



Nevada Clinical Services, Inc.
(hereinafter referred to as "NCS")
GRANT AGREEMENT AND NOTICE OF GRANT AWARD
(hereinafter referred to as "Grant" or "Agreement")

Program Name: Mobile Outreach Safety Team	Grantee: Washoe County Human Services Agency ("Grantee") Dorothy Edwards daedwards@washoecounty.us (775) 337-4506																						
Grant Period: Year 1 – July 1, 2021 - June 30, 2022 Year 2 – July 1, 2022 - June 30, 2023	Address: 350 South Center Street Reno, NV 89501 EIN: 88-6000138 NCS Contract # 206454 Dun & Bradstreet: 07-378-6998																						
Purpose of Award: To provide crisis and jail diversion services through a Mobile Outreach Safety Team to individuals with a mental health condition who have come in contact with law enforcement.																							
Region(s) to be served: <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Specific county or counties: <u>Washoe County</u>																							
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left;">APPROVED ANNUAL BUDGET CATEGORIES:</th> </tr> <tr> <td style="width: 60%;">1. Personnel</td> <td style="text-align: right;">\$814,840.00</td> </tr> <tr> <td>2. Travel</td> <td style="text-align: right;">\$4,416.00</td> </tr> <tr> <td>3. Operating</td> <td style="text-align: right;">\$30,807.00</td> </tr> <tr> <td>4. Equipment</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td>5. Contractual/Consultant</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td>6. Training</td> <td style="text-align: right;">\$4,712.00</td> </tr> <tr> <td>7. Other</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td>TOTAL DIRECT COSTS</td> <td style="text-align: right;">\$854,775.00</td> </tr> <tr> <td>8. Indirect Costs</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td>TOTAL APPROVED BUDGET</td> <td style="text-align: right;">\$854,775.00</td> </tr> </table>	APPROVED ANNUAL BUDGET CATEGORIES:		1. Personnel	\$814,840.00	2. Travel	\$4,416.00	3. Operating	\$30,807.00	4. Equipment	\$0.00	5. Contractual/Consultant	\$0.00	6. Training	\$4,712.00	7. Other	\$0.00	TOTAL DIRECT COSTS	\$854,775.00	8. Indirect Costs	\$0.00	TOTAL APPROVED BUDGET	\$854,775.00	The approved annual budget categories are annual not-to-exceed amounts. Accordingly, Grantee may not spend in excess of \$854,775.00 in Year 1 (July 1, 2021 – June 30, 2022) and may not spend in excess of \$854,775.00 in Year 2 (July 1, 2022 – June 30, 2023) such that the total not-to-exceed amount for the two-year Grant Period (July 1, 2021 – June 30, 2023) may not exceed \$1,709,550.00.
APPROVED ANNUAL BUDGET CATEGORIES:																							
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TOTAL DIRECT COSTS	\$854,775.00																						
8. Indirect Costs	\$0.00																						
TOTAL APPROVED BUDGET	\$854,775.00																						
Grantee Approved Indirect Rate: 0%																							
Terms and Conditions: In accepting these grant funds, it is understood that: <ol style="list-style-type: none"> NCS has designated the Division of Public and Behavioral Health, Northern Nevada Adult Mental Health Services the "Manager" to provide professional services and assist NCS in administering and managing this grant. Expenditures must comply with any statutory guidelines, and Manager's policies as contemplated under Manager's Grant Instructions & Requirements and Manager's Administrative Manual to the extent NCS may reasonably apply such policies to this Grant. Expenditures must be consistent with the narrative, goals and objectives, and budget as approved and documented. Grantee must comply with all applicable Federal regulations. Quarterly progress reports are due by the 30th of each month following the end of the quarter, unless specific exceptions are provided in writing by the NCS, either directly or through its Manager. Financial Status Reports and Requests for Funds must be submitted monthly, unless specific exceptions are provided in writing by NCS, either directly or through its Manager. NCS shall have the right to assign its rights and obligations hereunder to the Nevada Department of Health and Human Services, Division of Public and Behavioral Health ("DPBH") under seven (7) days' written notice to Grantee. Upon NCS' assignment of this Grant to DPBH, NCS and Grantee agree that the amendments under Section G shall become effective immediately. 																							
Incorporated Documents: Section A: Grant Conditions and Assurances; Section B: Description of Services, Scope of Work and Deliverables; Section C: Budget and Financial Reporting Requirements; Section D: Request for Reimbursement;	Section E: Audit Information Request; Section F: NCS Business Associate Addendum; and Section G: Assignment.																						
Name / Title: <u>Amber Howell, Director</u> Washoe County Human Services Agency	<div style="text-align: center;">  Signature </div>																						
Name / Title: <u>Karla Perez, Secretary</u> Nevada Clinical Services, Inc.	<div style="text-align: center;">  Signature </div>																						

SECTION A

GRANT CONDITIONS AND ASSURANCES

General Conditions

1. Nothing contained in this Agreement is intended to, or shall be construed in any manner, as creating or establishing the relationship of employer/employee between the parties. Grantee shall at all times remain an "independent contractor" with respect to the services to be performed under this Agreement. NCS shall be exempt from payment of all Unemployment Compensation, FICA, retirement, life and/or medical insurance and Workers' Compensation Insurance as the Grantee is an independent entity.
2. Grantee shall hold harmless, defend and indemnify NCS from any and all claims, actions, suits, charges and judgments whatsoever that arise out of the Grantee's performance or nonperformance of the services or subject matter called for in this Agreement.
3. NCS or Grantee may amend this Agreement at any time provided that such amendments make specific reference to this Agreement, and are executed in writing, and signed by a duly authorized representative of both organizations. Such amendments shall not invalidate this Agreement, nor relieve or release NCS or Grantee from its obligations under this Agreement.
 - NCS may, in its discretion, amend this Agreement to conform with federal, state or local governmental guidelines, policies and available funding amounts, or for other reasons. If such amendments result in a change in the funding, the scope of services, or schedule of the activities to be undertaken as part of this Agreement, such modifications will be incorporated only by written amendment signed by both NCS and Grantee.
4. Either party may terminate this Agreement at any time by giving written notice to the other party of such termination and specifying the effective date thereof at least 30 days before the effective date of such termination. Partial terminations of the Scope of Work in Section B may only be undertaken with the prior approval of NCS. In the event of any termination for convenience, all finished or unfinished documents, data, studies, surveys, reports, or other materials prepared by the Grantee under this Agreement shall, at the option of NCS, become the property of NCS, and Grantee shall be entitled to receive just and equitable compensation for any satisfactory work completed on such documents or materials prior to the termination.
 - NCS may also suspend or terminate this Agreement, in whole or in part, if Grantee materially fails to comply with any term of this Agreement, or with any of the rules, regulations or provisions referred to herein; and NCS may declare Grantee ineligible for any further participation in NCS's grant agreements, in addition to other remedies as provided by law. In the event there is probable cause to believe Grantee is in noncompliance with any applicable rules or regulations, NCS may withhold funding.

Grant Assurances

The signature on the cover page of this packet indicates that Grantee is capable of and agrees to meet the following requirements, and that all information contained in this proposal is true and correct. Said signature is confirmation of the following:

1. Grantee will adopt and maintain a system of internal controls which results in the fiscal integrity and stability of the organization, including the use of Generally Accepted Accounting Principles (GAAP).
2. Grantee will act in compliance with applicable state insurance requirements for general, professional, and automobile liability; workers' compensation and employer's liability; and, if advance funds are required, commercial crime insurance.
3. Grantee will not use grant funds to supplant existing financial support for current programs.
4. Grantee will not subcontract any portion of these grant funds without prior written approval unless expressly identified in the grant agreement.
5. Grantee will act in compliance with the requirements of the Civil Rights Act of 1964, as amended, and the Rehabilitation Act of 1973, P.L. 93-112, as amended, and any relevant program-specific regulations, and shall not discriminate against any employee for employment because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions).
6. Grantee will act in compliance with the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted there under contained in 28 CFR 26.101-36.999 inclusive, and any relevant program-specific regulations.

7. It is the policy of NCS that each Grantee required under federal regulations, as set forth under Title 2 of the Code of Federal Regulations (CFR) and any guidance in effect from the Office of Management and Budget (OMB) related (both not limited to) audit requirements for Grantees that expect \$750,000 or more in Federal awards during the grantee's fiscal year, provide a copy of the final audit report to Manager, on behalf of NCS. **To acknowledge this requirement, Section E of this notice of Grant must be completed.**
8. Grantee will use no funding associated with this grant for lobbying.
9. Grantee will disclose any existing or potential conflicts of interest relative to the performance of services resulting from this grant award.
10. Grantee will not permit a work environment that allows the use of tobacco products, alcohol, and illegal drugs.

Grantee acknowledges compliance with this section by signing the Grant cover page of this packet.

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SECTION B

Description of Services, Scope of Work and Deliverables

Brief Description of program: This project was developed to create an intervention team to work with law enforcement professionals and operated at a local level. The Washoe County Mobile Outreach Safety Team (MOST) was created, and this scope of work represents the goals and objectives of this team. MOST provides crisis intervention and stabilization to those impacted individuals in Washoe County with a mental health condition, substance use disorder and/or who are in behavioral health crisis.

Individuals may have been in crisis and/or are require immediate intervention and evaluation by clinically trained professionals in collaboration with law enforcement. This program includes outreach, field crisis interventions and coordinates assessments, referrals and connection with local providers as indicated by assessment at the time of crisis intervention. While there are times when intervention and stabilization may occur at other facilities (such as a crisis call center), the goal of this team is to respond to the most significant and serious situations, generally with law enforcement, requiring a higher level of behavioral health expertise anywhere in the targeted community. Referrals and well checks are also included in services.

MOST clinicians are Mental Health Counselors IIs as described by Washoe County Job Classification 600006153, requiring "A master's degree from an accredited college or university in social work, marriage and family therapy, counseling, psychology or closely related field AND licensure in the State of Nevada to practice as a Licensed Clinical Social Worker, a Marriage and Family Therapist or a Clinical Professional Counselor". Team members are supervised currently by a Mental Health Counselor Supervisor (1), as described by Washoe County Job Classification 600006154, requiring " a master's degree from accredited college or university in social work, marriage and family therapy, counseling, psychology or closely related field AND licensure in the State of Nevada to practice as a Licensed Clinical Social Worker, a Marriage and Family Therapist or a Clinical Professional Counselor AND three years of full-time experience performing clinical case work". There is currently one Case Worker III, as described in Washoe County Job Classification 600006143, requiring "A bachelor's degree from an accredited college or university in social work, criminal justice, psychology, sociology, or a closely related field AND two years of professional level experience providing casework/ counseling or placement services, or working with individuals or families in a community-based, case management role; OR license to practice Social Work in the State of Nevada or eligibility for licensure in the State of Nevada AND two years of full-time experience performing professional social work. A master's degree in social work may substitute for one year of experience."

This scope of work does not prohibit the addition of mental health counselors or case workers to the team, should need be demonstrated and funds be made available. This scope may also be revised, with consultation and coordination between all parties.

MOST services offering community-based intervention to individuals in need wherever they are; including at home, work, or anywhere else in the community where the person is experiencing a mental health crisis. For safety and optimal engagement, teams should be put in place to support emergency department and justice system diversion. Emergency medical services (EMS) should be aware and partner with the MOST team as warranted.

Minimum Expectations to Operate a Mobile Crisis Team services must at a minimum:

1. Include a licensed and/or credentialed clinician capable to assessing the needs of individuals within the region of operation;
2. Respond where the person is (home, work, park, etc.); and
3. Connect individuals to facility-based care as needed through warm hand-offs and coordinating transportation when and only if situations warrant.

Problem Statement: In Washoe County, there exists a population that suffers with behavioral health issues which encompasses mental health and substance use disorder and substance abuse. This population is often involved with law enforcement and ultimately and inappropriately sent to jail, emergency rooms and/or mental health facilities. Law Enforcement, partnered with a team of clinicians can help to reduce repetitive calls from these individuals which include those with serious mental illness (SMI) and, mitigate unnecessary and inappropriate placement through intervention and referral/outreach activities.

#206454

Goal 1: To divert individuals experiencing behavioral health issues and other crises from unnecessary admissions into the criminal justice system, emergency rooms, and inpatient psychiatric facilities.			
Outcome Objective 1a: Increase the percentage of individuals who have received MOST intervention services in Washoe County that are diverted from unnecessary admissions into the criminal justice system, emergency rooms, and inpatient psychiatric facilities from 53 % in fiscal year 2021 to at least 75% by June 30, 2023.			
Activities including Evidence-based Programs		Date due by	Documentation
1. MOST mental health counselors will partner with law enforcement officers, in response to a call or referral in Washoe County. MOST mental health counselors may ride with at least one law enforcement officer for multiple shifts according to law enforcement schedules and protocol.		Monthly	Logs of ride-a-longs, Number of calls responded to and demographic and disposition data of each call.
2. MOST mental health counselors and/or MOST case manager(s) will attempt to make contact with individuals in response to law enforcement and community calls or referrals per agency and law enforcement policy and procedures in Washoe County.		Monthly	Number of individuals in which contact was made each month. List of individuals contacted to include at a minimum first name, last name, and date of birth when the information is available.
1. De-Escalation and Resolution: The MOST team will provide de-escalation and resolution services in response to calls or referrals as well as when participating with Crisis Intervention Negotiation Teams.		Monthly	Number and percent of individuals during each month who have been diverted from unnecessary admissions into the criminal justice system, emergency rooms, and psychiatric facilities.
2. MOST teams will refer contacted clients to local services such as VA, shelters, and other community resources as needed.			Call dispositions

3. MOST teams will transport clients as necessary out of the area of crisis or to local services.		Call dispositions
4. Field Assessment: A field assessment tool and implementation schedule will be created in collaboration with State staff and implemented when agreed upon.	12/31/2021	Developed assessment tool.
Outcome Objective 1b: By June 30, 2023, at least 80% percent of the individuals experiencing behavioral health crises, identified through law enforcement/dispatch/referrals will receive care coordination and outreach services.		
Activities including Evidence-based Programs		
1. The MOST will link individuals in crisis to all necessary medical and behavioral health services that can help resolve the situation and prevent future crises. These services may include crisis stabilization or acute inpatient hospitalization and treatment in the community (e.g., community mental health clinics, in-home therapy, family support services, crisis respite services, and therapeutic mentoring)	Monthly	Documented dispositions
2. Crisis Planning and Follow-Up MOST team will engage the individual in a crisis planning process, resulting in the creation or update of a range of planning tools including a safety plan.	Reviewed at least quarterly	Developed safety plans and other tools
3. MOST staff will offer outreach and referral services to individuals with behavioral health needs	Monthly	<ul style="list-style-type: none"> • Number of individuals who were referred to behavioral health programs and other community-based services and supports. • Number and percent of individuals with behavioral health needs who received outreach services/referrals.
<ul style="list-style-type: none"> • Evaluation: Using collected data in Avatar, compare the ending numbers and percentages with those reported on June 30, 2021. This goal will be monitor with quarterly reports in the interim. 		

Goal 2: To provide community outreach activities to inform potential partner referral agencies, behavioral health providers, and social service providers about MOST and to encourage collaboration between MOST and the partners.			
Outcome Objective 2a: By June 30, 2023 increase the number of agencies referring to MOST by at least 25% from a baseline to be collected between July 1, 2021 to June 30, 2022.			
Activities including Evidence-based Programs		Date due by	Documentation
1. The number of community agencies who make referrals to MOST will be collected between July 1, 2021 and June 30, 2022.		June 30, 2022	List of agencies who have made at least one referral within the fiscal year.
2. MOST will provide information and marketing materials at a minimum of three community events, facilitating more understanding of the MOST program by referral agencies, behavioral health providers and social service providers within Washoe County.		Yearly	<ul style="list-style-type: none"> • Date, title, location, and target audience of the community event • Information and marketing materials provided. • Number of follow up contacts with partners. • Media copy; agendas; promotional documents
3. MOST will provide information to at least 15 community partners. This could include participation in community town hall events.		Yearly	Presentation logs, meeting minutes when available, copy of distributed materials.
4. Utilize open beds in order to receive referrals.		By 12/31/21	Documented Open Bed referrals
Evaluation: The number of agencies making referrals to the MOST program will be tracked. The total number of agencies making referrals between July 1, 2022 and June 30, 2023 will be compared to the baseline collected in the previous fiscal year.			

Goal 3: To ensure MOST members receive relevant and appropriate training in order to effectively provide services for the target population.			
Outcome Objective 3a: By June 30, 2023, all of the MOST mental health counselors will receive training on evidence-based practices or best practices related to crisis intervention. Training topics may include any of the following: crisis intervention strategies and techniques; trauma-informed responses; motivational interviewing; de-escalation techniques; coping skills; psychotropic medications to treat mental health disorders; pharmacotherapeutic agents to treat substance use disorders; short-term interventions for individuals with mental health disorders; short-term interventions for individuals with substance-related disorders, and related clinical intervention techniques.			
Activities including Evidence-based Programs		Date due by	Documentation
1. MOST management and staff will research evidence-based practices and/or best practices in delivering crisis intervention services and find appropriate training opportunities.		Ongoing	List of evidence-based practices and trainings
2. MOST members will be trained by in-service or professional trainers. The trainings will be in-person or by webinar or other on-line sources and may be in-state or out-of-state.		Ongoing	<ul style="list-style-type: none"> • Total number and percentage of individuals trained will be tracked in the standardized database. • Training attendance logs/records
3. The MOST program will assist Law Enforcement in identifying current best practices for crisis intervention as requested by law enforcement agencies and/or as identified by MOST staff.		Ongoing	List of information shared with Law Enforcement
Evaluation: Quarterly Reports - AVATAR			
Evaluation Plan: By December 31, 2021, an evaluation plan will be developed in collaboration with state staff to meet the needs of both Washoe County and the State. The plan will detail standard data collection as applicable, how the listed goals and objectives will be measured, and how the goals and objectives in this scope of work will be integrated into the larger state-wide efforts to report on crisis intervention modalities and programs.			

AWARD SECTION C

Budget and Financial Reporting Requirements

Grantee agrees to adhere to the following budget:

Annual Budget Narrative for each:

Year 1 – July 1, 2021 through June 30, 2022, and

Year 2 – July 1, 2022 through June 30, 2023.

<u>Total Personnel Costs</u>		Including fringe			Total: \$ 814,840.00	
	<u>Annual Salary</u>	<u>Fringe Rate</u>	<u>% of Time</u>	<u>Months</u>	<u>Annual # of Months Worked</u>	<u>Amount Requested</u>
MOST 1	\$116,313.60	0.000%	0.000%	12	100.00%	\$116,313.60
	<u>Annual Salary</u>	<u>Fringe Rate</u>	<u>% of Time</u>	<u>Months</u>	<u>Annual # of Months Worked</u>	<u>Amount Requested</u>
MOST 2	\$153,816.00	0.000%	0.000%	12	100.00%	\$153,816.00
	<u>Annual Salary</u>	<u>Fringe Rate</u>	<u>% of Time</u>	<u>Months</u>	<u>Annual # of Months Worked</u>	<u>Amount Requested</u>
MOST 3	\$138,985.60	0.000%	0.000%	12	100.00%	\$138,985.60
	<u>Annual Salary</u>	<u>Fringe Rate</u>	<u>% of Time</u>	<u>Months</u>	<u>Annual # of Months Worked</u>	<u>Amount Requested</u>
MOST 4	\$116,792.00	0.000%	0.000%	12	100.00%	\$116,792.00
	<u>Annual Salary</u>	<u>Fringe Rate</u>	<u>% of Time</u>	<u>Months</u>	<u>Annual # of Months Worked</u>	<u>Amount Requested</u>
MOST 5	\$123,864.00	0.000%	0.000%	12	100.00%	\$123,864.00
	<u>Annual Salary</u>	<u>Fringe Rate</u>	<u>% of Time</u>	<u>Months</u>	<u>Annual # of Months Worked</u>	<u>Amount Requested</u>
MOST 6	\$82,534.40	0.000%	0.000%	12	100.00%	\$82,534.40
	<u>Annual Salary</u>	<u>Fringe Rate</u>	<u>% of Time</u>	<u>Months</u>	<u>Annual # of Months Worked</u>	<u>Amount Requested</u>
MOST 7	\$82,534.40	0.000%	0.000%	12	100.00%	\$82,534.40
Total Fringe Cost		\$0.00		Total Salary Cost:		\$814,840.00

Travel					Total: \$ 4,416
Out- of-State Travel					
For travel relevant to the MOST program not to exceed \$4,416.00 annually	<u>Cost</u>	<u># of Trips</u>	<u># of Days</u>	<u># of Staff</u>	<u>Total</u> \$4,416.00
Airfare: cost per trip (origin & destination) x # of trips x # of staff	\$0	0	0	0	\$0
Baggage fee: \$ amount per person x # of trips x # of staff	\$0	0	0	0	\$0
Per Diem: \$ per day per GSA rate for area x # of trips x # of staff	\$0	0	0	0	\$0
Lodging: \$ per day + \$ tax = total \$ x # of trips x # of nights x # of staff	\$0	0	0	0	\$0
Ground Transportation: \$ per r/trip x # of trips x # of staff	\$0	0	0	0	\$0
Mileage: (rate per mile x # of mile per r/trip) x # of trips x # of staff	\$0	0	0	0	\$0
Parking: \$ per day x # of trips x # of days x # of staff	\$0	0	0	0	\$0
Justification:					
Operating					Total: \$30,807.00
Communications, Rent, Office supplies not to exceed \$30,807.00 annually		\$30,807.00			\$30,807.00
Justification:					
Contractual/Contractual and all Pass-thru Subcontracts					Total: \$0.00
Training					Total: \$4,712.00
For training relevant to the MOST program not to exceed \$4,712 annually		\$4,712.00			\$4,712.00
Justification:					
Other					Total: \$0.00
TOTAL DIRECT CHARGES					Total: \$854,775.00
Indirect Charges			Indirect Rate:	Total:	\$0.00
TOTAL YEAR 1 BUDGET – July 1, 2021 – June 30, 2022					Total: \$854,775.00
TOTAL YEAR 2 BUDGET – July 1, 2022 – June 30, 2023					Total: \$854,775.00
TOTAL TWO-YEAR GRANT PERIOD BUDGET – July 1, 2021 – June 30, 2023					Total: \$1,709,550.00

The approved annual budget categories are annual not-to-exceed amounts. Accordingly, Grantee may not spend in excess of \$854,775.00 in Year 1 (July 1, 2021 – June 30, 2022) and may not spend in excess of \$854,775.00 in Year 2 (July 1, 2022 – June 30, 2023) such that the total not-to-exceed amount for the two-year Grant Period (July 1, 2021 – June 30, 2023) may not exceed \$1,709,550.00.

#206454

PROPOSED ANNUAL BUDGET SUMMARY

The approved annual budget categories are annual not-to-exceed amounts. Accordingly, Grantee may not spend in excess of \$854,775.00 in Year 1 (July 1, 2021 – June 30, 2022) and may not spend in excess of \$854,775.00 in Year 2 (July 1, 2022 – June 30, 2023) such that the total not-to-exceed amount for the two-year Grant Period (July 1, 2021 – June 30, 2023) may not exceed \$1,709,550.00.

A. PATTERN BOXES ARE FORMULA DRIVEN - DO NOT OVERRIDE - SEE INSTRUCTIONS

FUNDING SOURCES	NCS	Other Funding	Other Funding	Other Funding	Other Funding	Other Funding	Program Income	TOTAL
SECURED								
ENTER TOTAL REQUEST	\$854,775.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$854,775.00

EXPENSE CATEGORY

Personnel	\$814,840.00							\$814,840.00
Travel	\$4,416.00							\$4,416.00
Operating	\$30,807.00							\$30,807.00
Equipment	\$0							\$0
Contractual/Consultant	\$0							\$0
Training	\$4,712.00							\$4,712.00
Other Expenses	\$0							\$0
Indirect	\$0							\$0

TOTAL EXPENSE	\$854,775.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$854,775.00
These boxes should equal 0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Total Indirect Cost	\$0
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B. Explain any items noted as pending:

Total Annual Grant Budget	\$854,775.00
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C. Program Income Calculation:

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- NCS policy allows no more than 10% flexibility of the total not to exceed amount of the Grant, within the approved Scope of Work/Budget. Grantee will obtain written permission to redistribute funds within categories. **Note: the redistribution cannot alter the total not to exceed amount of the Grant. Modifications in excess of 10% require a formal amendment.**
- Equipment purchased with these funds belongs to NCS and shall be returned to NCS upon termination of this agreement.
- Travel expenses, per diem, and other related expenses must conform to the procedures and rates allowed by NCS. It is the Policy of the NCS to provide reimbursement at rates comparable to the rates established by the US General Services Administration, with some exceptions.

The Grantee Agrees:

To request reimbursement according to the schedule specified below for the actual expenses incurred related to the Scope of Work during the Grant Period.

- Reimbursement may be requested monthly for expenses incurred in the implementation of the Scope of Work, within 15 days of the end of the previous month and no later than 15 days from the end of the Grant Period which is (July 15, 2022 for Year 1, which ends June 30, 2022, and July 15, 2023 for Year 2, which ends June 30, 2023).
- This grant is to not exceed **\$1,709,550.00** during the Grant Period from **July 1, 2021 – June 30, 2023**:
- Requests for Reimbursement will be accompanied by supporting documentation, including a line item description of expenses incurred;
- Indicate what additional supporting documentation is needed in order to request reimbursement;
- Submit all invoices to NCS, either directly or through Manager, electronically; and
- Additional expenditure detail will be provided upon request from NCS.

Additionally, the Grantee agrees to provide:

- A complete financial accounting of all expenditures to NCS, either directly or through Manager, within 30 days of the CLOSE OF THE GRANT PERIOD. Any un-obligated funds shall be returned to NCS at that time, or if not already requested, shall be deducted from the final reimbursement.
- Any work performed during the GRANT PERIOD will not be reimbursed.
- If a Request for Reimbursement (RFR) is received after the 45-day closing period, NCS may not be able to provide reimbursement.
- If a credit is owed to NCS after the 45-day closing period, the funds must be returned to NCS within 30 days of identification.

NCS agrees:

- To provide technical assistance upon request from the Grantee;
- To provide prior approval of reports or documents to be developed;
- To forward relevant reports upon request;
- NCS reserves the right to hold reimbursement under this Grant until any delinquent forms, reports, and expenditure documentation are submitted to NCS, through Manager, and accepted by NCS.

Both parties agree:

- A site visit/monitoring schedule is not necessary;
- The Grantee will, in the performance of the Scope of Work specified in this Grant, perform functions and/or activities that could involve confidential information; therefore, the Grantee is requested to fill out and sign Section F which is specific to this Grant, and will be in effect for the term of this Grant.
- All reports of expenditures and requests for reimbursement processed by NCS are SUBJECT TO AUDIT.
- This Grant Agreement may be TERMINATED by either party prior to the date set forth on the Grant Agreement and Notice of Grant Award, provided the termination shall not be effective until 30 days after a party has served written notice upon the other party. This Agreement may be terminated by mutual consent of both parties or unilaterally by either party without cause.

Financial Reporting Requirements

- A Request for Reimbursement is due on a monthly basis, based on the terms of the Grant Agreement, no later than the 15th of the month.
- Reimbursement is based on actual expenditures incurred during the period being reported.
- Payment will not be processed without all reporting being current.
- Reimbursement may only be claimed for expenditures approved within the Grant Agreement.

#206454

SECTION D

Request for Reimbursement

Program Name: Mobile Outreach Safety Team	Grantee: Washoe County Human Services Agency ("Grantee") Amber Howell /ahowell@washoecounty.us
	Address: 350 South Center Street Reno, NV 89501
Grant Period: Year 1 - July 1, 2021 through June 30, 2022 Year 2 - July 1, 2022 through June 30, 2023	Grantee: EIN: 88-6000138 NCS Contract #: 206454 Dun & Bradstreet: 07-378-6898

Financial Report and Request for Reimbursement

(must be accompanied by expenditure report/back-up)

Approved Budget Category	Month(s)		C Current Requests	Calendar Year		F Percent Expended
	A Approved Annual Budget	B Total Prior Requests		D Year to Date Total	E Budget Balance	
1. Personnel	\$814,840.00	\$0.00	\$0.00	\$0.00	\$814,840.00	0.0%
2. Travel	\$4,416.00	\$0.00	\$0.00	\$0.00	\$4,416.00	0.0%
3. Operating	\$30,807.00	\$0.00	\$0.00	\$0.00	\$30,807.00	0.0%
4. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-
5. Contractual/ Consultant	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-
6. Training	\$4,712.00	\$0.00	\$0.00	\$0.00	\$4,712.00	0.0%
7. Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-
8. Indirect	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-
Total	\$854,775.00	\$0.00	\$0.00	\$0.00	\$854,775.00	0.0%

I, a duly authorized signatory for the Grantee, certify to the best of my knowledge and belief that this report is true, complete and accurate; that the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Grant Agreement; and that the amount of this request is not in excess of current needs or, cumulatively for the Grant Period, in excess of the total approved budget. I am aware that any false, fictitious or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims, or otherwise. I verify that the cost allocation and backup documentation attached is correct.

Grantee Authorized Signature	Title	Date
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The approved annual budget categories are annual not-to-exceed amounts. Accordingly, Grantee may not spend in excess of \$854,775.00 in Year 1 (July 1, 2021 – June 30, 2022) and may not spend in excess of \$854,775.00 in Year 2 (July 1, 2022 – June 30, 2023) such that the total not-to-exceed amount for the two-year Grant Period (July 1, 2021 – June 30, 2023) may not exceed \$1,709,550.00.

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SECTION E

Audit Information Request

1. It is the policy of NCS that each grantee required under federal regulations, as specified by the Office of Management and Budget (2 C.F.R. § 200.501(a)), revised December 26, 2013, to have an audit prepared by an Independent auditor must provide a copy of the final audit report to NCS, through Manager, upon request.

2. Was your organization required by federal regulations as referenced in Paragraph (1) above to have an audit prepared by an Independent auditor for your organization's most recent fiscal year?

YES ☒ NO ☐

3. When does your organization's fiscal year end?

June 30

4. What is the official name of your organization?

Washoe County Human Services Agency

5. How often is your organization audited?

Annually

6. When was your last audit performed?

December 2020

7. What time-period did your last audit cover?

July 1, 2019 - June 30, 2020

8. Which accounting firm conducted your last audit?

Eide Bailly CPAs

Compliance with this section is acknowledged by signing the Grant cover page of this packet.

#206454

SECTION F

Business Associate Addendum

BETWEEN

Nevada Clinical Services, Inc.

Hereinafter referred to as the "Covered Entity"

and

Washoe County Human Services Agency

Hereinafter referred to as the "Business Associate"

PURPOSE. In order to comply with the requirements of HIPAA and the HITECH Act, this Addendum is hereby added and made part of the agreement between the Covered Entity and the Business Associate. This Addendum establishes the obligations of the Business Associate and the Covered Entity as well as the permitted uses and disclosures by the Business Associate of protected health information it may possess by reason of the agreement. The Covered Entity and the Business Associate shall protect the privacy and provide for the security of protected health information disclosed to the Business Associate pursuant to the agreement and in compliance with the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 ("HIPAA"), the Health Information Technology for Economic and Clinical Health Act, Public Law 111-5 ("the HITECH Act"), and regulation promulgated there under by the U.S. Department of Health and Human Services (the "HIPAA Regulations") and other applicable laws.

WHEREAS, the Business Associate will provide certain services to the Covered Entity, and, pursuant to such arrangement, the Business Associate is considered a business associate of the Covered Entity as defined in HIPAA, the HITECH Act, the Privacy Rule and Security Rule; and

WHEREAS, Business Associate may have access to and/or receive from the Covered Entity certain protected health information, in fulfilling its responsibilities under such arrangement; and

WHEREAS, the HIPAA Regulations, the HITECH Act, the Privacy Rule and the Security Rule require the Covered Entity to enter into an agreement containing specific requirements of the Business Associate prior to the disclosure of protected health information, as set forth in, but not limited to, 45 CFR Parts 160 & 164 and Public Law 111-5.

THEREFORE, in consideration of the mutual obligations below and the exchange of information pursuant to this Addendum, and to protect the interests of both Parties, the Parties agree to all provisions of this Addendum.

1. DEFINITIONS. The following terms shall have the meaning ascribed to them in this Section. Other capitalized terms shall have the meaning ascribed to them in the context in which they first appear.

1. **Breach** means the unauthorized acquisition, access, use, or disclosure of protected health information which compromises the security or privacy of the protected health information. The full definition of breach can be found in 42 USC 17921 and 45 CFR 164.402.
2. **Business Associate** shall mean the name of the organization or entity listed above and shall have the meaning given to the term under the Privacy and Security Rule and the HITECH Act. For full definition refer to 45 CFR 160.103.
3. **CFR** stands for the Code of Federal Regulations.
4. **Agreement** shall refer to this Addendum and that particular agreement to which this Addendum is made a part.
5. **Covered Entity** shall mean the name of the Department listed above and shall have the meaning given to such term under the Privacy Rule and the Security Rule, including, but not limited to 45 CFR 160.103.
6. **Designated Record Set** means a group of records that includes protected health information and is maintained by or for a covered entity or the Business Associate that includes, but is not limited to, medical, billing, enrollment, payment, claims adjudication, and case or medical management records. Refer to 45 CFR 164.501 for the complete definition.
7. **Disclosure** means the release, transfer, provision of, access to, or divulging in any other manner of information outside the entity holding the information as defined in 45 CFR 160.103.
8. **Electronic Protected Health Information** means individually identifiable health information transmitted by electronic media or maintained in electronic media as set forth under 45 CFR 160.103.
9. **Electronic Health Record** means an electronic record of health-related information on an individual that is created, gathered, managed, and consulted by authorized health care clinicians and staff. Refer to 42 USC 17921.
10. **Health Care Operations** shall have the meaning given to the term under the Privacy Rule at 45 CFR 164.501.
11. **Individual** means the person who is the subject of protected health information and is defined in 45 CFR 160.103.
12. **Individually Identifiable Health Information** means health information, in any form or medium, including demographic information collected from an individual, that is created or received by a covered entity or a business associate of the covered entity and relates to the past, present, or future care of the individual. Individually identifiable

health information is information that identifies the individual directly or there is a reasonable basis to believe the information can be used to identify the individual. Refer to 45 CFR 160.103.

13. **Parties** shall mean the Business Associate and the Covered Entity.
14. **Privacy Rule** shall mean the HIPAA Regulation that is codified at 45 CFR Parts 160 and 164, Subparts A, D and E.
15. **Protected Health Information** means individually identifiable health information transmitted by electronic media, maintained in electronic media, or transmitted or maintained in any other form or medium. Refer to 45 CFR 160.103 for the complete definition.
16. **Required by Law** means a mandate contained in law that compels an entity to make a use or disclosure of protected health information and that is enforceable in a court of law. This includes but is not limited to: court orders and court-ordered warrants; subpoenas, or summons issued by a court; and statutes or regulations that require the provision of information if payment is sought under a government program providing public benefits. For the complete definition refer to 45 CFR 164.103.
17. **Secretary** shall mean the Secretary of the federal Department of Health and Human Services (HHS) or the Secretary's designee.
18. **Security Rule** shall mean the HIPAA regulation that is codified at 45 CFR Parts 160 and 164 Subparts A and C.
19. **Unsecured Protected Health Information** means protected health information that is not rendered unusable, unreadable, or indecipherable to unauthorized individuals through the use of a technology or methodology specified by the Secretary in the guidance issued in Public Law 111-5. Refer to 42 USC 17932 and 45 CFR 164.402.
20. **USC** stands for the United States Code.

II. OBLIGATIONS OF THE BUSINESS ASSOCIATE.

1. **Access to Protected Health Information.** The Business Associate will provide, as directed by the Covered Entity, an individual or the Covered Entity access to inspect or obtain a copy of protected health information about the Individual that is maintained in a designated record set by the Business Associate or, its agents or subcontractors, in order to meet the requirements of the Privacy Rule, including, but not limited to 45 CFR 164.524 and 164.504(e) (2) (ii) (E). If the Business Associate maintains an electronic health record, the Business Associate or, its agents or subcontractors shall provide such information in electronic format to enable the Covered Entity to fulfill its obligations under the HITECH Act, including, but not limited to 42 USC 17935.
2. **Access to Records.** The Business Associate shall make its internal practices, books and records relating to the use and disclosure of protected health information available to the Covered Entity and to the Secretary for purposes of determining Business Associate's compliance with the Privacy and Security Rule in accordance with 45 CFR 164.504(e)(2)(ii)(H).
3. **Accounting of Disclosures.** Promptly, upon request by the Covered Entity or individual for an accounting of disclosures, the Business Associate and its agents or subcontractors shall make available to the Covered Entity or the individual information required to provide an accounting of disclosures in accordance with 45 CFR 164.528, and the HITECH Act, including, but not limited to 42 USC 17935. The accounting of disclosures, whether electronic or other media, must include the requirements as outlined under 45 CFR 164.528(b).
4. **Agents and Subcontractors.** The Business Associate must ensure all agents and subcontractors to whom it provides protected health information agree in writing to the same restrictions and conditions that apply to the Business Associate with respect to all protected health information accessed, maintained, created, retained, modified, recorded, stored, destroyed, or otherwise held, transmitted, used or disclosed by the agent or subcontractor. The Business Associate must implement and maintain sanctions against agents and subcontractors that violate such restrictions and conditions and shall mitigate the effects of any such violation as outlined under 45 CFR 164.530(f) and 164.530(e)(1).
5. **Amendment of Protected Health Information.** The Business Associate will make available protected health information for amendment and incorporate any amendments in the designated record set maintained by the Business Associate or, its agents or subcontractors, as directed by the Covered Entity or an individual, in order to meet the requirements of the Privacy Rule, including, but not limited to, 45 CFR 164.528.
6. **Audits, Investigations, and Enforcement.** The Business Associate must notify the Covered Entity immediately upon learning the Business Associate has become the subject of an audit, compliance review, or complaint investigation by the Office of Civil Rights or any other federal or state oversight agency. The Business Associate shall provide the Covered Entity with a copy of any protected health information that the Business Associate provides to the Secretary or other federal or state oversight agency concurrently with providing such information to the Secretary or other federal or state oversight agency. The Business Associate and individuals associated with the Business Associate are solely responsible for all civil and criminal penalties assessed as a result of an audit, breach, or violation of HIPAA or HITECH laws or regulations. Reference 42 USC 17937.
7. **Breach or Other Improper Access, Use or Disclosure Reporting.** The Business Associate must report to the Covered Entity, in writing, any access, use or disclosure of protected health information not permitted by the agreement, Addendum or the Privacy and Security Rules. The Covered Entity must be notified immediately upon discovery or the first day such breach or suspected breach is known to the Business Associate or by exercising reasonable diligence would have been known by the Business Associate in accordance with 45 CFR 164.410, 164.504(e)(2)(ii)(C) and 164.308(b) and 42 USC 17921. The Business Associate must report any improper access, use or disclosure of protected health information by: The Business Associate or its agents or subcontractors. In the event of a breach or suspected breach of protected health information, the report to the Covered Entity must be in writing and include the following: a brief description of the incident; the date of the incident; the date the incident was discovered by the Business Associate; a thorough description of the unsecured protected health information that was involved in the incident; the number of individuals whose protected health information was involved in the incident; and the steps the Business Associate is taking to investigate the incident and to protect against further incidents. The Covered Entity will determine if a breach of unsecured protected health information has occurred and will notify the Business Associate of the determination. If a breach of unsecured protected health information is determined, the

Business Associate must take prompt corrective action to cure any such deficiencies and mitigate any significant harm that may have occurred to individual(s) whose information was disclosed inappropriately.

8. **Breach Notification Requirements.** If the Covered Entity determines a breach of unsecured protected health information by the Business Associate has occurred, the Business Associate will be responsible for notifying the individuals whose unsecured protected health information was breached in accordance with 42 USC 17932 and 45 CFR 164.404 through 164.406. The Business Associate must provide evidence to the Covered Entity that appropriate notifications to individuals and/or media, when necessary, as specified in 45 CFR 164.404 and 45 CFR 164.406 has occurred. The Business Associate is responsible for all costs associated with notification to individuals, the media or others as well as costs associated with mitigating future breaches. The Business Associate must notify the Secretary of all breaches in accordance with 45 CFR 164.408 and must provide the Covered Entity with a copy of all notifications made to the Secretary.
9. **Breach Pattern or Practice by Covered Entity.** Pursuant to 42 USC 17934, if the Business Associate knows of a pattern of activity or practice of the Covered Entity that constitutes a material breach or violation of the Covered Entity's obligations under the Contract or Addendum, the Business Associate must immediately report the problem to the Secretary.
10. **Data Ownership.** The Business Associate acknowledges that the Business Associate or its agents or subcontractors have no ownership rights with respect to the protected health information it accesses, maintains, creates, retains, modifies, records, stores, destroys, or otherwise holds, transmits, uses or discloses.
11. **Litigation or Administrative Proceedings.** The Business Associate shall make itself, any subcontractors, employees, or agents assisting the Business Associate in the performance of its obligations under the agreement or Addendum, available to the Covered Entity, at no cost to the Covered Entity, to testify as witnesses, or otherwise, in the event litigation or administrative proceedings are commenced against the Covered Entity, its administrators or workforce members upon a claimed violation of HIPAA, the Privacy and Security Rule, the HITECH Act, or other laws relating to security and privacy.
12. **Minimum Necessary.** The Business Associate and its agents and subcontractors shall request, use and disclose only the minimum amount of protected health information necessary to accomplish the purpose of the request, use or disclosure in accordance with 42 USC 17935 and 45 CFR 164.514(d)(3).
13. **Policies and Procedures.** The Business Associate must adopt written privacy and security policies and procedures and documentation standards to meet the requirements of HIPAA and the HITECH Act as described in 45 CFR 164.316 and 42 USC 17931.
14. **Privacy and Security Officer(s).** The Business Associate must appoint Privacy and Security Officer(s) whose responsibilities shall include: monitoring the Privacy and Security compliance of the Business Associate; development and implementation of the Business Associate's HIPAA Privacy and Security policies and procedures; establishment of Privacy and Security training programs; and development and implementation of an incident risk assessment and response plan in the event the Business Associate sustains a breach or suspected breach of protected health information.
15. **Safeguards.** The Business Associate must implement safeguards as necessary to protect the confidentiality, integrity, and availability of the protected health information the Business Associate accesses, maintains, creates, retains, modifies, records, stores, destroys, or otherwise holds, transmits, uses or discloses on behalf of the Covered Entity. Safeguards must include administrative safeguards (e.g., risk analysis and designation of security official), physical safeguards (e.g., facility access controls and workstation security), and technical safeguards (e.g., access controls and audit controls) to the confidentiality, integrity and availability of the protected health information, in accordance with 45 CFR 164.308, 164.310, 164.312, 164.316 and 164.504(e)(2)(ii)(B). Sections 164.308, 164.310 and 164.312 of the CFR apply to the Business Associate of the Covered Entity in the same manner that such sections apply to the Covered Entity. Technical safeguards must meet the standards set forth by the guidelines of the National Institute of Standards and Technology (NIST). The Business Associate agrees to only use or disclose protected health information as provided for by the agreement and Addendum and to mitigate, to the extent practicable, any harmful effect that is known to the Business Associate, of a use or disclosure, in violation of the requirements of this Addendum as outlined under 45 CFR 164.530(e)(2)(f).
16. **Training.** The Business Associate must train all members of its workforce on the policies and procedures associated with safeguarding protected health information. This includes, at a minimum, training that covers the technical, physical and administrative safeguards needed to prevent inappropriate uses or disclosures of protected health information; training to prevent any intentional or unintentional use or disclosure that is a violation of HIPAA regulations at 45 CFR 160 and 164 and Public Law 111-5; and training that emphasizes the criminal and civil penalties related to HIPAA breaches or inappropriate uses or disclosures of protected health information. Workforce training of new employees must be completed within 30 days of the date of hire and all employees must be trained at least annually. The Business Associate must maintain written records for a period of six years. These records must document each employee that received training and the date the training was provided or received.
17. **Use and Disclosure of Protected Health Information.** The Business Associate must not use or further disclose protected health information other than as permitted or required by the agreement or as required by law. The Business Associate must not use or further disclose protected health information in a manner that would violate the requirements of the HIPAA Privacy and Security Rule and the HITECH Act.

III. **PERMITTED AND PROHIBITED USES AND DISCLOSURES BY THE BUSINESS ASSOCIATE.** The Business Associate agrees to these general use and disclosure provisions:

1. **Permitted Uses and Disclosures:**
 - a. Except as otherwise limited in this Addendum, the Business Associate may use or disclose protected health information to perform functions, activities, or services for, or on behalf of, the Covered Entity as specified in the agreement, provided that such use or disclosure would not violate the HIPAA Privacy and Security Rule or the

HITECH Act, if done by the Covered Entity in accordance with 45 CFR 164.504(e) (2) (i) and 42 USC 17935 and 17936.

- b. Except as otherwise limited by this Addendum, the Business Associate may use or disclose protected health information received by the Business Associate in its capacity as a Business Associate of the Covered Entity, as necessary, for the proper management and administration of the Business Associate, to carry out the legal responsibilities of the Business Associate, as required by law or for data aggregation purposes in accordance with 45 CFR 164.504(e)(2)(A), 164.504(e)(4)(i)(A), and 164.504(e)(2)(i)(B).
- c. Except as otherwise limited in this Addendum, if the Business Associate discloses protected health information to a third party, the Business Associate must obtain, prior to making any such disclosure, reasonable written assurances from the third party that such protected health information will be held confidential pursuant to this Addendum and only disclosed as required by law or for the purposes for which it was disclosed to the third party. The written agreement from the third party must include requirements to immediately notify the Business Associate of any breaches of confidentiality of protected health information to the extent it has obtained knowledge of such breach. Refer to 45 CFR 164.502 and 164.504 and 42 USC 17934.
- d. The Business Associate may use or disclose protected health information to report violations of law to appropriate federal and state authorities, consistent with 45 CFR 164.502(j)(1).

2. Prohibited Uses and Disclosures:

- a. Except as otherwise limited in this Addendum, the Business Associate shall not disclose protected health information to a health plan for payment or health care operations purposes if the patient has required this special restriction and has paid out of pocket in full for the health care item or service to which the protected health information relates in accordance with 42 USC 17935.
- b. The Business Associate shall not directly or indirectly receive remuneration in exchange for any protected health information, as specified by 42 USC 17935, unless the Covered Entity obtained a valid authorization, in accordance with 45 CFR 164.508 that includes a specification that protected health information can be exchanged for remuneration.

IV. OBLIGATIONS OF COVERED ENTITY

1. The Covered Entity will inform the Business Associate of any limitations in the Covered Entity's Notice of Privacy Practices in accordance with 45 CFR 164.520, to the extent that such limitation may affect the Business Associate's use or disclosure of protected health information.
2. The Covered Entity will inform the Business Associate of any changes in, or revocation of, permission by an individual to use or disclose protected health information, to the extent that such changes may affect the Business Associate's use or disclosure of protected health information.
3. The Covered Entity will inform the Business Associate of any restriction to the use or disclosure of protected health information that the Covered Entity has agreed to in accordance with 45 CFR 164.522 and 42 USC 17935, to the extent that such restriction may affect the Business Associate's use or disclosure of protected health information.
4. Except in the event of lawful data aggregation or management and administrative activities, the Covered Entity shall not request the Business Associate to use or disclose protected health information in any manner that would not be permissible under the HIPAA Privacy and Security Rule and the HITECH Act, if done by the Covered Entity.

V. TERM AND TERMINATION

1. Effect of Termination:

- a. Except as provided in paragraph (b) of this section, upon termination of this Addendum, for any reason, the Business Associate will return or destroy all protected health information received from the Covered Entity or created, maintained, or received by the Business Associate on behalf of the Covered Entity that the Business Associate still maintains in any form and the Business Associate will retain no copies of such information.
- b. If the Business Associate determines that returning or destroying the protected health information is not feasible, the Business Associate will provide to the Covered Entity notification of the conditions that make return or destruction infeasible. Upon a mutual determination that return, or destruction of protected health information is infeasible, the Business Associate shall extend the protections of this Addendum to such protected health information and limit further uses and disclosures of such protected health information to those purposes that make return or destruction infeasible, for so long as the Business Associate maintains such protected health information.
- c. These termination provisions will apply to protected health information that is in the possession of subcontractors, agents, or employees of the Business Associate.
2. **Term.** The Term of this Addendum shall commence as of the effective date of this Addendum herein and shall extend beyond the termination of the contract and shall terminate when all the protected health information provided by the Covered Entity to the Business Associate, or accessed, maintained, created, retained, modified, recorded, stored, or otherwise held, transmitted, used or disclosed by the Business Associate on behalf of the Covered Entity, is destroyed or returned to the Covered Entity, or, if it not feasible to return or destroy the protected health information, protections are extended to such information, in accordance with the termination.
3. **Termination for Breach of Agreement.** The Business Associate agrees that the Covered Entity may immediately terminate the agreement if the Covered Entity determines that the Business Associate has violated a material part of this Addendum.

VI. MISCELLANEOUS

1. **Amendment.** The parties agree to take such action as is necessary to amend this Addendum from time to time for the Covered Entity to comply with all the requirements of the Health Insurance Portability and Accountability Act (HIPAA) of 1996, Public Law No. 104-191 and the Health Information Technology for Economic and Clinical Health Act (HITECH) of 2009, Public Law No. 111-5.
2. **Clarification.** This Addendum references the requirements of HIPAA, the HITECH Act, the Privacy Rule and the Security Rule, as well as amendments and/or provisions that are currently in place and any that may be forthcoming.
3. **Indemnification.** Each party will indemnify and hold harmless the other party to this Addendum from and against all claims, losses, liabilities, costs and other expenses incurred as a result of, or arising directly or indirectly out of or in conjunction with:
 - a. Any misrepresentation, breach of warranty or non-fulfillment of any undertaking on the part of the party under this Addendum; and
 - b. Any claims, demands, awards, judgments, actions, and proceedings made by any person or organization arising out of or in any way connected with the party's performance under this Addendum.
4. **Interpretation.** The provisions of the Addendum shall prevail over any provisions in the agreement that may conflict or appear inconsistent with any provision in this Addendum. This Addendum and the agreement shall be interpreted as broadly as necessary to implement and comply with HIPAA, the HITECH Act, the Privacy Rule and the Security Rule. The parties agree that any ambiguity in this Addendum shall be resolved to permit the Covered Entity and the Business Associate to comply with HIPAA, the HITECH Act, the Privacy Rule and the Security Rule.
5. **Regulatory Reference.** A reference in this Addendum to a section of the HITECH Act, HIPAA, the Privacy Rule and Security Rule means the sections as in effect or as amended.
6. **Survival.** The respective rights and obligations of Business Associate under Effect of Termination of this Addendum shall survive the termination of this Addendum.

Compliance with this section is acknowledged by signing the Grant cover page of this packet.

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SECTION G

Assignment

Per Item #7 in the "Terms and Conditions" section on the first page of this Agreement, in the event NCS assigns the agreement to DPBH, the parties agree the amendments reflected in this Section G shall become effective concurrent with the assignment:

- A. All references to "grant(s)" shall be understood to mean "sub-grant(s)" or "sub-award(s)", as applicable, and all references to "grantee(s)" shall be understood to mean "sub-grantee(s)", "sub-recipient(s)", or "applicant(s)", as applicable.
- B. The following shall be added as Item #8 in the "Terms and Conditions" section on the first page of this Agreement:
 - 8. This award is subject to the availability of appropriate funds.
- C. Section H – Current/Former State Employee Disclaimer, appended hereto, shall become effective and incorporated into the Grant Agreement.
- D. The following shall be added as Items #11 thru #14 under "Grant Assurances" in Section A – Grant Conditions and Assurances:
 - 11. Grantee will act in compliance with the Clean Air Act (42 U.S.C. 7401–7671q.) and the Federal Water Pollution Control Act (33 U.S.C. 1251–1387), as amended—Contracts and sub-grants of amounts in excess of \$150,000 must contain a provision that requires the non-Federal award to agree to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act (42 U.S.C. 7401–7671q) and the Federal Water Pollution Control Act as amended (33 U.S.C. 1251–1387). Violations must be reported to the Federal awarding agency and the Regional Office of the Environmental Protection Agency (EPA).
 - 12. Grantee will provide certification that neither the Grantee nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in this transaction by any Federal department or agency. This certification is made pursuant to regulations implementing Executive Order 12549, Debarment and Suspension, 28 C.F.R. pt. 67 § 67.510, as published as pt. VII of May 26, 1988, Federal Register (pp. 19150-19211).
 - 13. Grantee, as an organization receiving grant funds through the Nevada Department of Health and Human Services shall not use grant funds for any activity related to the following:
 - Any attempt to influence the outcome of any federal, state or local election, referendum, initiative or similar procedure, through in-kind or cash contributions, endorsements, publicity or a similar activity.
 - Establishing, administering, contributing to or paying the expenses of a political party, campaign, political action committee or other organization established for the purpose of influencing the outcome of an election, referendum, initiative or similar procedure.
 - Any attempt to influence:
 - The introduction or formulation of federal, state or local legislation; or
 - The enactment or modification of any pending federal, state or local legislation, through communication with any member or employee of Congress, the Nevada Legislature or a local governmental entity responsible for enacting local legislation, including, without limitation, efforts to influence State or local officials to engage in a similar lobbying activity, or through communication with any governmental official or employee in connection with a decision to sign or veto enrolled legislation.
 - Any attempt to influence the introduction, formulation, modification or enactment of a federal, state or local rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity through communication with any officer or employee of the United States Government, the State of Nevada or a local governmental entity, including, without limitation, efforts to influence state or local officials to engage in a similar lobbying activity.
 - Any attempt to influence:
 - The introduction or formulation of federal, state or local legislation;
 - The enactment or modification of any pending federal, state or local legislation; or
 - The introduction, formulation, modification or enactment of a federal, state or local rule, regulation, executive order or any other program, policy or position of the United States Government, the

State of Nevada or a local governmental entity, by preparing, distributing or using publicly or propaganda, or by urging members of the general public or any segment thereof to contribute to or participate in any mass demonstration, march, rally, fundraising drive, lobbying campaign or letter writing or telephone campaign.

- Legislative liaison activities, including, without limitation, attendance at legislative sessions or committee hearings, gathering information regarding legislation and analyzing the effect of legislation, when such activities are carried on in support of or in knowing preparation for an effort to engage in an activity prohibited pursuant to subsections 1 to 5, inclusive.
 - Executive branch liaison activities, including, without limitation, attendance at hearings, gathering information regarding a rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity and analyzing the effect of the rule, regulation, executive order, program, policy or position, when such activities are carried on in support of or in knowing preparation for an effort to engage in an activity prohibited pursuant to subsections 1 to 5, inclusive.
14. An organization receiving grant funds through the Nevada Department of Health and Human Services may, to the extent and in the manner authorized in its grant, use grant funds for any activity directly related to educating persons in a nonpartisan manner by providing factual information in a manner that is:
- Made in a speech, article, publication, or other material that is distributed and made available to the public, or through radio, television, cable television or other medium of mass communication; and
 - Not specifically directed at:
 - Any member or employee of Congress, the Nevada Legislature or a local governmental entity responsible for enacting local legislation;
 - Any governmental official or employee who is or could be involved in a decision to sign or veto enrolled legislation; or
 - Any officer or employee of the United States Government, the State of Nevada or a local governmental entity who is involved in introducing, formulating, modifying or enacting a Federal, State or local rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity.

This provision does not prohibit a Grantee from providing information that is directly related to the grant to the granting agency.

To comply with reporting requirements of the Federal Funding and Accountability Transparency Act (FFATA), the sub-grantee agrees to provide the Department with copies of all contracts, sub-grants, and or amendments to either such documents, which are funded by funds allotted in this agreement.

E. The following shall be added to Section C – Budget and Financial Reporting Requirements under the subsection beginning "Both parties agree" as the fourth bullet:

- The parties expressly agree that this Agreement shall be terminated immediately if for any reason the Department, state, and/or federal funding ability to satisfy this Agreement is withdrawn, limited, or impaired.

SECTION H – Effective Only Upon Assignment

Notification of Utilization of Current or Former State Employee

For the purpose of State compliance with NRS 333.705, sub-recipient represents and warrants that if sub-recipient, or any employee of sub-recipient who will be performing services under this sub-award, is a current employee of the State or was employed by the State within the preceding 24 months, sub-recipient has disclosed the identity of such persons, and the services that each such person will perform, to the issuing Agency. Sub-recipient agrees they will not utilize any of its employees who are Current State Employees or Former State Employees to perform services under this sub-award without first notifying the Agency and receiving from the Agency approval for the use of such persons. This prohibition applies equally to any subcontractors that may be used to perform the requirements of the sub-award. The provisions of this section do not apply to the employment of a former employee of an agency of this State who is not receiving retirement benefits under the Public Employees' Retirement System (PERS) during the duration of the sub-award.

Are any current or former employees of the State of Nevada assigned to perform work on this sub-award?

YES ☐ If "YES", list the names of any current or former employees of the State and the services that each person will perform.

NO ☒ Sub-recipient agrees that if a current or former state employee is assigned to perform work on this sub-award at any point after execution of this agreement, they must receive prior approval from the Department.

Name

Services

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Sub-recipient agrees that any employees listed cannot perform work until approval has been given from the Department.

Compliance with this section is acknowledged by signing the sub-award cover page of this packet.

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