AGREEMENT BETWEEN BROWARD COUNTY AND NORTH BROWARD HOSPITAL DISTRICT D/B/A BROWARD HEALTH FOR PRIMARY CARE SERVICES

Agreement Number: 24-CP-HCS-0125-01

This agreement ("Agreement") for primary care services is made and entered by and between Broward County, a political subdivision of the State of Florida ("County"), and North Broward Hospital District d/b/a Broward Health, a special taxing district of the State of Florida ("Broward Health"), each a "Party" and collectively referred to as the "Parties."

RECITALS

- A. The Florida Legislature ("Legislature") has mandated the provision of primary care services throughout the state via a system of coordinated county health department services, which will be supported by available federal, state, and local funds.
- B. The Legislature has directed the Florida Department of Health ("DOH"), to the extent that funds are appropriated, to develop a plan to implement a primary care program in cooperation with each county.
- C. The Legislature has also directed DOH to contract with counties to expand primary care coverage as additional resources are appropriated and has directed DOH to establish priorities for funding based on the need and willingness of counties to participate.
- D. The Legislature permits County to organize primary care programs through the county health department and contracts with individuals or group practitioners for all or part of the primary care services.
- E. Broward Health provides a variety of primary care services at outpatient and ambulatory sites in Broward County.
- F. This Agreement enables County to continue to fund primary care services that would not otherwise be funded by any other public or private funding source.

Now, therefore, for good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the Parties agree as follows:

ARTICLE 1. DEFINITIONS

- 1.1 **Applicable Law** means all applicable laws, codes, advisory circulars, rules, regulations, or ordinances of any federal, state, county, municipal, or other governmental entity, as may be amended.
- **Board** means the Board of County Commissioners of Broward County, Florida.

- 1.3 **Clients** means residents of northern Broward County (north of Southwest 36th Street) with low to moderate income who need primary care services, as further described in the Scope of Services.
- 1.4 **Code** means the Broward County Code of Ordinances.
- 1.5 **Contract Administrator** means the Director or Deputy Director of the Broward County Human Services Department, or the Director of the Community Partnerships Division.
- 1.6 **Diagnostics** means electrocardiograms, X-rays, laboratory, and ultrasounds that are done on-site.
- 1.7 **Encounter** means a face-to-face meeting with a physician, physician assistant, dentist, or Advanced Registered Nurse Practitioner (ARNP) in the office setting. This includes primary and specialist medical encounters.
- 1.8 **Fiscal Year** means County's fiscal year that begins October 1 of each year and ends September 30 of the following year.
- 1.9 **HSSS** means County's Human Services Department Software System. It includes the Client Services Management System, or any other participant information collection and data exchange systems designated by County.
- 1.10 **Prevailing Community Standards** means the prevailing quality standards for the provision of services to individuals in the community.
- 1.11 **Primary Care Services** or **Services** means acute care and preventive services that are made available to well and sick persons who are unable to obtain services due to lack of income or other barriers beyond their control. These services are provided to benefit individuals, improve the collective health of the public, and prevent and control the spread of disease. Primary health care services are provided at home, in group settings, or in clinics. These services will be supported by available federal, state, and local funds and will include services mandated on a state or federal level. Examples of primary health care services include but are not limited to (a) first contact acute care services; (b) chronic disease detection and treatment; (c) maternal and child health services; (d) family planning; (e) nutrition; (f) school health; (g) supplemental food assistance for women, infants, and children; (h) home health; (i) dental services; and (j) specialty care services. Health care services provided in any other agreement or arrangement between County and Broward Health or between County and any other party are specifically excluded.
- 1.12 **Provider Handbook** means County's Human Services Department manual for providers of services that contains standard forms, performance measures, and other documents and standard practices, as may be amended from time to time by County, which Handbook is incorporated into this Agreement by reference.
- 1.13 **Repository** means County's Human Services Department Repository, under the Office of Evaluation and Planning. The Repository address is identified in the Provider Handbook.
- 1.14 **Subcontractor** means an entity or individual providing Services to County through Broward Health. The term "Subcontractor" includes all subconsultants.

1.15 **Unduplicated Client** means the number of unique Clients who have been seen in the primary care system in the period comprised of one County Fiscal Year. For the unduplicated count, the Client will be counted only once in this period, regardless of how many times the Client has been seen in the primary care system.

ARTICLE 2. TERM AND RENEWAL

This Agreement begins on October 1, 2023, and ends on September 30, 2024 ("Initial Term"), unless otherwise terminated, renewed, or extended as provided in this Agreement. The Contract Administrator may renew this Agreement for up to four (4) one-year periods (each referred to as an "Option Period"). The Contract Administrator must notify Broward Health of renewal, in writing, no less than thirty (30) days prior to the expiration of the then-current term of the Agreement. The Parties may also extend the Agreement for up to sixty (60) days under the same terms and conditions if the Board does not adopt the budget for an Option Period in time to exercise the Option Period. The Contract Administrator must notify Broward Health of this extension in writing before the Agreement expires. The Initial Term, Option Period(s), and any additional extension as defined in this article are collectively referred to as the "Term."

ARTICLE 3. SCOPE OF SERVICES

- 3.1 In accordance with Section 154.011, Florida Statutes, Broward Health must provide Primary Care Services to eligible Broward County residents who reside within the geographical boundaries of the North Broward Hospital District. Broward Health must require that the individual provide proof of residency in the geographical boundaries of the North Broward Hospital District. Broward Health must screen individuals for eligibility and place supporting documentation of eligibility in the Client's file. Broward Health must comply with all reporting requirements identified in Exhibit F.
- 3.2 Broward Health must provide the Services at accessible locations and times. Broward Health must maintain a complete list of service locations, the name of the lease owner of the facility, the number of personnel, and a description of the facility and provide the list to County at the time of or prior to execution of this Agreement (Attachment I). If applicable, Broward Health must notify County in writing prior to the proposed opening, closing, or relocating of a service site listed in Attachment I no less than thirty (30) calendar days prior to the change, in accordance with the "Notices" section of this Agreement. Broward Health must not initiate an opening, closing, or relocation without County's prior written consent, which consent will not be unreasonably withheld.
- 3.3 Broward Health must include the following statement on its signage at each of its primary care centers: "In partnership with the Board of County Commissioners of Broward County, Florida." Broward Health must also include the Broward County logo next to Broward Health's logo.
- 3.4 The terms and conditions of Broward Health's use of any facility belonging to County will be set forth in a separate agreement.

3.5 Broward Health must adhere to the standards and other requirements set forth in the Provider Handbook, as applicable to the provision of Services under this Agreement. Broward Health acknowledges receipt of the Provider Handbook and understands that each document in it, as incorporated by reference, is made a part of this Agreement. Broward Health also acknowledges that County may update or revise documents within the Provider Handbook and will provide notification of any update or revision to Broward Health. Broward Health may terminate this Agreement within thirty (30) calendar days after notice of the updates or revisions if the Parties mutually agree that the updates or revisions substantially impact Broward Health's ability to perform as contracted. Otherwise, Broward Health acknowledges it will be bound by the applicable requirements outlined in the Provider Handbook, as amended by County from time to time.

ARTICLE 4. COMPENSATION

4.1 <u>Maximum Amounts</u>. For all goods and Services provided under this Agreement, County will pay Broward Health up to a maximum amount not to exceed Eight Million Four Hundred Ninety-five Thousand Four Hundred Twenty Dollars (\$8,495,420) for Services actually provided, inclusive of any subcontracted Services. Each monthly invoice must not exceed one-twelfth (1/12) of the annual Agreement value. Broward Health is authorized to subcontract Services for a total amount not to exceed One Million Four Hundred Thousand Dollars (\$1,400,000) of the annual maximum funding amount. Broward Health acknowledges that the funding amount set forth in this Agreement is the maximum amount payable and constitutes a limitation upon County's obligation to compensate Broward Health for its Services related to this Agreement. This maximum amount, however, does not constitute a limitation of any sort upon Broward Health's obligation to provide all Services required by or which can be reasonably inferred from the Scope of Services. No amount will be paid to Broward Health to reimburse its expenses unless otherwise provided in this Agreement.

County funding under this Agreement relates exclusively to the Initial Term, and County is not obligated to fund Broward Health beyond the Initial Term. If the Contract Administrator exercises an Option Period under this Agreement, or if this Agreement is extended in accordance with Article 2, the maximum amount payable by County will be:

- A. Option Periods, if exercised: Eight Million Four Hundred Ninety-five Thousand Four Hundred Twenty Dollars (\$8,495,420) subject to both the appropriation and the availability of funds in accordance with Chapter 129, Florida Statutes. Broward Health is encouraged to participate in County's annual budget process as it relates to Option Period funding of Primary Care Services under this Agreement, as the appropriated amount will not be subject to additional adjustments during the Option Periods.
- B. Extension period, if exercised: A pro rata monthly amount equal to one-twelfth (1/12) of the existing annual funding amount.

- 4.2 <u>Reduction of Funds</u>. If Broward Health underutilizes County funds, the Contract Administrator has the authority, at any time, to reduce the maximum funding allocated under this Agreement.
- 4.3 <u>Performance</u>. At the end of each quarter, County will reduce payment by three percent (3%) ("Reduction") for Services performed by Broward Health in which attainment of one (1) or more outcomes was more than five (5%) percent below the indicated target. The Reduction will be applied to payments for any program in which any indicators were not met. The Reduction will be applied to the net payment amount for the third (3rd) month, after calculation of the required match, but before any disallowed units or repayments from any other months are applied. If Broward Health does not submit an invoice in the third (3rd) month of a quarter because all funding authorized in this Agreement has been depleted, the Reduction will be based on the previous month's net payment, and Broward Health must pay the Reduction amount to County within thirty (30) days after County's written request for repayment. If County finds that Broward Health's Outcome Report contains incorrect information, County may apply this Reduction retroactively at the sole discretion of County's Contract Administrator.

4.4 <u>Invoice Requirements and Due Dates</u>.

- 4.4.1 Broward Health must submit an original invoice in a form approved by the Contract Administrator plus one (1) complete copy of the Primary Care Monthly Client Demographic Report and the Primary Care Monthly Client Service Report, as indicated in the Provider Handbook, on or before the date specified in Exhibit F, "Required Reports and Submission Dates." If the due date falls on a weekend or County holiday, the original invoice, its complete copy, and supporting documentation are due on the next business day. Acceptable supporting documentation as described in this section will be in the form of a report provided through County's designated HSSS and will maintain the parameters as indicated in Attachment II and Attachment III of this Agreement or as otherwise agreed to in writing by the Contract Administrator. All reported Services must correspond to the Services on invoices submitted for billing purposes.
 - 4.4.1.1 In addition, all required fields within the HSSS must be completed thoroughly and accurately for the Services to be considered as delivered and payable. Compliance with this requirement will be periodically monitored by County. Broward Health must reimburse County, as described in Section 4.4.2, for Services that do not comply with this requirement and were previously billed and paid during any term.
 - 4.4.1.2 The Contract Administrator may authorize an extension to the invoice submission deadline or manual billing if there is an HSSS processing delay or Broward Health lacks access to the designated system through no fault of Broward Health, as determined by the Contract Administrator in his or her sole discretion.

4.4.2 <u>Corrected Invoices</u>.

- 4.4.2.1 If Broward Health determines that it has previously incorrectly billed and been reimbursed for a period within the current Agreement term, Broward Health must include the corrections on the next regular monthly invoice. Unless the Contract Administrator has authorized or required additional corrections, corrected billing is limited to one (1) time for any month in which the Services were rendered and must be received by County no later than ninety (90) days following the date the invoice being corrected was originally due to County, or forty-five (45) days after the end of the then-current Agreement term, whichever is earlier. Broward Health must resubmit the original supporting documentation and submit the revised supporting documentation, along with a completed "Required Services Documentation" form as provided in the Provider Handbook, unless the Contract Administrator has in writing provided alternate documentation requirements. The invoice including the corrections must be accompanied by a cover letter signed by Broward Health's authorized signator summarizing the corrections, explaining the reason for the error, and detailing the actions Broward Health is taking to prevent recurrence of the error.
- 4.4.2.2 If County determines that Broward Health has previously incorrectly billed and was reimbursed for a period within the current contract year, Broward Health must include the corrections on the next regular monthly invoice. If the date of reimbursement is outside of the Agreement term in which the overpayment occurred, Broward Health must pay County within forty-five (45) days after receipt of written notice from County.
- 4.4.2.3 Invoices or documentation returned to Broward Health for corrections will not be considered as submitted and will be cause for delay in County's issuance of payment to Broward Health without the accrual of interest on any payments owed by County to Broward Health. Broward Health must sign and date any revised invoice. Submission of accurate information, timely documentation, and other requested information as required by County will be considered a factor in evaluating future funding requests.
- 4.4.2.4 The certification statement on the monthly invoice submitted by Broward Health must be signed by an authorized person as referenced in Exhibit A, "Authorized Invoice Signators." If it becomes necessary for Broward Health to replace signators, a notarized copy of the authorizing resolution or legislation as passed by Broward Health's Board of Directors or Trustees or equivalent must be submitted to the Contract Administrator, along with a replacement of Exhibit A and Exhibit B, within ten (10) days following replacement of the signators.

- 4.4.3 County will pay Broward Health within thirty (30) days after receipt of Broward Health's proper invoice in accordance with the "Broward County Prompt Payment Ordinance," Section 1-51.6 of the Code. To be deemed proper, all invoices must comply with all applicable requirements set forth in this Agreement and must be submitted (a) on the forms prescribed in the Provider Handbook, (b) through the communication system as provided through County's HSSS, or (c) as otherwise agreed to in writing by the Human Services Department Director or Deputy Director. Payment may be withheld for failure of Broward Health to comply with a term, condition, or requirement of this Agreement. Further, County may deduct from any outstanding invoice any monies due from Broward Health in accordance with this Agreement.
- 4.5 <u>Subcontractors</u>. If Broward Health has been authorized in accordance with the terms of this Agreement to use Subcontractors, or if Broward Health uses any suppliers of materials for the provision of the Services, Broward Health must submit with each invoice a "Certification of Payments to Subcontractors and Suppliers" in the form attached to this Agreement as Exhibit C.

Broward Health must pay Subcontractors and suppliers within fifteen (15) days after receipt of payment from County for such subcontracted work or supplies. Broward Health agrees that if it withholds an amount as retainage from Subcontractors or suppliers, it will release such retainage and pay same within fifteen (15) days after receipt of payment of retained amounts from County. Failure to pay a Subcontractor or supplier in accordance with this subsection will be a material breach of this Agreement, unless Broward Health demonstrates to Contract Administrator's satisfaction that such failure to pay results from a bona fide dispute with the Subcontractor or supplier and, further, Broward Health promptly pays the applicable amount(s) to the Subcontractor or supplier upon resolution of the dispute. Broward Health must include requirements substantially similar to those set forth in this subsection in its contracts with Subcontractors and suppliers.

Broward Health must invoice Subcontractor fees only in the actual amount paid by Broward Health, without markup or other adjustments.

- 4.6 <u>Third-Party Payment</u>. Broward Health must bill and pursue collection of third-party and Medicaid payments for Services rendered under this Agreement. Broward Health must keep accurate and complete records of any fees collected, reimbursements, or compensation of any kind received for Services from any Client, Medicaid, or other third parties. All funds collected by Broward Health from any source for Services provided under this Agreement may be retained by Broward Health.
- 4.7 The Parties acknowledge that all compensation and funding under this Agreement is intended to supplement any other funding received by Broward Health from any other source including, but not limited to, the State of Florida, County, third-party payers, grants, and any other entities.
- 4.8 All payments will be made solely in the name of Broward Health as the official payee. Broward Health may change any of the information provided under this section by

providing written notice of such change to the Contract Administrator using the notice procedure under the "Notices" section of this Agreement. It is Broward Health's sole responsibility to advise the Contract Administrator in writing of changes in name, address, telephone number, or administrative locations within ten (10) calendar days of such change.

Payment will be made to Broward Health at:

North Broward Hospital District d/b/a Broward Health Attn: Vice President of Finance 1800 NW 49th Street Fort Lauderdale, Florida 33309

Federal ID Number: 59-6012065

ARTICLE 5. DESIGNATED REPRESENTATIVES AND EMPOWERMENT

- 5.1 County's representative is the Division Director of the Community Partnerships Division. The title of Broward Health's representative responsible for the administration of the Services is Broward Health's President/CEO.
- 5.2 The empowered signators of invoices under this Agreement for Broward Health are those individuals referenced in Exhibit A, "Authorized Invoice Signators." Changes in the empowered signators on Exhibit A will be communicated to County as directed in the "Notices" section of this Agreement.
- 5.3 The empowered signator of this Agreement for Broward Health is identified in Exhibit B, "Certification of Empowerment." Changes in the empowered signator on Exhibit B will be communicated to County as directed in Article 4 and in the "Notices" section of this Agreement.

ARTICLE 6. STANDARDS OF CARE

- 6.1 Broward Health must retain, during the Term, accreditation by The Joint Commission or another national accrediting body for all locations in which the Services are provided. If there is a change in the accreditation status of any primary care facility where Broward Health provides Services under this Agreement, Broward Health must furnish County notice within ten (10) calendar days from the date Broward Health received notice of such change. Failure to retain accreditation will be a material breach of this Agreement and may result in termination of the Agreement in accordance with the "Termination" section.
- 6.2 Broward Health must meet the performance outcome measures as provided in Exhibit D, "Outcomes." Such performance will be a factor in County's decision to exercise the Option Periods.

ARTICLE 7. MONITORING, RECORDS, REPORTS, AND OTHER REQUIREMENTS

Broward Health must comply with the Monitoring, Records, and Reporting requirements outlined in the Provider Handbook.

ARTICLE 8. TERMINATION

8.1 <u>Termination for Cause</u>. This Agreement may be terminated for cause by the aggrieved Party if the Party in breach has not corrected the breach within ten (10) days after receipt of written notice from the aggrieved Party identifying the breach. This Agreement may be terminated for cause by County for reasons including, but not limited to, Broward Health's failure to suitably or continuously perform the services in a manner calculated to meet or accomplish the objectives in this Agreement, or repeated submission (whether negligent or intentional) for payment of false or incorrect bills or invoices.

Unless otherwise stated in this Agreement, if this Agreement was approved by Board action, termination for cause by County must be by action of the Board or the County Administrator; in any other instance, termination for cause may be by the County Administrator, the County representative expressly authorized under this Agreement, or the County representative (including any successor) who executed the Agreement on behalf of County. If County erroneously, improperly, or unjustifiably terminates this Agreement for cause, such termination will be deemed a termination for convenience in accordance with Section 8.2 effective thirty (30) days after such notice was provided and Broward Health will be eligible for the compensation provided in Section 8.2 as its sole remedy.

- 8.2 <u>Termination for Convenience; Other Termination</u>. This Agreement may also be terminated for convenience by the Board with at least thirty (30) days advance written notice to Broward Health. Broward Health acknowledges that it has received good, valuable, and sufficient consideration for County's right to terminate this Agreement for convenience including in the form of County's obligation to provide advance notice to Broward Health of such termination in accordance with this section. This Agreement may also be terminated by the County Administrator upon such notice as the County Administrator deems appropriate under the circumstances if the County Administrator determines that terminated by County under this section, Broward Health will be paid for any Services properly performed through the termination date specified in the written notice of termination, subject to any right of County to retain any sums otherwise due and payable, and County will have no further obligation to pay Broward Health for Services under this Agreement.
- 8.3 Notice of termination must be provided in accordance with the "Notices" section of this Agreement except that notice of termination by the County Administrator to protect the public health, safety, or welfare may be oral notice that must be promptly confirmed in writing.
- 8.4 In addition to any termination rights stated in this Agreement, County will be entitled to

seek any and all available contractual or other remedies available at law or in equity.

8.5 <u>Transition Plan</u>. Prior to termination of this Agreement in its normal course, or upon earlier termination for any reason, Broward Health must cooperate fully with County, and any third party designated by County, to develop a transition plan to provide for the transition of the Services. The transition plan must, at a minimum, provide for the orderly and reasonable transfer of Services in a manner that causes minimal disruption to the continuity of services.

ARTICLE 9. GOVERNMENTAL IMMUNITY

Except to the extent sovereign immunity may be deemed waived by entering into this Agreement, nothing herein is intended to serve as a waiver of sovereign immunity by either Party, nor will anything included herein be construed as consent by either Party to be sued by a third party in any matter arising out of this Agreement. Each Party is a state agency or political subdivision as defined in Section 768.28, Florida Statutes, and will be responsible for the acts and omissions of its agents or employees to the extent required by Applicable Law.

ARTICLE 10. INSURANCE

Broward Health is an entity subject to Section 768.28, Florida Statutes, and will provide the Contract Administrator with written verification of liability protection in accordance with state law on or before the date of Broward Health's execution of this Agreement. Broward Health must require all Subcontractors to include Broward County as an additional insured on its general liability, automobile liability, and any excess policy(ies).

ARTICLE 11. EQUAL EMPLOYMENT OPPORTUNITY AND CBE COMPLIANCE

- 11.1 No Party may discriminate on the basis of race, color, sex, religion, national origin, disability, age, marital status, political affiliation, sexual orientation, pregnancy, or gender identity and expression in the performance of this Agreement. Broward Health must include the foregoing or similar language in its contracts with all Subcontractors, except that any project assisted by the U.S. Department of Transportation funds must comply with the nondiscrimination requirements in 49 C.F.R. Parts 23 and 26.
- 11.2 Although no County Business Enterprise ("CBE") goal has been set for this Agreement, County encourages Broward Health to give full consideration to the use of CBE firms to provide Services under this Agreement.

ARTICLE 12. REPRESENTATIONS AND WARRANTIES

12.1 <u>Representation of Authority</u>. Broward Health represents and warrants that this Agreement constitutes the legal, valid, binding, and enforceable obligation of Broward Health, and that neither the execution nor performance of this Agreement constitutes a breach of any agreement that Broward Health has with any third party or violates Applicable Law. Broward Health further represents and warrants that execution of this

Agreement is within Broward Health's legal powers, and each individual executing this Agreement on behalf of Broward Health is duly authorized by all necessary and appropriate action to do so on behalf of Broward Health and does so with full legal authority.

- 12.2 <u>Public Entity Crime Act</u>. Broward Health represents that it is familiar with the requirements and prohibitions under the Public Entity Crime Act, Section 287.133, Florida Statutes, and represents that its entry into this Agreement will not violate that Act. Broward Health further represents that there has been no determination that it committed a "public entity crime" as defined by Section 287.133, Florida Statutes, and that it has not been formally charged with committing an act defined as a "public entity crime" regardless of the amount of money involved or whether Broward Health has been placed on the convicted vendor list.
- 12.3 <u>Discriminatory Vendor and Scrutinized Companies Lists; Countries of Concern</u>. Broward Health represents that it has not been placed on the "discriminatory vendor list" as provided in Section 287.134, Florida Statutes, and that it is not a "scrutinized company" under Sections 215.473 or 215.4725, Florida Statutes. Broward Health represents and certifies that it is not, and for the duration of the Term will not be, ineligible to contract with County on any of the grounds stated in Section 287.135, Florida Statutes. Broward Health represents that it is, and for the duration of the Term will remain, in compliance with Section 286.101, Florida Statutes.
- 12.4 <u>Claims Against Broward Health</u>. Broward Health represents and warrants that there is no action or proceeding, at law or in equity, before any court, mediator, arbitrator, governmental or other board or official, pending or, to the knowledge of Broward Health, threatened against or affecting Broward Health, the outcome of which may (a) affect the validity or enforceability of this Agreement, (b) materially and adversely affect the authority or ability of Broward Health to perform its obligations under this Agreement, or (c) have a material and adverse effect on the consolidated financial condition or results of operations of Broward Health or on the ability of Broward Health to be conduct its business as presently conducted or as proposed or contemplated to be conducted.
- 12.5 <u>Verification of Employment Eligibility</u>. Broward Health represents that Broward Health and each Subcontractor have registered with and use the E-Verify system maintained by the United States Department of Homeland Security to verify the work authorization status of all newly hired employees in compliance with the requirements of Section 448.095, Florida Statutes, and that entry into this Agreement will not violate that statute. If Broward Health violates this section, County may immediately terminate this Agreement for cause and Broward Health will be liable for all costs incurred by County due to the termination.
- 12.6 <u>Warranty of Performance</u>. Broward Health represents and warrants that it possesses the knowledge, skill, experience, and financial capability required to perform and provide all Services and that each person and entity that will provide Services is duly qualified to perform such Services by all appropriate governmental authorities, where required, and is sufficiently experienced and skilled in the area(s) for which such person or entity will

render Services. Broward Health represents and warrants that the Services will be performed in a skillful and respectful manner, and that the quality of all such Services will equal or exceed prevailing industry standards for the provision of such services.

- 12.7 <u>Prohibited Telecommunications Equipment</u>. Broward Health represents and certifies that Broward Health and all Subcontractors do not use any equipment, system, or service that uses covered telecommunications equipment or services as a substantial or essential component of any system, or as critical technology as part of any system, as such terms are used in 48 CFR §§ 52.204-24 through 52.204-26. Broward Health represents and certifies that Broward Health and all Subcontractors must not provide or use such covered telecommunications equipment, system, or services during the Term.
- 12.8 <u>Criminal History Screening Practices</u>. If this Agreement is subject to the requirements of Section 26-125(d) of the Code, Broward Health represents and certifies that Broward Health will comply with Section 26-125(d) of the Code for the duration of the Term.
- 12.9 <u>Breach of Representations</u>. Broward Health acknowledges that County is materially relying on the representations, warranties, and certifications of Broward Health stated in this article, and County will be entitled to exercise any or all of the following remedies if any such representation, warranty, or certification is untrue: (a) recovery of damages incurred; (b) termination of this Agreement without any further liability to Broward Health; (c) set off from any amounts due Broward Health the full amount of any damage incurred; and (d) debarment of Broward Health.

ARTICLE 13. MISCELLANEOUS

- 13.1 <u>Contract Administrator Authority</u>. The Contract Administrator is authorized to coordinate and communicate with Broward Health to manage and supervise the performance of this Agreement. Broward Health acknowledges that the Contract Administrator has no authority to make changes that would increase, decrease, or otherwise materially modify the Scope of Services except as expressly set forth in this Agreement. Unless expressly stated otherwise in this Agreement or otherwise set forth in the Code or the Broward County Administrative Code, the Contract Administrator may exercise ministerial authority in connection with the day-to-day management of this Agreement. The Contract Administrator may also approve in writing minor modifications to the Scope of Services that do not increase the total cost to County or waive any rights of County.
- 13.2 <u>Rights in Documents and Work</u>. Any and all reports, photographs, surveys, documents, materials, data, or other work created by Broward Health in connection with performing Services, whether finished or unfinished ("Documents and Work"), will be owned by County, and Broward Health hereby transfers to County all right, title, and interest, including any copyright or other intellectual property rights, in or to the Documents and Work. Upon expiration or termination of this Agreement, the Documents and Work will become the property of County and must be delivered by Broward Health to the Contract Administrator within seven (7) days after expiration or termination. Any compensation due to Broward Health may be withheld until all Documents and Work are received as

provided in this Agreement. Broward Health must ensure that the requirements of this section are included in all agreements with all Subcontractor(s).

- 13.3 <u>Public Records</u>. Notwithstanding anything else in this Agreement, any action taken by County in compliance with, or in a good faith attempt to comply with, the requirements of Chapter 119, Florida Statutes, will not constitute a breach of this Agreement. If Broward Health is acting on behalf of County as stated in Section 119.0701, Florida Statutes, Broward Health must:
 - 13.3.1 Keep and maintain public records required by County to perform the Services;
 - 13.3.2 Upon request from County, provide County with a copy of the requested records or allow the records to be inspected or copied within a reasonable time and at a cost that does not exceed that provided in Chapter 119, Florida Statutes, or as otherwise provided by Applicable Law;
 - 13.3.3 Ensure that public records that are exempt or confidential and exempt from public record requirements are not disclosed except as authorized by Applicable Law for the duration of this Agreement and after completion or termination of this Agreement if the records are not transferred to County; and
 - 13.3.4 Upon expiration of the Term or termination of this Agreement, transfer to County, at no cost, all public records in possession of Broward Health or keep and maintain public records required by County to perform the Services. If Broward Health transfers the records to County, Broward Health must destroy any duplicate public records that are exempt or confidential and exempt. If Broward Health keeps and maintains the public records, Broward Health must meet all requirements of Applicable Law for retaining public records. All records stored electronically must be provided to County upon request in a format that is compatible with the information technology systems of County.

If Broward Health receives a request for public records regarding this Agreement or the Services, Broward Health must immediately notify the Contract Administrator in writing and provide all requested records to County to enable County to timely respond to the public records request. County will respond to all such public records requests.

Broward Health separately submit and conspicuously label must as "RESTRICTED MATERIAL - DO NOT PRODUCE" any material (a) that Broward Health contends constitutes or contains its trade secrets under Chapter 688, Florida Statutes, or (b) for which Broward Health asserts a right to withhold from public disclosure as confidential or otherwise exempt from production under Florida public records laws (including Chapter 119, Florida Statutes) (collectively, "Restricted Material"). In addition, Broward Health must, simultaneous with the submission of any Restricted Material, provide a sworn affidavit from a person with personal knowledge attesting that the Restricted Material constitutes trade secrets or is otherwise exempt or confidential under Florida public records laws, including citing the applicable Florida statute and specifying the factual basis for each such claim. Upon request by County, Broward Health must promptly identify the specific applicable statutory section that protects any particular

document. If a third party submits a request to County for records designated by Broward Health as Restricted Material, County will refrain from disclosing such material unless otherwise ordered by a court of competent jurisdiction, authorized in writing by Broward Health, or the claimed exemption is waived. Any failure by Broward Health to strictly comply with the requirements of this section will constitute Broward Health's waiver of County's obligation to treat the records as Restricted Material. Broward Health must indemnify and defend County and its employees and agents from any and all claims, causes of action, losses, fines, penalties, damages, judgments, and liabilities of any kind, including attorneys' fees, litigation expenses, and court costs, relating to nondisclosure of Restricted Material in response to a third-party request.

IF BROWARD HEALTH HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO BROWARD HEALTH'S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS AGREEMENT, CONTACT THE CUSTODIAN OF PUBLIC RECORDS AT (954) 357-6398, ECRENSHAW@BROWARD.ORG, 115 S. ANDREWS AVE., SUITE A360, FORT LAUDERDALE, FLORIDA 33301.

13.4 <u>Financial Statements and Management Letters; Retention of Records</u>. Broward Health must provide a copy of Broward Health's audited financial statements and any applicable management letter(s) as well as Broward Health's response to any management letter(s). The audit of the financial statements must be prepared by an independent certified public accountant in accordance with generally accepted accounting principles for the fiscal year County funds are received and for each subsequent fiscal year until such time as all of County funds are expended.

Broward Health must also provide to Contract Administrator copies of a special report showing all revenues, by source, and all expenditures made by Broward Health in connection with the program being funded by this Agreement. The report must specifically disclose any funds received that were not expended in accordance with this Agreement or with any regulations incorporated by reference therein. It must identify the total of noncompliant expenditures due back to County. If the special report is prepared by an independent certified public accountant, it must be in accordance with generally accepted auditing standards. If the special report is prepared by Broward Health's internal auditor, it must be as nearly in accordance with generally accepted auditing standards as the status of the internal auditor permits, realizing that the internal auditor may not issue the opinions required therein. The special report is to be filed with Broward Health's governing body.

Broward Health must submit the documents required by this section to Contract Administrator within two hundred seventy (270) days after the close of each of Broward Health's fiscal years in which Broward Health received funds under this Agreement unless otherwise approved by the Contract Administrator in writing.

Broward Health and all Subcontractors must preserve and make available, at reasonable times within Broward County, Florida, for examination and audit, all financial records,

supporting documents, statistical records, and any other documents pertinent to this Agreement for at least three (3) years after expiration or termination of this Agreement or until resolution of any audit findings, whichever is longer. This article will survive any dispute or litigation between the Parties, and Broward Health expressly acknowledges and agrees to be bound by this article throughout the course of any dispute or litigation with County. Any audit or inspection in accordance with this section may be performed by any County representative (including any outside representative engaged by County). Broward Health hereby grants County the right to conduct such audit or review at Broward Health's place of business, if deemed appropriate by County, with seventy-two (72) hours' advance notice. Broward Health must make all such records and documents available electronically in common file formats or via remote access if, and to the extent, requested by County.

Any incomplete or incorrect entry in such books, records, and accounts will be a basis for County's disallowance and recovery of any payment upon such entry. If an audit or inspection in accordance with this section reveals overpricing or overcharges to County of any nature by Broward Health in excess of five percent (5%) of the total contract billings reviewed by County, in addition to making adjustments for the overcharges, Broward Health must pay the reasonable cost of County's audit. Any adjustments or payments due as a result of such audit or inspection must be made within thirty (30) days after presentation of County's findings to Broward Health.

Broward Health must ensure that the requirements of this section are included in all agreements with all Subcontractor(s).

- 13.5 <u>Independent Contractor</u>. Broward Health is an independent contractor of County, and nothing in this Agreement will constitute or create a partnership, joint venture, or any other relationship between the Parties. In providing Services, neither Broward Health nor its agents will act as officers, employees, or agents of County. Broward Health will not have the right to bind County to any obligation not expressly undertaken by County under this Agreement.
- 13.6 <u>Regulatory Capacity</u>. Notwithstanding the fact that County is a political subdivision with certain regulatory authority, County's performance under this Agreement is as a Party to this Agreement and not in its regulatory capacity. If County exercises its regulatory authority, the exercise of such authority and the enforcement of Applicable Law will have occurred under County's regulatory authority as a governmental body separate and apart from this Agreement, and will not be attributable in any manner to County as a Party to this Agreement.
- 13.7 Law, Jurisdiction, Venue, Waiver of Jury Trial. This Agreement will be interpreted and construed in accordance with and governed by the laws of the State of Florida. The exclusive venue for any lawsuit arising from, related to, or in connection with this Agreement will be in the state courts of the Seventeenth Judicial Circuit in and for Broward County, Florida. If any claim arising from, related to, or in connection with this Agreement must be litigated in federal court, the exclusive venue for any such lawsuit will be in the United States District Court or United States Bankruptcy Court for the Southern

District of Florida. EACH PARTY HEREBY EXPRESSLY WAIVES ANY RIGHTS IT MAY HAVE TO A TRIAL BY JURY OF ANY CIVIL LITIGATION RELATED TO THIS AGREEMENT.

- 13.8 <u>Amendments</u>. No modification, amendment, or alteration in the terms or conditions contained in this Agreement will be effective unless contained in a written document executed with the same or similar formality as this Agreement and by duly authorized representatives of County and Broward Health.
- 13.9 <u>Materiality and Waiver of Breach</u>. Each requirement, duty, and obligation set forth in this Agreement was bargained for at arm's-length and is agreed to by the Parties. Each requirement, duty, and obligation set forth in this Agreement is substantial and important to the formation of the Agreement, and each is, therefore, a material term. County's failure to enforce any provision of this Agreement will not be deemed a waiver of such provision or modification of this Agreement. A waiver of any breach will not be deemed a waiver of this Agreement. To be effective, any waiver must be in writing signed by an authorized signatory of the Party granting the waiver.
- 13.10 <u>Compliance with Laws</u>. Broward Health and the Services provided must comply with all Applicable Law including, without limitation, the Americans with Disabilities Act, 42 U.S.C. § 12101, Section 504 of the Rehabilitation Act of 1973, and the requirements of any applicable grant agreements.
- 13.11 <u>Severability</u>. If any part of this Agreement is found to be unenforceable by any court of competent jurisdiction, that part will be deemed severed from this Agreement and the balance of this Agreement will remain in full force and effect.
- 13.12 <u>Prior Agreements</u>. This Agreement represents the final and complete understanding of the Parties regarding the subject matter of this Agreement and supersedes all prior and contemporaneous negotiations and discussions regarding same. All commitments, agreements, and understandings of the Parties concerning the subject matter of this Agreement are contained herein.
- 13.13 <u>Assignment</u>. All Subcontractors must be expressly identified in this Agreement or otherwise approved in advance and in writing by County's Contract Administrator. Except for approved subcontracting, neither this Agreement nor any right or interest in it may be assigned, transferred, subcontracted, or encumbered by Broward Health without the prior written consent of County. Any assignment, transfer, encumbrance, or subcontract in violation of this section will be void and ineffective, constitute a breach of this Agreement, and permit County to immediately terminate this Agreement, in addition to any other remedies available to County at law or in equity. County reserves the right to condition its approval of any assignment, transfer, encumbrance, or subcontract upon further due diligence and an additional fee paid to County to reasonably compensate it for the performance of any such due diligence.
- 13.14 <u>Conflicts</u>. Neither Broward Health nor its employees will have or hold any continuing or frequently recurring employment or contractual relationship that is substantially antagonistic or incompatible with Broward Health's loyal and conscientious exercise of

judgment and care related to its performance under this Agreement. During the Term, none of Broward Health's officers or employees will serve as an expert witness against County in any legal or administrative proceeding in which they or Broward Health is not a party, unless compelled by court process. Further, such persons must not give sworn testimony or issue a report or writing as an expression of such person's expert opinion that is adverse or prejudicial to the interests of County in connection with any such pending or threatened legal or administrative proceeding unless compelled by court process. The limitations of this section will not preclude Broward Health or any persons in any way from representing themselves, including giving expert testimony in support of such representation, in any action or in any administrative or legal proceeding. If Broward Health is permitted under this Agreement to utilize Subcontractors to perform any Services required by this Agreement, Broward Health must require such Subcontractors, by written contract, to comply with the provisions of this section to the same extent as Broward Health.

- 13.15 <u>Joint Preparation</u>. This Agreement has been jointly prepared by the Parties and will not be construed more strictly against either Party.
- 13.16 <u>Priority of Provisions</u>. If there is a conflict or inconsistency between any term, statement, requirement, or provision of any document or exhibit attached to, referenced by, or incorporated in this Agreement and any provision within an article or section of this Agreement, the article or section must prevail and be given effect.
- 13.17 <u>Third-Party Beneficiaries</u>. Neither Broward Health nor County intends to directly or substantially benefit a third party by this Agreement. Therefore, the Parties acknowledge that there are no third-party beneficiaries to this Agreement and that no third party will be entitled to assert a right or claim against either of them based upon this Agreement.
- 13.18 <u>Notices</u>. Unless otherwise stated herein, for notice to a Party to be effective under this Agreement, notice must be sent via U.S. first-class mail, hand delivery, or commercial overnight delivery, each with a contemporaneous copy via email, to the addresses listed below and will be effective upon mailing or hand delivery (provided the contemporaneous email is also sent). Addresses may be changed by the applicable Party giving notice of such change in accordance with this section.

For County:

Broward County Community Partnerships Division Attn: Director Governmental Center, Room A370 115 South Andrews Avenue Fort Lauderdale, FL 33301

<u>For Broward Health</u>: North Broward Hospital District d/b/a Broward Health Attn: President/CEO 1800 NW 49th Street Fort Lauderdale, FL 33309

- 13.19 Certification Relating to No Smoking and Children's Services. The Pro-Children Act of 1994, 20 U.S.C. § 6081 et seq. ("Act"), requires that smoking not be permitted in any portion of any indoor facility owned, leased, or contracted for by an entity and used routinely or regularly for the provision of health, daycare, early childhood services, education or library services to children under the age of eighteen (18), if the Services are funded by federal programs either directly or through state or local governments, by federal grant, contract, loan, or loan guarantee. The Act also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with federal funds. The Act does not apply to children's services provided in private residences, portions of facilities used for inpatient drug or alcohol treatment, service providers whose sole source of applicable federal funds is Medicare or Medicaid, or facilities where Women, Infants and Children ("WIC") coupons are redeemed. Failure of Broward Health to comply with the provisions of the Act may result in the imposition of a civil monetary penalty (in the amount provided by the Act) for each violation and imposition of an administrative compliance order in accordance with the Act. By signing this Agreement, Broward Health certifies that Broward Health will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act.
- 13.20 <u>Interpretation</u>. The titles and headings contained in this Agreement are for reference purposes only and will not in any way affect the meaning or interpretation of this Agreement. All personal pronouns used in this Agreement will include any other gender, and the singular will include the plural, and vice versa, unless the context otherwise requires. Terms such as "herein" refer to this Agreement as a whole and not to any particular sentence, paragraph, or section where they appear, unless the context otherwise requires. Whenever reference is made to a section or article of this Agreement, such reference is to the section or article as a whole, including all subsections thereof, unless the reference is made to a particular subsection or subparagraph of such section or article. Any reference to "days" means calendar days, unless otherwise expressly stated.

The Parties understand and accept the need for consistent interpretation of providerrelated agreements funded by County. If the Contract Administrator identifies a programmatic contractual issue that requires interpretation, the Contract Administrator will issue such interpretations, in writing, to all program providers. If Broward Health identifies a programmatic contract provision that requires interpretation in order for Broward Health to understand its obligations, Broward Health must submit, in writing, a request for interpretation, with specificity to the Contract Administrator. The Contract Administrator will provide a written response to Broward Health within a reasonable time after any request by Broward Health for an interpretation. The Contract Administrator's programmatic interpretations will be deemed conclusive and final.

13.21 <u>Publicity</u>. Broward Health acknowledges that all advertisements, press releases, or any other type of publicity or promotional activities ("Promotion Materials") undertaken by Broward Health concerning the Services funded by this Agreement must include the

following statement: "The services provided by Broward Health is a collaborative effort between Broward County and Broward Health with funding provided by the Board of County Commissioners of Broward County, Florida, under an Agreement."

Broward Health must use the name "Broward County" and the official Broward County logo in all Promotional Materials of Broward Health related to the Services funded by this Agreement. Requests for the official electronic version of the Broward logo must be made to the Broward County Public Communications Office, 115 S. Andrews Avenue, Fort Lauderdale, Florida 33301, or <u>publicinfo@broward.org</u>.

- 13.22 <u>Emergency Conditions</u>. Except where otherwise provided by law or where Broward Health is otherwise directed by appropriate authority, Broward Health must provide any supportive or recovery-related service as requested by County during and after Emergency Conditions. These services include but are not limited to distributing food, water, and ice, and providing case management services to Disaster Evacuees at an emergency shelter or any other locations in Broward County as determined by County, through its Contract Administrator. Individuals who have been displaced or affected by the Emergency Conditions are referred to as "Disaster Evacuees." Emergency Conditions include but are not limited to:
 - A. Any natural, technological, or terrorism-related disaster or emergency for which assistance is requested from Emergency Support Function ("ESF") #6/Human Services Branch by the Broward Emergency Division, which starts when a State of Emergency is declared by federal, state, or local government; or
 - B. Any natural event, local or geographical in size, that (i) does not require assistance from the ESF #6/Human Services Branch by the Broward Emergency Division; or (ii) is not declared by federal, state, or local government as a State of Emergency but is declared by the County Administrator as an event that requires emergency supportive or recovery-related services on a large scale.

In the event of an Emergency Condition, the Human Services Department Director or Deputy Director, in their sole discretion, has the authority during and after the Emergency Conditions to (i) make adjustments to the maximum funding, including increases, under this Agreement; (ii) modify payment schedules throughout any term; (iii) exercise an Option Period; or (iv) extend the term of Agreement. All Services provided under this Agreement by Broward Health during Emergency Conditions must be in accordance with the terms and conditions stated in the Agreement.

13.23 <u>Discharge Planning</u>. Broward Health must participate with County in the development of local discharge planning policies that ensure individuals are not routinely discharged into homelessness, including the streets, shelters, or other McKinney-Vento homeless assistance housing programs. This participation includes collaboration with County's Housing Options, Solutions, and Supports (HOSS) Division's Hospital Liaison to coordinate the placement of individuals in emergency shelters, medical respite, or other housing referrals.

- 13.24 <u>Renegotiation</u>. The Parties agree to renegotiate this Agreement if revisions of any applicable law, regulation, or increase or decrease in allocations make changes in this Agreement necessary.
- 13.25 <u>Payable Interest</u>.
 - 13.25.1 <u>Payment of Interest</u>. Unless prohibited by Applicable Law, County will not be liable for interest to Broward Health for any reason, whether as prejudgment interest or for any other purpose, and Broward Health waives, rejects, disclaims, and surrenders any and all entitlement to interest in connection with a dispute or claim arising from, related to, or in connection with this Agreement.
 - 13.25.2 <u>Rate of Interest</u>. If the preceding subsection is inapplicable or is determined to be invalid or unenforceable by a court of competent jurisdiction, the annual rate of interest payable by County under this Agreement, whether as prejudgment interest or for any other purpose, will be, to the full extent permissible under applicable law, one-quarter of one percent (0.25%) simple interest (uncompounded).
- 13.26 <u>HIPAA Compliance</u>. County has access to protected health information ("PHI") that is subject to the requirements of 45 C.F.R. Parts 160, 162, and 164 and related regulations. If Broward Health is considered by County to be a covered entity or business associate or is required to comply with the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") or the Health Information Technology for Economic and Clinical Health Act ("HITECH"), Broward Health must fully protect individually identifiable health information as required by HIPAA or HITECH and, if requested by County, must execute a Business Associate Agreement in the form set forth at www.broward.org/Purchasing/Pages/StandardTerms.aspx. The County Administrator is authorized to execute a Business Associate Agreement on behalf of County. Where required, Broward Health must handle and secure the PHI in compliance with HIPAA, HITECH, and related regulations and, if required by HIPAA, HITECH, or other laws, include in its "Notice of Privacy Practices" notice of Broward Health's and County's uses of Client's PHI. The requirement to comply with this provision, HIPAA, and HITECH will survive the expiration or earlier termination of this Agreement. Broward Health must ensure that the requirements of this section are included in all agreements with Subcontractors.
- 13.27 <u>Polystyrene Food Service Articles</u>. Broward Health must not sell or provide for use on County property expanded polystyrene products or food service articles (e.g., Styrofoam), unencapsulated expanded polystyrene products, or single-use plastic straws or stirrers, as set forth in more detail in Section 27.173, Broward County Administrative Code.
- 13.28 <u>Use of County Logo</u>. Except as provided in Section 3.3, Broward Health will not use County's name or logo in marketing or publicity materials without prior written consent from the Contract Administrator.
- 13.29 <u>Incorporation by Reference</u>. Any and all Recital clauses stated above are incorporated in this Agreement by reference. The attached Exhibits, Attachments, Provider Handbook,

and other documents referenced in this Agreement are incorporated and made a part of this Agreement.

13.30 <u>Counterparts and Multiple Originals</u>. This Agreement may be executed in multiple originals, and may be executed in counterparts, whether signed physically or electronically, each of which will be deemed an original, but all of which, taken together, will constitute one and the same agreement.

[Remainder of Page Intentionally Left Blank]

IN WITNESS WHEREOF, the Parties hereto have made and executed this Agreement: BROWARD COUNTY through its BOARD OF COUNTY COMMISSIONERS, signing by and through its Mayor or Vice-Mayor, authorized to execute same by Board action on the <u>12th</u> day of <u>December</u> 2023, and North Broward Hospital District d/b/a Broward Health, signing by and through its Chief Executive Officer, duly authorized to execute same.

<u>COUNTY</u>

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BROWARD COUNTY, by and through its Board of County Commissioners

By: _____

Broward County Administrator, as ex officio Clerk of the Broward County Board of County Commissioners

R//	
Dy.	

Mayor

_____ day of ______, 2023

Approved as to form by Andrew J. Meyers Broward County Attorney 115 South Andrews Avenue, Suite 423 Fort Lauderdale, Florida 33301 Telephone: (954) 357-7600

Karen S. Gordon Gordon	ed by Karen S.).17 12:31:21 -04'00'
Karen S. Gordon	(Date)
Senior Assistant County Attorney	

KSG/bh NBHD-Primary Care-24-CP-HCS-0125-01 08/24/23 #60070

BROWARD HEALTH

North Broward Hospital District d/b/a Broward Health

By: Chief Executive Officer

Alisa Bert, Interim CFO

Print or Type Name

12th day or October , 2023

Exhibit A – Authorized Invoice Signators

Agreement #: 24-CP-HCS-0125-01

The following individuals are authorized to sign monthly invoices and certification statements on behalf of North Broward Hospital District d/b/a Broward Health ("Broward Health"), as required by this Agreement:

Alisa Bert, Interim CFO

and

(Name and Title Typewritten)

(Name and Title Typewritten)

This authorization is conferred upon the individuals listed above in accordance with *(enter the authorizing body, legislation, regulation, code, or equivalent, including the date of such authorization, and provide (but not attach) a copy of supporting documentation, such as Board of Directors' meeting minutes, the authorizing statute, etc.)*:

The Board of commissioners of the North Broward Hospital District.

Appearing below are samples of the authorized signatures.

alisa Bert	10/13/2023		(0)
(Authorized Signature)	(Date)	(Authorized Signature)	(Date)
(Authorized Signature)	(Date)	(Authorized Signature)	(Date)
Witness Signature:		Witness Signature:	
Signat re <u>CEDIEC: 2020486</u>		Signature Jawet Palmer	
Raluca Oaie		Janet Palmer	
(Print or Type) 10/13/2023 Date		(Print or Type) 10/13/2023 Date	

Exhibit B – Certification of Empowerment

Agreement #: 24-CP-HCS-0125-01

Alisa Bert, Interim CFO

(Name and Title)

is duly authorized to sign this Agreement on behalf of North Broward Hospital District d/b/a Broward Health ("Broward Health"), and any amendments hereto between County and Broward Health. The signature of the above-named person in this Agreement on behalf of Broward Health binds Broward Health to the terms and conditions of this Agreement and its amendments.

This authorization is conferred upon the individual listed above in accordance with (enter the authorizing body, legislation, regulation, code, or equivalent, including the date of such authorization, and provide (but not attach) a copy of supporting documentation, such as Board of Directors' meeting minutes, the authorizing statute, etc.):

Appearing below is a sample of the authorized s	signature.
Alisa Bert	
(Authoria Jre)	
10/13/2023	
(Date)	_
Witness Signature:	
DocuSigned by:	
Signature CF COBBC2C	-
NameRaluca Oaie	_
(Print or Type)	
Date10/13/2023	
	_

Exhibit C – Certification of Payments to Subcontractors and Suppliers

Agreement #: 24-CP-HCS-0125-01

The undersigned hereby swears under penalty of perjury that:

- 1. Broward Health has paid all Subcontractors and suppliers all undisputed contract obligations for labor, Services, or materials provided on this project in accordance with the "Compensation" article of this Agreement, except as provided in paragraph 2 below.
- 2. The following Subcontractors and suppliers have not been paid because of disputed contractual obligations; a copy of the notification sent to each, explaining in reasonably specific detail the good cause why payment has not been made, is attached to this form:

Subcontractor's or supplier's name and address	Date of disputed invoice	Amount in dispute

The undersigned is authorized to execute this Certification on behalf of Broward Health.

Dated, 20	Broward Health:
	Ву
	(Signature)
	Bv
	By (Name and Title)
STATE OF)	
COUNTY OF)	
The foregoing instrument was ackn	owledged before me, by means of physical presence
or 🗆 online notarization, this	day of, 20, by
	, who is personally known to me or who has
produced	_ as identification and who did (did not) take an oath.
	NOTARY PUBLIC:
	Signature:
	Print Name:
	State of Florida at Large (Seal)
	My commission expires:

Exhibit D – Outcomes

Broward Health • 24-CP-HCS-0125-01• Primary Care

Program Name	Outcomes	Indicators	Data Source (Where the data used to complete the quarterly report is found, verified, and kept)	Data Collection Method (Who collects data, when, how; special calculation instructions, if needed)
Primary Care Services LN-1500	 Clients receive necessary services because wait time is minimized. 	90% of scheduled clinic Clients are seen and discharged within 120 minutes.	Broward Health's electronic health record ("EHR").	Actual time counted from the point of check-in into the EHR system to the point of release from the physician in EHR.
	2) Clients are satisfied with the Primary Care Services they receive. *	80% of Clients indicate satisfaction with the overall doctor Rating.	Professional Research Consultants ("PRC") using the Clinician and Group Consumer Assessment of Healthcare Providers and Systems ("CGCAHPS").	National Patient Satisfaction Tool using a monthly telephonic survey tabulation is completed for each doctor.
	 Clients receive quality Primary Care Services. ** 	 Cervical Cancer Screening: 62% of female Clients have received one or more Papanicolaou (Pap) tests during the previous three years. 	Medical records of applicable eligible Clients.	Medical record review.
		 Breast Cancer Screening: 56% of female Clients have had a mammogram within the last two years. 		
		 Diabetes Management: 54% of eligible Clients with diabetes have a Hemoglobin A1C level that is less than 8.0%. 		
		4) Controlled High Blood Pressure: 65% of Clients 18-85 years of age diagnosed with hypertension whose blood pressure was adequately controlled during the measurement year based on the following criteria:		
		Clients 18-59 years of age whose blood pressure was <140/90 mm Hg.		

Program Name	Outcomes	Indicators	Data Source (Where the data used to complete the quarterly report is found, verified, and kept)	Data Collection Method (Who collects data, when, how; special calculation instructions, if needed)
		Clients 60-85 years of age, with a diagnosis of diabetes, whose blood pressure was <140/90 mm Hg. Clients 60-85 years of age, without a		
		 diagnosis of diabetes, whose blood pressure was <150/90 mm Hg. 5) Colorectal Cancer Screening: 60% of Clients 50-75 years of age who had 		
		appropriate screening for colorectal cancer with any of the following tests: annual fecal occult blood test; flexible sigmoidoscopy every 5 years; or colonoscopy every 10 years.		
		 Screening for Depression: 45% of Clients are screened for depression and are referred for services as necessary. 		
		7) Chlamydia Screening: 63% of total women between the ages of 16 and 24 who have been identified as sexually active and who had at least one test for chlamydia during the measurement year.		

Broward Health • 24-CP-HCS-0125-01• Primary Care

* Outcome Number 2- The Clinician and Group Consumer Assessment of Healthcare Providers and Systems (CGCAHPS) survey is a standardized tool to measure Client perceptions of care delivered by a provider (e.g., physician, nurse practitioner, physician assistant, etc.) in an office setting.

** Outcome number 3- Indicators 1, 2, 3, 5, measured using 2022 Healthcare Effectiveness Data and Information Set (HEDIS) used by 90% of American Health Plans to measure performance on dimension of care and services.

Exhibit E – Quarterly Demographic and Service Report

Broward Health

Quarter Ending: _____

County Fiscal Year 20_____ Agreement #24-CP-HCS-0125-01

Table 1 - Unduplicated Client Count - Adults and Children

	Male	Female	Total
Children			
Adult			
Total			

Table 2 - Ethnicity and Age of Users – Total

		, Asian/I	<u>г</u> .і	В	lack/	A.A.		Hispan	ic	Ame	erican l	ndian		White	9		Othe	r		Total	s
	М	F	Total	М	F	Total	М	F	Total	Μ	F	Total	Μ	F	Total	М	F	Total	Μ	F	Total
Age																					
0-2																					
3-5																					
6-10																					
11-13																					
14-15																					
16-17																					
18-21																					
22-49																					
50-59																					
60+																					
Total																					

Table 3 - Medical and Dental Service Encounters

Total Encounters	Adults	Children	Total
Medical Service Encounters (without Dental)			
Dental Encounters			
Total			

Exhibit E – Quarterly Demographic and Service Report (cont.)

Table 4 - Other Encounters

Services	No. of Encounters
Nursing	
Social Worker/Case Mgr.	
Nutritionist	
Diagnostics	
Prescriptions	
Total	

Table 5 - Income Status - Pay Percent of Poverty

	No. of Clients
000% - 100%	
101% - 123%	
124% - 167%	
168% - 200%	
201% - 250%	
251% - 300%	
301% - 350%	
351% - 400%	
400% +	
Incomplete documentation	
Total	

Table 6 – Top Ten Diagnoses by ICDM Code-Adults

Rank	Code	Diagnosis	No. of Users	%
1				
2				
3				
4				
5				
		Total		

Table 8 Hospital Discharge and Readmission to North Broward Community Health Services (SBCHS)

	No. of Clients
No. of NBCHS inpatient admissions to Broward Health hospitals?	
No. NBCHS inpatient discharged Clients readmitted to Broward Health hospitals within 30 days of discharge.	
Total	

Table 7 – Top Ten Diagnoses by ICDM Code-Children

Rank	Code	Diagnosis	No. of Users	%
1				
2				
3				
4				
5				
		Total		

Table 9 SBCHS Behavioral/Mental Health Screenings

	No. of Clients
No. of Clients screened for behavioral/mental health services	
No. of Clients receiving referrals for behavioral/mental health services	
Total	

Exhibit F – Required Reports and Submission Dates

Report	Due Date/Frequency	# Copies
Equal Employment Opportunity Policy		1 сору
Americans with Disabilities Act Policy		1 сору
Nondiscrimination Policy, if applicable	Due prior to execution of this	1 сору
Affirmative Action Plan, if applicable	Agreement and upon revision by Broward Health	1 сору
CBE Policy, if applicable	-	1 сору
Certificate of Insurance/Self-insured Verification		1 сору
Continuity of Operations Plan (COOP)	Due upon execution and annually on April 15th	1 сору
Invoice and supporting documentation	15th day of each month (if needed, final reconciled invoice due annually on November 15th) Invoices are either emailed to CPD@broward.org or mailed to: Community Partnerships Division 115 S. Andrews Avenue, Suite A-370 Fort Lauderdale, Florida 33301	1 сору
Primary Care Monthly Client Demographic Report	15th day of the month following the end	
Primary Care Monthly Client Service Report	of a quarter (specifically, January 15,	1 сору
Outcomes Report	April 15, July 15, and October 15)	
Self-insured Verification	Due at time of this Agreement's term extension or renewal via Option Period; submit to Repository	1 сору
Audited Financial Statements	Due within 270 days after the close of	1 сору
State Financial Assistance Reporting Package, if applicable	Broward Health's fiscal year end; submit to Repository and copy to Contract Manager	1 сору
Monitoring and/or Accreditation Reports from other agencies or funding sources	Due within 30 days after receipt	1 сору
Incident Reports	Due upon request and in accordance with the Provider Handbook	1 сору
Organizational Profile	Due upon request – Send directly to First Call for Help of Broward, Inc. d/b/a 2-1-1 Broward	1 сору

Note: Failure to submit the foregoing reports on or before the due date will result in the suspension of any payments due by County to Broward Health.

Attachment I

County Fiscal Year 20____

North Broward Hospital District d/b/a Broward Health

Facilities Utilized by North Broward Hospital District for Primary Care Services

	Tacincies Otinzed by North	Broward Hospic		inary care services		
Complete Location (Street Address, City, Zip) 2011 NW 3rd	Facility Description and Official Building Name (if applicable) (Admin, Clinic, Envn Hlth, etc.) Annie L. Weaver Health	Lease/ Agreement Number Unknown	Type of Agreement (Private Lease thru State or County, other - please define) Lease with	Complete Legal Name of Owner Broward	SQ. Feet 3,000	Employee Count (FTE/OPS/ Contract) 30
Avenue, Pompano Beach, FL 33060	Center		Broward County	County		
5109 Coconut Creek Parkway, Margate, FL 33063	Margate Health Center	NA	Private Lease - limited partnership	Coco Gate Partners, LTD.	5,255	12
601 West Atlantic Blvd., Pompano Beach, FL 33063	rd., Pompano Prenatal		Lease with Broward County	Broward County	4,501	14
3716 W. Oakland Park Blvd., Lauderdale Lakes, FL 33311	Lauderdale Lake Health Center	NA	Private Lease - limited partnership	Market Place Investment, LLC	5,180	14
1111 West Broward Blvd., Fort Lauderdale, FL 33312	Specialty Care Center	NA - facility owned by Broward Health	NA	North Broward Hospital District	17,500	27
1101 West Broward Blvd., Fort Lauderdale, FL 33312	Bernard P. Alicki Health Center	NA - facility owned by Broward Health	NA	North Broward Hospital District	7,000	29
1101 NW 1st Street, Fort Lauderdale, FL 33311	Comprehensive Care Center	NA - facility owned by Broward Health	NA	North Broward Hospital District	9,968	16
1101 NW 1st Street, Fort Lauderdale, FL 33311	Clinica de las Americas	NA - facility owned by Broward Health	NA	North Broward Hospital District	2,183	4
200 NW Seventh Avenue, Fort Lauderdale, FL 33311	Cora E. Braynon Family Health Center	NA - facility owned by Broward Health	NA	North Broward Hospital District	46,531	137
Additional Comments:						

Attachment II County Fiscal Year 2023-2024 North Broward Hospital District d/b/a Broward Health

(Note: Broward Health may use its own generated form that includes the parameters listed below. Form may be submitted electronically)

PRIMARY CARE MONTHLY CLIENT DEMOGRAPHIC REPORT

Date:

Agency Assigned Unique Identifier	Birth Gender (M-Male; F- Female; T- Transgender; U- Unreported)	Current Gender (M-Male; F- Female; Transgender F- M; Transgender M-F; Other)	Date of Birth (mm/dd/yyyy)	Race – White (Y-Yes; N- No; U- Unknown)	Race – Black (Y-Yes; N- No; U- Unknown)	Race – Asian (Y-Yes; N- No; U- Unknown)	Race – NHPC (Y-Yes; N- No; U- Unknown)	Ethnicity (Hispanic/Latino; Non- Hispanic/Latino; Unreported)	Number of People in the Household	% of Federal Poverty Level	Last Eligibility/ Insurance Check Date (mm/dd/yyyy)

Attachment III County Fiscal Year 2023-2024 North Broward Hospital District d/b/a Broward Health

(Note: Broward Health may use its own generated form that includes the parameters listed below. Form may be submitted electronically)

PRIMARY CARE MONTHLY CLIENT SERVICE REPORT

Date:

Agency Assigned Client Unique Identifier	Date of Service	Service Category (MH; Primary Care, Nursing; Oral; Social Work)	Service Name	Service Code (CPT-4; HCPCS; DPT Code)	Rendering Provider	Service Facility Location	Prescription Number (NDC #)	Amount/ Dosage (e.g., 30 pills, 1 tube of cream, etc.)	Total Charge	Unit of Measure (Hour; 15- minutes; 30- minutes; 45- minutes; etc.)	Units of Service

NOTE: Reporting on the data element of 'social work' will be begin at the start of the second quarter or on the date approved by the Contract Administrator.