

EXHIBIT A-3

COMMUNITY BASED ORGANIZATION MASTER CONTRACT **Addendum for Quality Assurance**

Contractor shall be responsible for knowing and implementing the policies contained in Alameda County Behavioral Health Care Services' (BHCS') Quality Assurance (QA) Manual as may be updated from time to time by BHCS. The manual and updates shall be available on the BHCS website, at <http://www.acbhcs.org/providers/QA/QA.htm>. Email communications may be made to notify providers of periodic updates and changes made to the QA Manual. Contractor shall have and maintain a QA Plan that meets the requirements of the BHCS QA Office. This plan shall be available on-site for review by BHCS and include Contractor's policies and procedures on such QA topics as listed below and in the BHCS QA Manual.

I. Updates:

Contractor shall be responsible for informing the BHCS QA Office of any changes to Contractor's contact person and/or lead QA contact person and their contact information including email address to receive notices from the BHCS QA Office. Contractor shall regularly verify consumer's contact information and update BHCS records for purposes of service verification as described in the QA Manual.

II. Credentialing:

Contractor shall be responsible for verifying the credentials and licensing of their staff and employees as contained in BHCS, state and federal requirements. Waivers for certain clinical staff are required in order to bill Medi-Cal and Contractor shall familiarize themselves and comply with the waiver requirements posted in the BHCS QA Manual. BHCS has the right to request Contractor's credential log or records and Contractor's personnel record files to verify Contractor's credentialing process and applicable credentials of staff.

III. Authorization, Utilization Management, Clinical Documentation, and Timeline Standards:

Contractor shall have an internal review and authorization process that is described in its policies and procedures and that ensures that consumers served by Contractor meet, on an ongoing basis, the medical necessity criteria to receive Specialty Mental Health Services. Contractor shall comply with policies related to the Utilization Management Program of BHCS as set forth in the QA Manual and the Clinical Quality Review Team (CQRT) Manual as may be updated from time to time by BHCS. Contractors shall comply with Clinical Documentation and Timeline Standards, Policy and Procedures as set forth in the QA Manual and as may be amended by notice on the BHCS Provider website. Contractor shall have an internal quality review process that ensures that clinical documentation meets federal, state, and BHCS standards. In particular, Contractors shall reference the following tools within the QA Manual: Clinical Record Documentation Standards, CQRT Form/Regulatory Compliance Sheet, and the CQRT Manual. On an annual basis, Contractor's lead QA staff shall attend the following train-the-trainer training provided by BHCS: Clinical Documentation Training, which includes

CQRT Training. On a regular basis, Contractor shall in turn provide similar trainings to its staff.

IV. Notice of Adverse Benefit Determination (NOABD) aka Notice of Action (NOA)

Contractor shall provide beneficiaries with a NOABD under the following circumstances: 1) The denial or limited authorization of a requested service, including determinations based on the type or level of service, requirements for medical necessity, appropriateness, setting, or effectiveness of a covered benefit; 2) the reduction, suspension, or termination of a previously authorized service; 3) the failure of contractor to provide services to consumer per timeliness standards issued by BHCS; and 4) the denial of a beneficiary's request to dispute financial liability, including cost sharing and other beneficiary financial liabilities. The written notice of adverse benefit determination shall meet the requirements of 42 Code of Federal Regulations (CFR) §438.404 and adhere to any BHCS policy on NOABD's.

Contractor shall distribute Medi-Cal Guide to Mental Health Services, aka the Beneficiary Handbook, to each consumer upon initial intake via a DHCS-approved method of distribution to enable clients to understand how to effectively use the mental health services. Contractor shall give the client timely and adequate, written notice of any decision by Contractor to deny service, or to provide a service in an amount, duration, or scope that is less than requested. The written notice of adverse benefit determination shall meet the requirements of 42 CFR §438.404.

V. Other Applicable Policies:

All Contractors/Providers shall comply with all other applicable policies and procedures as set forth in the QA Manual and such amendments as posted on the BHCS Provider website.