear that such meanings are not intended:

- A. "Contract" this document with summary page, all attachments, exhibits, schedules, references and amendments. The Milwaukee County Department of Health and Human Services Administrative Probation Policy for Non-Compliance with Contract and Fee-for-Service Requirement, Payor Of Last Resort Policy For Community Based Residential Facility (CBRF) Contracts And Other Fee-For-Service Agreements and Provider's current application and or proposal(s) are incorporated herein by reference and made a part of this Agreement as if physically attached hereto and Provider shall comply herewith. Referenced policies are available at: http://www.county.milwaukee.gov. Words Contract and Agreement have been used interchangeably throughout this document both refer to this Contract where ever applicable.
- B. "Alternate Care Site" a building or facility to which Residents/Service Recipients from the evacuated facility/residential provider can be taken to for continued care and treatment and shelter.
- C. "Behavioral Health Division" A division of County administering programs to enhance the quality of life for individuals with mental health and substance abuse problems, assisting in their recovery and providing individualized opportunities to participate in the community.
- D. "Care Coordination Agency" or "Care Management/Support and Service Coordination Agency" or "Case Management Agency" or "Recovery Support Coordinator" mental health, substance abuse or social service agency which has entered into an Agreement with Purchaser to provide or arrange for the provision of Covered Services to Participants by Care Coordinators in the Wraparound Milwaukee Program, Care Management/support and Service Coordination for Disabilities Services Division Programs, Case Managers in the Family Intervention Support and Services (FISS) Program, Recovery Support Coordinators in the WIser Choice Program, or Case Management/Care Coordinators in the Community Service Branch [CSB] of the Behavioral Health Division.
- E. "Care Coordinator" or "Care Management/Support and Service Coordinator (CM/SSC)" or "Case Manager" or "Recovery Support Coordinator" person responsible for providing, coordinating and managing the provision of services in the Wraparound Milwaukee Program, Disabilities Services Division Programs, Housing Division Programs, FISS Program, the WIser Choice Program, or Children's Court Services Network Program respectively.
- F. "Case Notes" logs and/or sign-in sheets, progress notes, monthly reports, summary notes and/or any other written or electronic documentation completed by the Direct Service Provider to support that the covered service was provided to the Service Recipient. Case Notes must include the following minimum elements: service code or name; name(s) of the direct service provider(s); client and service recipient name; the date, actual start time, actual

end time, duration, location of the service; intervention; summary of the activity engaged in; Service Recipient's response to the Covered Service; Direct Service Providers signature and signature date and any other elements as required by Purchaser Policy or Procedure. System and other requirements for electronic Case Notes and other electronic service documentation are listed in Section Two of this Agreement.

- G. "Complaint/Grievance" written and/or verbal statement of dissatisfaction with Purchaser's procedure, service, benefit, system of care representative or Provider.
- H. "Conditional Status" period of time for up to one year when a Provider will be more closely monitored by Purchaser and reviewed for compliance with the provisions of this Agreement.
- 1. "County"— Milwaukee County (hereinafter called County) a Wisconsin municipal body corporation represented by the Milwaukee County Department of Health and Human Services (DHHS) and its respective divisions, the Milwaukee Department of Audit, the Milwaukee County Behavioral Health Division, and any other applicable departments or offices of County and its designees.
- J. "Covered Services" services identified in this Agreement that are rendered by the Provider and are subject to the terms and conditions of this Agreement, for which the provider may request payment.
- K. "Direct Service Provider" Provider employee, volunteer, paid or unpaid intern, or Independent Service Provider, who provides direct care and/or Covered Services to a Participant/Service Recipient on behalf of a Provider, for which the Provider receives compensation from the Purchaser under this Agreement.
- L. **Disabilities Services Division**" A division of County administering programs to enhance the quality of life for individuals with physical, sensory and developmental disabilities and their support networks living in Milwaukee County by addressing the participant's identified needs and meeting her/his desired individual outcomes and providing individualized opportunities to participate in the community.
- M. "Emergency Management Plan" (Disaster Plan) the procedures, developed by the Provider organization, to manage an internal or external hazard that threatens Residents/Service Recipients, staff, and/or visitor life and safety.
- N. "Fraud" involves an intentional deception and representation that an individual either knows is false or does not believe to be true and is related to a material fact. Examples of Fraud include, but are not limited to: embezzlement; misappropriation, misapplication, destruction, removal, or concealment of property; alteration or falsification of documents, including pre-signing logs or falsification of signatures; authorizing or receiving compensation for services not performed, authorizing or receiving compensation for hours not worked.

- O. "Independent Service Provider": is an individual independent contractor with a contractual relationship with provider, who is not an employee of the provider.
- P. "Indirect Staff"-is an employee or individual independent contractor who is not a Direct Service provider, but is associated with Covered Services as a supervisor, billing staff, case records and/or quality assurance worker, and/or is someone who has access to clients, client property, and/or client information of Service Recipients. Agency owner, President, CEO, Executive Director, and/or Senior Staff are considered Indirect Staff if reporting to work at a site where Covered Services are provided.
- Q. "Milwaukee County Department of Health and Human Services" (DHHS) A governmental subunit of Milwaukee County created by action of the Milwaukee County Board of Supervisors as authorized by state statute to provide or purchase care or treatment services for residents of Milwaukee County. The Department of Health and Human Services consists of the following six divisions: Economic Support, Delinquency and Court Services, Disabilities Services, Management Services, Behavioral Health and County Health Programs. The mission of DHHS is to secure human services for individuals and families who need assistance in living a healthy, independent life in our community.
- R. "Participant" individual who is enrolled in the Purchaser's Program.
- S. "Policies and Procedures" Purchaser policies and procedures, service descriptions, Provider Bulletins, memos, this Agreement, and/or other program specific written (including email) requirements and all applicable federal, state and county statutes and regulations which are in effect at the time of the delivery of Covered Services.
- T. "Provider" agency or individual with whom this Agreement has been executed.
- U. "Provider Network" All Providers with whom an Agreement has been executed with Purchaser.
- V. "Quality Assurance/Utilization Management" a system that provides ongoing monitoring activities related to the quality, appropriateness, effectiveness, cost and utilization of Covered Services including implementation of corrective actions determined and authorized by the Purchaser or County to be appropriate, including recoupment of monies if deemed necessary.
- W. "Service Documentation" Consents, assessments, service plans, reviews, Case Notes, monthly reports, ledgers, budgets, and all other written or electronic program and/or fiscal records relating to Covered Services.
- X. "Service Plan" written document that describes the type, frequency and/or duration of the Covered Services that are to be provided to enrolled Participant and/or Participant's family. For WIser Choice, Service Plan refers to a Single Coordinated Care Plan. For Wraparound Milwaukee, Service Plan refers to the Plan of Care. For SAIL, Service Plan refers to an Individualized Service Plan. For Children's Court Services Network, Service Plan refers to the Service Plan Authorization Form and/or the Service Plan Amendment. For Disabilities Services Division, Service Plan refers to an Individualized Service Plan.

- Y. "Service Recipient" person or persons identified in a service authorization as the recipient of Covered Services provided by the Direct Service Provider.
- Z. "Site Review" Visual inspection of Provider's premise, employee records, service documentation, interview of appropriate persons or individuals including but not limited to: employees, participants, service recipients, parent/guardians, individuals with knowledge of the services recipient's receipt of the Covered Service. The above may be conducted by Purchaser representatives, the Milwaukee County Department of Audit and representatives of appropriate federal, state or local agencies.
- AA. "State" The word State when used in this Agreement shall mean the State of Wisconsin.

ATTACHMENT II

MILWAUKEE COUNTY DEPARTMENT OF HEALTH AND HUMAN SERVICES DHHS DELINQUENCY AND COURT SERVICES DIVISION BILLING AND PAYMENT POLICY FOR 2014 PURCHASE OF SERVICE CONTRACT

CONTRACTOR shall submit to COUNTY on or before the tenth (10th) working day of the month following delivery of purchased services, program Expense and Revenue Reports for each service provided and/or a report of all clients served and units of service provided as required by Attachment I. Reports must be submitted in format approved by DHHS Accounting and provided by DHHS Contract Administration for purchased services. Reports for services provided under this contract must be emailed to DHHS Accounting for initial approval at:

dhhsaccounting@milwcnty.com

For the months of January and February, COUNTY may make an early payment to CONTRACTOR equal to one-sixth (1/6th) of the contract amount, or in an amount as directed by the Division Administrator. In addition, early payment on contracts with a duration of more or less than 12 months (a non-standard contract term) shall be determined at the discretion of the Division Administrator.

Subsequent to the early payment if any, CONTRACTOR shall receive payment for actual, year-to-date billings submitted to COUNTY, and said billings shall result in a payment to CONTRACTOR within thirty (30) working days following receipt, review and approval of the reports, and required supporting documentation if any, by COUNTY.

However, for the last two to four months of the contract, payments to CONTRACTOR based on cumulative amount earned may be reduced to reflect the effect of the early payment on year-to-date payments. Commencement of such adjustments may be affected by contracts with a non-standard term, and may commence earlier at the sole discretion of the county. In no event shall total payments (including early payment) under the contract exceed the amount of the contract.

Computation of the amount earned under this contract will be based on the payment method specified on Attachment I. In no event shall payment for any one month be more than the lesser of (a), (b) or (c) as calculated on a cumulative basis: (a) net expenses (gross program expenses less other program revenues); (b) the net amount earned (Purchase of Service units of service delivered times the contract rate,), if applicable; or (c) the cumulative pro-rata share of contract amount (based on a factor the numerator of which is the number of payment periods reported, the denominator of which is the number of payment periods in the contract) less previous payments. A non-standard year affects the denominator.

Reports received thirty (30) days after the termination of this contract will not be considered for payment by COUNTY. COUNTY reserves the right to withhold payment or modify the above payment schedule where CONTRACTOR fails to deliver the contracted services in accordance with the terms of this contract or fails to submit billing claims as required above.

ATTACHMENT I - SCHEDULE OF SERVICES TO BE PURCHASED

Milwaukee County Department of Health and Human Services Delinquency and Court Services Division

Contract Period: May 1, 2014 through December 31, 2014

Contractor: Wisconsin Community Services, Inc. 3732 W. Wisconsin Avenue., Suite 200 Milwaukee, WI 53208 Milwauk									Contract # 40-14945-400B	L-14945-400B
State 200 Fed ID: 39-0808464 Resolution #: Resolutio	Contractor: W	fisconsin Community Services, Inc.								
Milwaukee, WI 53208 Total Agency Program Program Total Agency Afrea Budget Units Unit Clients Units Slots Per Slots	ું જો	32 W. Wisconsin Avenue., Suite 200		Fed ID: 39	-0808464				Resolution #:	A/N
Total Agency Cost Total County County Program Program Total Per Agency County County Cost Sot Area Budget Units Unit Clients Units Slots Per Slot 1. Community Service and Restitution Coordination Program* N/A N/A N/A N/A N/A 1041:	Σ	liwaukee, WI 53208		Contact: Ho	ollis Patzer			n	soard Approval:	K/A
Program Program Total Per Agency County County Cost Area Budget Units Unit Clients Units Slots Per Slot 1. Community Service and Restitution Coordination Program* N/A N/A N/A N/A N/A 20 Total:			Total Agency		Cost	Total			County	
Area Budget Units Units Units Slots Per Slot Per Slot N/A N/A N/A N/A N/A N/A N/A N/A Total:	Disability/	Program	Program	•	Per	Agency	County	County	Cost	County
1. Community Service and Restitution Coordination Program* N/A N/A N/A N/A N/A N/A 20 N/A Total:	Target Group	Area	Budget		Unit	Clients	Units	Slots	Per Slot	Contract
Total:	Delinquency	1, Community Service and Restitution Coordination Program*	A/N		A/A	A/N	N/A	20	N/A	\$107,975
								0.7	Total:	\$107,975

=
ent II
Ĕ
없
Atta
5
<u>छ</u>
8
ä
Ĕ
Ö
Ě
2
dan
ō
g
.⊑
es
enses
8
ij
₹
S
àid
<u>а</u>
7: A
ğ
ğ
亞
atior
ging
Cool
뎚
큺
Restitution
ğ
ä
ŝ
ě
ity S
Ξ
Ë
ਨੁ
•
ä
ğ
Ę
₽
ethod for
пţп
me
Pay
*

FOR AMENDMENTS ONLY:	ONLY:
Amended: Contract Crange #: This amendment supe	Amended: Contract Change #: This amendment supersedes Attachment I attached to: Contract # Dated:
Risk Manager:	Date
Corp Counsel:	Dodo
Contractor:	Date:
DCSD Administrator:	Date
DHHS Director:	Date
County Executive:	Date
Exhibit 1 Rev. 08/12	Date

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 2/13/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

13 Insurance Solutions, Inc. 14 A. B. Bericole 273-1655 15 A. B. Bericole 273-1725 16 A. B. Bericole 273-1725 17 Annual Street 273-1825 18 Bericole 273-1	certificate holder in lieu of such endorsement(s).										
ACCOMMENDATION OF MUNICIPAL LIGHT VICTORIAN LI	PROD	JCER			TO THE TAX						
ACCRESS ASSOCIATED AND STATES ASSOCIATED ASSOCIATED AND STATES ASSOCIATED ASSOCIATED ASSOCIATED ASSOCIATED AND STATES ASSOCIATED ASS					(A/C, No, Ext): 608-273-0655 (A/C, No): 608-273-1725						
MSURERGY AFFORMAC COVERAGE MSURERGY Progressive Casualtria (1600min) Insurance Plan MSURERGY					E-MAIL ADDRESS: melissa	a.adamany@	m3ins.com				
RESURED RESURED AFFORD COURSE RESURED AND COURSE RESURED AND COURSE RESURED ASSESSED AND COURSE RESURED AND COURSE RESURE	Mau	,801 W. 53706 0550			PRODUCER CUSTOMER ID #:						
MONTRAY COMMENDATE STATE						URER(S) AFFORI	DING COVERAGE	NAIC#			
### ### ### ### ### ### ### ### ### ##	PICTIC	CD.			INSURERA: Progre	ssive Cas	ualty Company	16322			
MISURERCE: NEST BEND MUTUAL INSURANCE 22608 MISURERCE: MISURER			Inc.								
MSURER F: NEURING T: NEURING THE POLICES OF INSTITUTATION ANY FECURE MINT. TERM OR COADITION OF ANY CONTRACT OR OTHER DOLUMENT WHITE PROJECT TO WHICH THIS CERTIFICATE MUMBER SINGLE THE POLICE MINT. TERM OR COADITION OF ANY CONTRACT OR OTHER DOLUMENT WHITE PROJECT TO WHICH THIS CERTIFICATE MUMBER SINGLE THE POLICE MINT. TERM OR COADITION OF ANY CONTRACT OR OTHER DOLUMENT WHITE PROJECT TO WHICH THIS CERTIFICATE MUMBER SINGLE AND RULL OF THE POLICE MINT. TO ALL THE TERMS, EXCLUSIONS AND COADITIONS OF SUCH POLICES LIMIT SHOWN ANY FEED OF HOUSE AND THE POLICE MINT. SHOWN ANY FEED OF HOUSE AND THE POLICE MINT. SHOWN AND THE PAID CLAMS. NEED OF HOUSE AND THE POLICE MINT. SHOWN AND THE PAID CLAMS. SHOWN AND THE PAID	3732	W. Wisconsin Ave., Rm 200						22608			
COVERAGES CERTIFICATE NUMBER: 127573087 THIS STO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED-AGOVE FOR THE CRIST PERSON PROPERTY PROJECT TO PERSON PROVIDED TO THE INSURED NAMED-AGOVE FOR THE CRIST PERSON PROVIDED TO THE INSURED NAMED-AGOVE FOR THE CRIST PERSON PROVIDED TO THE INSURED NAMED-AGOVE FOR THE CRIST PERSON PROVIDED TO THE POLICIES DESCRIBETER IS SUBJECT TO ALL THE TEMPORAL MAY BE ISSUED OT NAMED FOR THE CRIST PERSON PROVIDED TO ALL THE TEMPORAL PROVIDED NAMED AND CONDUCTABLE TO ALL THE TEMPORAL PROVIDED T	Mil	vaukee WI 53208-3166		F		CHC HACAL					
REVISION NUMBER: THIS IS TO CERTIFY THAY THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE ROUGH ON MED ABOVE FOR THE POLICY PRICE POLICY TO THE ROUGH ON THE RO				i i							
COVERAGES CENTIFICATE NUMBER: 275753087 REVISION NUMBER: THES BYO CERTIFY THAY THE POLICES GO INSURANCE LUST LEBEL SOF INCOMPTION OF ANY CONTRACT ON OTHER DOCUMENT WHITH RESPECT TO PERSON INCOMPTION OF ANY CONTRACT ON OTHER DOCUMENT WHITH RESPECT TO PERSON INCOMPTION OF ANY CONTRACT ON OTHER DOCUMENT WHITH RESPECT TO PERSON INCOMPTION OF ANY CONTRACT ON OTHER DOCUMENT WHITH RESPECT TO PERSON INCOMPTION OF ANY CONTRACT ON OTHER DOCUMENT WHITH RESPECT TO PERSON INCOMPTION OF ANY CONTRACT ON OTHER DOCUMENT WHITH RESPECT TO PERSON INCOMPTION OF ANY CONTRACT ON OTHER DOCUMENT WHITH RESPECT TO PERSON INCOMPTION OF ANY CONTRACT ON OTHER DOCUMENT WHITH RESPECT TO PERSON INCOMPTION OF ANY CONTRACT ON OTHER DOCUMENT WHITH RESPECT TO PERSON INCOMPTION OF ANY CONTRACT OF ANY CONTRA				t t							
COVERAGES THIS IS TO CERTIFY THAY THE POLICIES OF INSERRACE LISTED BELLOY 32 SEEEN ISSUED TO THE NOBLER ON MAILE ABOVE FOR THE POLICY THE POLICY SEED OF THE POLICY	Ĺ						PEVISION NUMBER				
Type of INSURANCE ADDITION Type of INSURANCE INSURANCE INSURANCE ADDITION POLICY NUMBER INSURANCE ADDITION INSURANCE INSURANCE ADDITION INSURANCE INSUREDE INSUREDE INSUREDE INSUREDE INSUREDE INSUREDE INSUREDE INSUREDE INSURED INSU	COV	ERAGES CERTI	IFICATE	NUMBER: 127575308	/ 	MEHDERNAME	D-ABOVE FOR THE POLICY	<u> </u>			
TYPE OF INSURANCE ADDISSOR POLICY NUMBER CHARGOTTON NUMBER ADDISSOR POLICY NUMBER CHARGOTTON	TO ACT THE TERMS, EXCEDITION AND CONSTITUTION										
CAMBERCIAL GENERAL LIABILITY Y NST0449672 2/9/2014 2/9/2015 EACH OCCURRENCE \$1,000,000 DAMAGE TOROWNED \$200,000 DAMAGE TOROWNED \$200,000 DAMAGE TOROWNED \$10,000 DESCRIPTION OF OPERATIONS JUDICAL TOROWNED	1				POLICY EFF	POLICY EXP		S			
Commercial General Liability Claims-made X Occur		1.0				2/9/2015	EACH OCCURRENCE	\$1,000,000			
COMMERCIAL ESPERATIONS SOCIUR HEED EXP (Any one person) \$11,000 PERSONAL ADV NUMBER \$1,000,000 PERSONAL ADV NUMBER \$2,000,000 PRODUCTS - COMPICIPACES \$2,000,000 PRODUCTS - COMPICINAL PROPERTY \$1,000,000 PRODUCTS - COMPICINAL PROPERTY PROPERTY PARKS \$2,000,000 PRODUCTS - COMPICINAL PROPERTY PARKS P	1	GENERAL CIABILITY					DAMAGE TO RENTED	\$200,000			
GENT AGGREGATE LIMIT APPUIES PER: GENT AGGREGATE LIMIT APPUIES PER: DOLLOY PRODUCTS - COMPIOP AGG 22,000,000 PRODUCTS - COMPIOP AGG 22,000,000 PRODUCTS - COMPIOP AGG 22,000,000 S - PRODUCTS - COMPIOP AGG 22,000,000 ANY AUTO ALL OWNED AUTOS X SCHEDULED AUTOS X HIRED AUTOS X NON-OWNED AUTO			ļ					\$10,000			
GENLAGGREGATE LIMIT APPLIES PER: POLICY		CLAIMS-MADE X OCCUR	1		ł	ļ .		\$1,000,000			
GENLAGGREGATE LIMIT APPLIES PER: POLICY SEC											
SECNLAGGREGATE LIMIT APPLIES PER: POLICY TROP LOC ANY AUTO ALL OWNED AUTOS ALL OWNED AUTOS ALL OWNED AUTOS ANY AUTO ALL OWNED AUTOS ALL OWNED AUTOS ALL OWNED AUTOS ANY AUTO ALL OWNED AUTOS ALL OWNED AUTOS ALL OWNED AUTOS ANY AUTO ALL OWNED AUTOS				1							
A AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS X SCHEDULED AUTOS X HIRED AUTOS X NON-OWNED AUTOS X HORNOR SLEIA LIAB DEDUCY INJURY (Per person) X NON-OWNED AUTOS X HORNOR SLEIA LIAB CLAMS-MADE DEDUCTIBLE RETERTION \$ RETERTION \$ NORKERS COMPRENSATION AND PROPRIETOR PRENSTREMES COUTIVE (Mendatory in Hill) CESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Re: Wiser Choice program, 3732 W. Wisconsin Ave, Suite 310, 53208. CERTIFICATE HOLDER CAMBRED SINGLE LIMIT \$1,000,000 EACH OCCURRENCE \$1 ADOME NUMBER (LIMIT) \$1,000,000 EACH OCCURRENCE \$1 AGGREGATE			1			1	PRODUCTS-COMPICE ACC				
ANY AUTO ALL OWNED AUTOS X SCHEDULED AUTOS X HIRED AUTOS X HIRED AUTOS X NON-OWNED A	Δ.		Y		2/5/2014						
ALL OWNED AUTOS X SCHEDULED AUTOS X HIRED AUTOS X NON-OWNED AUTOS X NON-OWNED AUTOS X NON-OWNED AUTOS B COCUR EXCESS LIAB CLAIMS.MADE DEDUCTIBLE RETENTION \$ WORKERS COMPENSATION ANY PROPRICTOR PARTINER/EXECUTIVE (Mandatory in Wil) (Mand SMPL, O'REATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) Certificate holder is listed as an Additional Insured for General Liability, Auto and Umbrella to the extent required by contract. Auto liability applies to all autos owned by the insured. Waiver of CERTIFICATE HOLDER CANCELLATION CERTIFICATE HOLDER BOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPRATION DATE THEREOF, NOTICE WILL BE DELIVERED NACORDANCE WITH THE POLICY PROVISIONS.				NST0449672	2/9/2014	2/9/2013					
X SCHEDULED AUTOS X HIREO AUTOS X NON-OWNED AUTO		- "									
HIRED AUTOS S NON-OWNED AUTOS S S	'	 ()				Ì	<u> </u>				
NON-OWNED AUTOS S S											
UMBRELIA LIAB OCCUR EXCESS LIAB CLAIMS_MADE DEDUCTIBLE RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETORY_PARTINEM/EXECUTIVE OFFIcer/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under OSSCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Altach ACORD 101, Additional Remarks Schedule, If more space is required) Re: WIser Choice program, 3732 W. Wisconsin Ave, Suite 310, 53208. Certificate holder is listed as an Additional Insured for General Liability, Auto and Umbrella to the extent required by contract. Auto liability applies to all autos owned by the insured. Waiver of Subrogation in favor of Milwaukee County. CERTIFICATE HOLDER EACH OCCURRENCE \$ AGGREGATE \$ SEACH OCCURRENCE \$ AGGREGATE \$ AGGREGATE \$ SEACH OCCURRENCE \$ AGGREGATE \$ SEACH OCCURRENCE \$ AGGREGATE \$ AGGREGATE \$ AGGREGATE \$ SEACH OCCURRENCE \$ AGGREGATE \$	ļ.	1111125710100				ļ		\$			
DEDUCTIBLE RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNER/SECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under OESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Attach ACORO 101, Additional Remarks Schedule, If more space is required) Re: WISer Choice program, 3732 W. Wisconsin Ave, Suite 310, 53208. Certificate holder is listed as an Additional Insured for General Liability, Auto and Umbrella to the extent required by contract. Auto liability applies to all autos owned by the insured. Waiver of Subrogation in favor of Milwaukee County. CERTIFICATE HOLDER AGGREGATE \$ 2/9/2015 X WG STATU EL. EACH ACCIOENT EL. DISEASE - POLICY LIMIT \$100,000 EL. DISEASE - POLICY LIMIT \$500,000 EL. DISEASE - POLICY LIMIT \$500,000 CEXTIFICATE HOLDER CANCELLATION CAN		NON-OWNED AUTOS						\$			
DEDUCTIBLE RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNER/SECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under OESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Attach ACORO 101, Additional Remarks Schedule, If more space is required) Re: WISer Choice program, 3732 W. Wisconsin Ave, Suite 310, 53208. Certificate holder is listed as an Additional Insured for General Liability, Auto and Umbrella to the extent required by contract. Auto liability applies to all autos owned by the insured. Waiver of Subrogation in favor of Milwaukee County. CERTIFICATE HOLDER AGGREGATE \$ 2/9/2015 X WG STATU EL. EACH ACCIOENT EL. DISEASE - POLICY LIMIT \$100,000 EL. DISEASE - POLICY LIMIT \$500,000 EL. DISEASE - POLICY LIMIT \$500,000 CEXTIFICATE HOLDER CANCELLATION CAN				<u> </u>		 	EACH OCCURRENCE	s			
EXCESSION CLAIMS-MADE DEDUCTIBLE RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS LIABILITY OFFICER/MEMBER EXCLUDED? (Mandatory in Mr) If yes, describe under operations / Locations / Vehicles (Attach ACORD 101, Additional Remarks Schedule, If more space is required) DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) Re: Wiser Choice program, 3732 W. Wisconsin Ave, Suite 310, 53208. Certificate holder is listed as an Additional Insured for General Liability, Auto and Umbrella to the extent required by contract. Auto liability applies to all autos owned by the insured. Waiver of Subrogation in favor of Milwaukee County. CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					İ						
B WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTINER/EXECUTIVE [Mandatory in NH] If yet describe under OESCRIPTION OF OPERATIONS below DESCRIPTION OF OPERATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) Re: WIser Choice program, 3732 W. Wisconsin Ave, Suite 310, 53208. Certificate holder is listed as an Additional Insured for General Liability, Auto and Umbrella to the extent required by contract. Auto liability applies to all autos owned by the insured. Waiver of Subrogation in favor of Milwaukee County. CERTIFICATE HOLDER V		EXCESS LIAB CLAIMS-MADE	Ì		ļ		130013EQC1E				
RETENTION \$ B WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNEW/EXECUTIVE OFFICE/RM/EMBER EXCLUDED? (Mandatory in NH) If yes, describe under OESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) Re: Wiser Choice program, 3732 W. Wisconsin Ave, Suite 310, 53208. Certificate holder is listed as an Additional Insured for General Liability, Auto and Umbrella to the extent required by contract. Auto liability applies to all autos owned by the insured. Waiver of Subrogation in favor of Milwaukee County. CERTIFICATE HOLDER RETENTION \$ Y GJUBSO37P51412 2/9/2014 2/9/2015 X WCSTATU Stool,000 EL DISEASE - POLICY LIMIT \$100,000 EL DISEASE - POLICY LIMIT \$500,000 EL DISEASE - POLICY LIMIT \$100,000 EL DISEASE - POLICY LIMIT \$100,0	Ì	DEDUCTIBLE				}					
AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under OESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) Re: WIser Choice program, 3732 W. Wisconsin Ave, Suite 310, 53208. Certificate holder is listed as an Additional Insured for General Liability, Auto and Umbrella to the extent required by contract. Auto liability applies to all autos owned by the insured. Waiver of Subrogation in favor of Milwaukee County. CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.		RETENTION \$			2/0/2014	2/9/2016	wc statu- oth-				
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under of Scription of Operations / Locations / Vehicles (Altach Acord 101, Additional Remarks Schedule, If more space is required) DESCRIPTION OF OPERATIONS / Locations / Vehicles (Altach Acord 101, Additional Remarks Schedule, If more space is required) Re: Wiser Choice program, 3732 W. Wisconsin Ave, Suite 310, 53208. Certificate holder is listed as an Additional Insured for General Liability, Auto and Umbrella to the extent required by contract. Auto liability applies to all autos owned by the insured. Waiver of Subrogation in favor of Milwaukee County. CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	В	The second of the part of the second	Y	6JUB5037P51412	2/9/2014	712170TD					
Mandatory in NH) New describe under DESCRIPTION OF OPERATIONS below EL DISEASE - POLICY LIMIT \$500,000	1	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A	***************************************				<u> </u>			
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) Re: Wiser Choice program, 3732 W. Wisconsin Ave, Suite 310, 53208. Certificate holder is listed as an Additional Insured for General Liability, Auto and Umbrella to the extent required by contract. Auto liability applies to all autos owned by the insured. Waiver of Subrogation in favor of Milwaukee County. CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.		(Mandatory in NH)				ļ					
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Altach ACORD 101, Additional Remarks Schedule, If more space is required) Re: WIser Choice program, 3732 W. Wisconsin Ave, Suite 310, 53208. Certificate holder is listed as an Additional Insured for General Liability, Auto and Umbrella to the extent required by contract. Auto liability applies to all autos owned by the insured. Waiver of Subrogation in favor of Milwaukee County. CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	1	If yes, describe under				<u> </u>	E.L. DISEASE - POLICY LIMIT	\$\$500,000			
Re: WIser Choice program, 3732 W. Wisconsin Ave, Suite 310, 53208. Certificate holder is listed as an Additional Insured for General Liability, Auto and Umbrella to the extent required by contract. Auto liability applies to all autos owned by the insured. Waiver of Subrogation in favor of Milwaukee County. CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	-					Į.					
Re: WIser Choice program, 3732 W. Wisconsin Ave, Suite 310, 53208. Certificate holder is listed as an Additional Insured for General Liability, Auto and Umbrella to the extent required by contract. Auto liability applies to all autos owned by the insured. Waiver of Subrogation in favor of Milwaukee County. CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	1					<u> </u>	<u> </u>				
Re: WIser Choice program, 3732 W. Wisconsin Ave, Suite 310, 53208. Certificate holder is listed as an Additional Insured for General Liability, Auto and Umbrella to the extent required by contract. Auto liability applies to all autos owned by the insured. Waiver of Subrogation in favor of Milwaukee County. CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (Altac	h ACORD 101, Additional Remarks	Schedule, If more space	ls required)					
Certificate holder is listed as an Additional Insured To Contact Auto Insured Subrogation in favor of Milwaukee County. CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.							. Tuto and Ilmbre	lla to the			
extent required by contract. Auto Hability applies to the substance of the	Cer	rtificate holder is listed	as an	Additional Insured	tor General	numed by	y, Auto and ombre the insured. Wa	iver of			
CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	love	ent required by contract.	Auco	TIMDITICA GPDITES	to all autos	Outloa by					
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	Sul	progation in favor of Milwa	uves (-contry -							
BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	CE	RHFIGATE HOLDER					SCOIDED DOLICIES BE CA	NCFLLED			
IN ACCORDANCE WITH THE POLICY PROVISIONS.	Į				DECODE THE FYP	RATION DATE	THEREUF, NUTICE WILL D	E DELIVERED			
					IN ACCORDANCE	WITH THE POL	ICY PROVISIONS.				

CERTIFICATE HOLDER	CANCELLATION
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Milwaukee County Department of Health and	
Human Services 1220 W. Vliet Street, Suite #301	AUTHORIZED REPRESENTATIVE
Milwaukee WI 53205	ywandsh. M.
	0

© 1988-2009 ACORD CORPORATION. All rights reserved.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/13/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must be endorsed. If SUBROGATION IS WAIVED, subject to policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the

certificate holder in lieu of such endorse	men	t(s).	<u> </u>	POSTA	T			
PRODUCER				CONTAC NAME: PHONE	<u>Melissa</u>	Adamany	I FAX	
M3 Insurance Solutions, Inc. P.O. Box 8950				(A/C, No.	Ext): 608-2'	73-0655	FAX (A/C, No): 608-2 @m3ins.com	273-1725
Madison WI 53708-8950				ADDRES	s: melissa ER	a.adamany	@m3ins.com	
				CUSTOM	ER ID #:			NAIC#
							DING COVERAGE	
INSURED	T						ualty Company	16322
Wisconsin Community Services, 3732 W. Wisconsin Ave., Rm 200	THG	•				end Mutua	l Insurance	22608
Milwaukee WI 53208-3166				INSURER				
				INSURER				
				INSURER				1
		A briggi	AUMOCO, gazan Anco	INSURE	RF:		REVISION NUMBER:	L
COVERAGES CERT	IFIC.	AIL	NUMBER: 783034368	ENISSI	ED TO THE 1	VSURED NAME	D ABOVE FOR THE POLICY	
COVERAGES CERT THIS IS TO CERTIFY THAT THE POLICIES OF PERIOD INDICATED. NOTWITHSTANDING AN WHICH THIS CERTIFICATE MAY BE ISSUED O TO ALL THE TERMS, EXCLUSIONS AND CONI	IY RECOR MA	QUIR Y PE NS O	EMENT, TERM OR CONDITI RTAIN, THE INSURANCE AI F SUCH POLICIES. LIMITS S	ON OF A FORDER SHOWN A	NY CONTRAC D BY THE POL MAY HAVE BE	CT OR OTHER LICIES DESCRI EN REDUCED	DOCUMENT WITH RESPECT TO IBED HEREIN IS SUBJECT BY PAID CLAIMS.	
men /	ADDLIS	PREUE	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
B GENERAL LIABILITY	INSR) Y		NST0449672			2/9/2015	EAGI OCCURENCE	0,000
- CENTERING - CENTERING							DAMAGE TO RENTED PREMISES (Ea occurrence) \$200	000
X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR							MED EXP (Any one person) \$10,1	000
CDAING-NACE [11] CCCCA			Į.		<u>.</u>	PERSONAL & ADV INJURY \$1,00	00,000	
	Ì		ļ			GENERAL AGGREGATE \$2,0	00,000	
GEN'L AGGREGATE LIMIT APPLIES PER:							PRODUCTS - COMP/OP AGG \$2,0	00,000
POLICY PROJECT LOC A AUTOMOBILE LIABILITY B	Y		04127570-9 NST0449672		2/5/2014 2/9/2014	2/5/2015 2/9/2015	COMBINED SINGLE LIMIT (Ea accident) \$1,0	00,000
ANY AUTO	Į		••••••••••••••••••••••••••••••••••••••				BODILY INJURY (Per person) \$	
ALL OWNED AUTOS	1	ļ					BODILY INJURY (Per accident) \$	
X SCHEDULED AUTOS		1		ļ			PROPERTY DAMAGE \$	
X HIRED AUTOS							(Per accident) \$	
X NON-OWNED AUTOS	ļ					1	- s	
					2/0/2014	2/9/2015	EACH OCCURRENCE \$4,0	00,000
B UMBRELLA LIAB X OCCUR	Į		NUT0451620	1	2/9/2014	2/3/2013	District Control Control	00,000
EXCESS LIAB CLAIMS-MADE				ļ			AGGREGATE \$	
DEDUCTIBLE							s	
X RETENTION \$0 WORKERS COMPENSATION	\vdash	Y					WC STATU- OTH-	
AND EMPLOYERS' LIABILITY Y/N							E.L. EACH ACCIDENT \$	
OFFICERMENTER EXCEPTED	N/A		***				E.L. DISEASE - EA EMPLOYEE \$	
(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT \$	
DESCRIPTION OF OPERATIONS DRIOW		-						
				Date - 1.4	If men sees	le required ¹		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICL	1.7	T.7 -	Lagranain Aug Cili	ተው ገገፅ	1. 53208.			
Re: WIser Choice program, 373 Certificate holder is listed							y, Auto and Umbrella	to the
lextent required by contract.	Aut	co.	liability applies	to al	ll autos	owned by	the insured. Waiver	of
Subrogation in favor of Milwa	uke	e Co	ounty.					
CERTIFICATE HOLDER				1	CELLATION			
				BEFO	RE THE EXPI	RATION DATE	SCRIBED POLICIES BE CANCEL THEREOF, NOTICE WILL BE DEL ICY PROVISIONS.	IVERED
Milwaukee County Dep Human Services	artı	men	t of Health and					
1220 W. Vliet Street Milwaukee WI 53205	:, S	uit	e #301	AUTHO	RIZED REPRES	M. Jul	DWG#7	
1							CORD CORPORATION. All r	

The ACORD name and logo are registered marks of ACORD

CONTRA	ACT FOR	M 1684 R4 (Refe	er to ADMINI	STRATIVE M	IANUAL S	ection 1.13, fo	or procedures	3)				
Mail to:										CONTRA	Allegan account	
Preliminary:		Comptroller, Co							Professional Service - Operating Professional Service - Capital			
Final:		Comptroller, Ac							-	100000 4 (000000000000000000000000000000		e of Service X
	Community E	Business Develo	pment Par	tners, 8th F	loor City	Campus			Preliminary	X	2010/2010/2010	Final
DEPARTMEN	UT NAME					10°			AGENCY NO.		A CONTRACTOR OF THE PARTY OF TH	TMENT (HIGH) ORG
		th and Hum	an Sory	icos	2126				800			8000
	The state of the state of the	th and Hum	ian Serv	1005	ra Tigoria		MALE EST			The Th		
VENDOR	INFORMAT	ENDOR NO.			ORDE	R TYPE	NEW or	AMEND		CONTR	RACT NO	0.
		INDONTION		-	CHE TO SERVICE					140	45	4000
	- Commission				7011		X		40 ADDRESS	149	45	400B
NAME OF VEN	IDOR								ADDRESS			
Wisconsii	n Commur	nity Services	s, Inc.			3732 V	/. Wisco	nsin Av	enue, Suite	200		
						Milwaul	kee, WI	53208				
	7.						33.0.322.2234 # 1 (-2, 0.762-4					
TAX I.	The state of the s			TH OF CONT		AMENDMENT O		LLAR	TOTAL CONTRACT AMOUNT			
TAX I.D. NO. EFFECTIVE DATES: begin date end date						(IN MONTHS	CHANGE			AMOUNT	
39-08	08464	05/01	/14	12/3	1/14	7 Months						\$107,975
ACCOUNT	TING INFO	RMATION										Amount to be
Year to be	Line No	Fund	Agency	Org Unit	Activity	Function	Object	Jo	b Number	Report	Units	Expended/ Amendment
Expended				0000			0400		-			\$ 107,975.00
2014				8933			8123					\$ 107,973.00
										1		
		- 1741-2 2-2										
PURPOSE	OF CONT	RACT					Lit. His wa		t appartunitas	for you	th ac c	ordered by the
The purpo Children's		ontract is to p	provide c	ommunity	/ service	e and res	titution re	рауттег	it opportunites	s ioi you	ui as c	ordered by the
Cilialens	Court.											
Mac Count	v Board ann	roval received	prior to c	ontract ex	ecution o	or contract	amendm	ent or ex	tension?			
VVas Count	y board appr	1	prior to o	ontidot ox	oodiioire	,, 00,,,,,,,,						
		If YES, giv	e County	Board File	e No.				_Date Approve	d		
	V]		D 1	reconstruct to		ا ر	cubical	to passive re	wiew		
	X	If NO, why							to passive re	VICV	_	YES x NO
Was Contra	act fully exec	cuted prior to v	work being	g perrorme	ed (all sig	gnatures re	eceivea)?					-
ls Vendor a	certified pro	fessional serv	vice DBE?								L	YES x NO
Theresa	Pandall			5/6/20	14	1	DCSD,	Contra	ct Services	Coordi	nator	
Prepared B			-	Date			Title				-	
DocuSign				5/14/2	014	1		ict Adm	inistator			
Vennis	Busing	* (*) * (*]	Title	CC AGII				
gignatures	ਸ਼ ₆ ਿਰਮnty Ad	ministrator		Date			TIUC					
1												