





Welcome to the Behavioral Health Recovery Services Onboarding Webinar

November 17, 2022

This opportunity is provided by The Center at Sierra Health Foundation under contract with the California Department of Health Care Services.





at Sierra Health Foundation

The Center brings people, ideas and infrastructure together to create a collective impact, helping communities access proven practices while tapping into their existing resources, knowledge and creativity to identify strategies for healthier communities.

CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES (DHCS)



The Behavioral Health Recovery Services Project is part of the California Department of Health Care Services' Behavioral Health Response and Rescue Project, which aims to increase access to behavioral health care for all Californians.

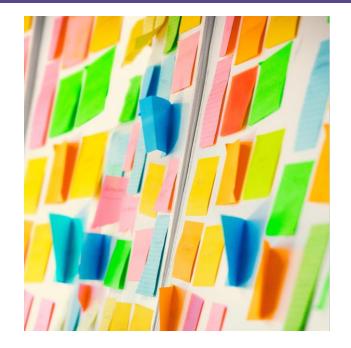
Mission: The Department's mission is to provide Californians with access to affordable, integrated, high-quality health care, including medical, dental, mental health, substance use treatment services and long-term care.

Vision: Our vision is to preserve and improve the overall health and well-being of all Californians.

Core Values: Integrity, Service, Accountability, Innovation

Housekeeping

- These meetings will be recorded; links to the recordings and slides will be made available to participants
- There will be time for questions and active participation during today's meeting
- Please submit questions or comments throughout the workshop via chat or raise your Zoom hand
- If you are experiencing technical difficulties, please chat the host
- We encourage you to turn on your camera throughout the meeting to promote engagement and create a sense of community







Learning and Accessibility Needs

Given the essence of the Learning Community our team will be following this slide template in our future meetings allowing participants to easily recognize the Learning Community materials.

If you have any accessibility needs, please advise by contacting recoveryservices@shfcenter.org and nchavez@healthmanagement.com at the end of today's presentation









WELCOME







Today's Agenda:

- Welcome & Introductions
- The Center's Role
- Why are we Here
- Project Scope of Work and Deliverables
- Contacts and Resources
- Questions and Answers







INTRODUCTIONS







ROLES







The Center at The Sierra Health Foundation (The Center)

- Execute subcontract agreements with Program Services
 Providers (PSPs) identified by DHCS
- Collect program and budget reports from funded partners and submit consolidated reports to CA. Dept. of Health Care Services (DHCS)
- Communicate regularly with DHCS
- Participate in HEAR Us Program meetings

California Department of Health Care Services (DHCS)

- Federal funding awardee from SAMSHA
- Policy development and implementation

Health Management Associates Community Strategies (HMACS)

- Monthly Check-In Meetings
- Project Support and Project Resources
- Data collection processes
- Processing of data submissions
- Development of PowerPoint Presentations for Engagement

Your Team

The Center



Nilda Valmores Senior Program Officer nvalmores@sierrahe Development alth.org



Matt Cervantes Managing Director, **Healthy Youth** mcervantes@sierrah



Matt Curtis Managing Director, Health **Equity and Access** mcurtiss@sierrahealth.org



Danielle Claybon Program Associate dclaybon@sierrahealth.org



Rami Arafah **Evaluation Officer** rarafah@sierraheal th.org

HMA



Leticia Reyes-Nash **Principal** Ireyesnash@health management.com



John O'Connor Managing Director joconnor@healthma nagement.com



Nayely Chavez Senior Consultant nchavez@healthm anagement.com



Michelle Ford Principal mford@healthmana gement.com



Laura Collins Senior Consultant lcollins@healthmanag ement.com





Funded Partners

- CA Association of Alcohol and Drug Program Executives, Inc.
- Cal Voices
- California Black Women's Health Project
- California Consortium of Addiction Programs and Professionals
- California Council of Community Mental Health Agencies (DBA: California Council of Community Behavioral Health Agencies)
- Hathaway-Sycamores Child and Family Services (DBA Sycamores)
- NAMI California
- Peer Voices of Orange County Inc.
- The California Association of DUI Treatment Programs
- The Happier Life Project
- United Parents
- West Fresno Health Care Coalition (dba: West Fresno Family Resource Center)

Community Building Activity

Introduce yourself and share one word that describes how you are feeling today.

Hello, my name is....

Name

Pronouns

Role and Tenure

Share one word about how you are feeling today.





WHY ARE WE HERE?







Behavioral Health Recovery Services HEAR US Programmatic Components







CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES (DHCS)







Project Purpose

The overarching goal of the project is to increase the number and quality of culturally responsive behavioral health recovery services and programs statewide that are tailored to local needs.

Project period: November 2022 – July 2023







The Center's responsibilities:

- Execute grant agreements with Program Services Providers (PSPs) identified by DHCS
- Collect program and budget reports from subgrantees and submit consolidated reports to CA. Dept. of Health Care Services (DHCS)
- Convene funded partners and other organizations identified by DHCS quarterly to provide technical assistance on administrative and program requirements and delivery of services
- Communicate regularly with DHCS
- Participate in HEAR Us Program meetings
- Administer any additional funds, partnering with DHCS to identify subgrantees



HMA Community Strategies

Who we are

To address the social needs that affect public healthcare, HMA formed HMA Community Strategies® (HMACS) in 2014. The HMACS team works directly with communities to identify needs and organize around them. We also work with community-based organizations, policymakers, and healthcare payers and entities to identify and implement solutions.

What we do

HMACS helps communities tackle problems that impact health outside the walls of hospital, provider and payer offices, such as inadequate housing and food access, health equity and disparities, violence, discrimination, unemployment and underemployment. Because good health is more than just good healthcare — it's a process that begins at the roots of our communities with basics like healthy food, clean air, safe housing and equitable treatment.



Project Purpose:

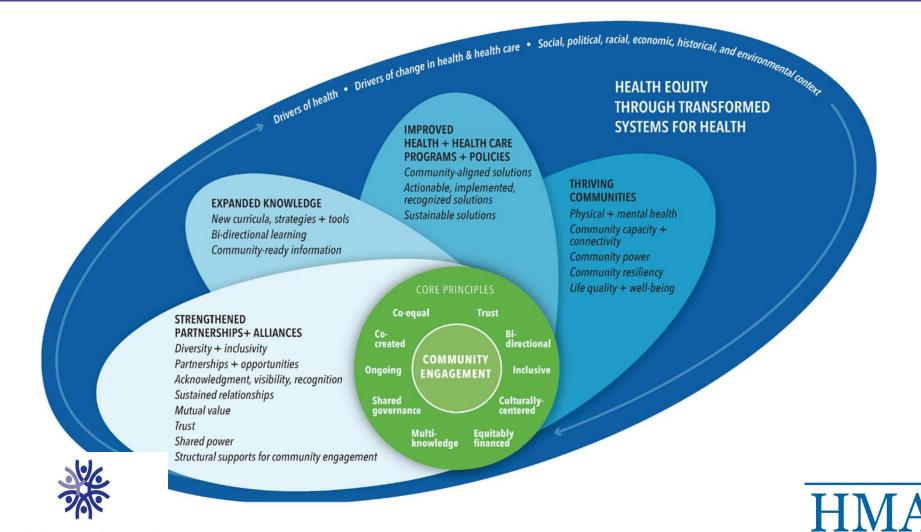
To implement a **community-driven** process that will develop "standards of care" that build on the SAMSHA guidance for recovery services and address gaps in services and supports. Of particular interest are peer-led programming and consistency with a focus on higher quality of care for those engaged in recovery services, with a focus on traditionally underserved populations including Black, Indigenous, People of Color (BIPOC) and the 2S/LGBTQ+







Health Equity Model:



HEALTH MANAGEMENT ASSOCIATES

at Sierra Health Foundation

PRINCIPLES FOR EQUITY- CENTERED DESIGN

Disaggregate data to understand the unique experiences and outcomes for subpopulations

Design, implement, and continuously improve policies and programs that recognize the unique experiences and outcomes of **subpopulations** <u>and</u> **support health for all people** (CMS)

Include people with lived experiences when designing and evaluating solutions (<u>Center for Health Care Strategies</u>)

Create **inclusive and equitable meeting** processes and environments (<u>Harvard Office of Diversity</u>, <u>Inclusion & Belonging</u>)

Shared governance and decision making to develop recommendations

Center approach development from an antiracist perspective (NEJM Catalyst)

Share data across governmental agencies and community-based organizations is critical for addressing complex health challenges involving multiple sectors (<u>Center for Health Care Strategies</u>)





HEAR US GRANT PROJECT OVERVIEW

The **HEAR US** Phase 1, November 15, 2022 – July 31, 2023, funding activities up to support the following:

☐ Participation of specialized behavioral health-focused staff (i.e. peer providers, therapists, wellness and recovery coaches, etc.) from the funded organizations in the standards of care development process (with monthly engagement w/The Center/HMA.

Examples of Funded Activities:

- Personnel for participating in monthly sessions
- Technology and technology access to join development sessions (e.g., laptops, webcams, zoom account)
- Travel for possible in-person sessions





HEAR US GRANT PROJECT OVERVIEW (CONTINUED)

□ Organizing, facilitating, and documenting constituency-focused (i.e., clients, consumers, family members, residents) generative listening sessions and/or focus groups to inform the development of the standards of care (at least three sessions over the 10-month project term)

Examples of allowable activities include, but are not limited to:

- Personnel for planning, implementing, and reporting on listening sessions and/or focus groups
- Meeting space
- Food
- Technology and technology access (e.g., laptops, webcams, zoom account)
- Non-cash incentives for volunteer participation*
- Travel for staff and volunteers for possible in-person sessions
- Educational materials development and distribution
- Outreach and awareness materials development and distribution





HEAR US GRANT PROJECT OVERVIEW (CONTINUED)

HEAR US Learning Community

☐ Training and engagement of funded partners' constituency (i.e., clients, consumers, family members, residents) to co-lead, facilitate, and participate in standards of care development process focus groups and/or listening session (at least monthly engagement)

Examples of allowable activities include, but are not limited to:

- Personnel for Training Volunteer curriculum development
- Non-case incentives for volunteer participation*
- Educational materials development and distribution
- Facilitation services
- Translation services





HEAR US Learning Community

Process Overview





"STANDARDS OF CARE" DEVELOPMENT PROCESS OVERVIEW

Nov 2022 Dec Jan 2023 Feb Mar May Apr June Phase 1: Defining the Phase 2: Informing the Phase 3: Refining the Framework Phase 4: Finalizing the Framework (2 months) Framework (2 months) Framework (2 months) (2 months) LC Meeting 6 Project Launch Meeting 1 Meeting 2 Meeting 3 Meeting 4 Meeting 5 Meeting 7 (Virtual) (Virtual) (In-Person) (Virtual) (Virtual) (Virtual) (Virtual) (In-Person) Identification of content gaps Addressing content gaps Review of past work and context setting Presentation of content · Cross sharing data findings from local Finalize data findings Onboard LC Participants Data collection processes and best Learn about LC Participants practices (e.g. stakeholder engagement, feedback sessions Finalize alignments and development of · Facilitating alignment and development themes to help inform framework Define health equity facilitation, and outreach strategies) of themes across all of the groups Review areas of dissention an Define parameters of framework and Finalizing and gaining agreement on the disagreement -to work on consensus standards and common language building and addressing areas of conflict final submitted unified group of Collection and analysis of resources recommendations for standards · Sharing and alignment exercises LC Participant LC Participant LC Participant LC Participant Check-In #1 Check-In #2 Check-In #3 Check-In #4 with HEAR Us team with HEAR Us team with HEAR Us team with HEAR Us team LC Participant LC Participant LC Participant Stakeholder Stakeholder Stakeholder Engagement Engagement Engagement Cvcle #1 Cycle #2 Cvcle #3 Data Submission for 3rd Workplan/Stakeholder Data Submission for 2nd • Participation in Kick-Off (1) partner convening (1) Engagement Plan (1) partner convening (1) • Participation in LC Virtual Participation in LC In-Person Data Submission for 1st partner Participation in LC Virtual Meeting (1) Meeting (1) convening (1) Meeting (2) Participation in monthly check- Participation in LC In-person Participation in LC Virtual · Participation in monthly Closing Meeting (1) in (1) Meetings (2) check-in (2) Participation in check-in Participation in monthly check-

Learning
Community
Meetings
Will include prework, work during
meetings, and
collection of postmeeting feedback.

Participant Support

Intermittent 1:1 custom support and progress check ins.

Participant Led Stakeholder Engagement

Activities may include Key Informant Interviews, Focus Groups, Listening Sessions.

Standard

Development
Deliverables will
include drafts
informed by the
work being doing
by participant
activities above.

"STANDARDS OF CARE" DEVELOPMENT PROCESS OVERVIEW

HEAR US Learning Community

April Nov 2022 Dec Jan 2023 Feb March May June Phase 2: Phase 4: Phase 1: Defining the Phase 3: Refining Informing **Finalizing** Framework (2 the Framework (2 the the months) months) Framework Framework (2 months) (2 months)





HEAR US Learning Community

Deliverables





DELIVERABLES

April Nov 2022 Dec Jan 2023 Feb March May June Phase 2: Phase 4: Phase 1: Defining the Informing Phase 3: Refining **Finalizing** Framework (2 the Framework (2 the the months) Framework months) Framework (2 months) (2 months) Workplan/Stake holder **Data Submission Data Submission** Engagement Participation in for 2nd partner Plan (1) for 2nd partner Kick-Off (1) convening (1) **Data Submission** convening (1) Participation in LC Participation in for 1st partner Participation in **In-Person Meeting** LC Virtual convening (1) LC Virtual (1) Meeting (2) Participation in Meeting (2) Participation in Participation in LC Virtual Participation in monthly check-in monthly check-in Meetings (2) monthly check-in (1)Participation in (2)(2)monthly check-in

(2)



Roles





Subgrantee Expectations

- Agreements
- Timeline
- Payments
- Reports
- Budget Modifications



Insurance Components



Insurance Requirements

- Insurance compliance documents must be submitted to The Center within
 30 days of executing your agreement.
- Insurance must be maintained through the duration of the project and renewed if necessary.
- Contact <u>vestall@sierrahealth.org</u> ASAP for assistance if your organization is unable to obtain the required insurance.
- Important: Additional insureds must be written exactly as stated in your contract agreement. Payments will not be released until accurate and complete insurance requirements are received.
- Endorsements requested by the State must be physically attached to all requested certificates of insurance and not substituted by referring to such coverage on the certificate of insurance.

Insurance Evidence Requirements

Commercial General Liability

- Each Occurrence must be greater than or equal to \$1,000,000
 - Coverage Trigger: Occurrence must be present
 - Insurance is written on an occurrence basis using ISO form CG 0001 or equivalent
- General Aggregate must be greater than or equal to \$2,000,000
- Products/Completed Operations Aggregate must be greater than or equal to \$2,000,000
- Personal and Advertising Injury must be present
- Primary and Non-Contributory Endorsement must be present
- Additional Insured Endorsement must be present, naming The Center, Sierra Health Foundation, DHCS, The State of California, their respective officers, directors, agents, representatives, constituent entities, affiliates, volunteers, of subsidiaries, and employees
 - With Completed Operations language
 - Using a combination of ISO forms CG2010 10/04 and CG 2037 10/0.

Insurance Evidence Requirements

Automobile Liability

- Combined Single Limit (each accident) must be greater than or equal to \$1,000,000
- Coverage applies to Owned, Hired and Non-owned Autos
- Additional Insured Endorsement must be present naming The Center, Sierra Health Foundation and The State of California

Workers' Compensation and Employer's Liability

- Statutory Limits must be present
- Employer's Liability Each Accident must be greater than or equal to \$1,000,000
- Employer's Liability Disease each employee must be greater than or equal to \$1,000,000
- Employer's Liability Disease policy limit must be greater than or equal to \$1,000,000
- Waiver of Subrogation Endorsement must be present

Professional Liability

- Each Claim must be greater than or equal to \$1,000,000
- Aggregate must be greater than or equal to \$2,000,000



Insurance Evidence Requirements

Improper Sexual Contact and Physical Abuse Insurance

Coverage must be greater than or equal to \$1,000,000

Cyber Liability

Claims made Coverage must be greater than or equal to \$1,000,000

Additional Requirements

- Certificate Holder must read: Sierra Health Foundation, 1321 Garden Highway Sacramento, CA 95833
- A.M. Best rating of at least A-:VI
- Description of Operations must read: The Center, Sierra Health Foundation, The State of California, their respective officers, directors, agents, representatives, constituent entities, affiliates, volunteers, officials, parents, subsidiaries, and employees shall be added as Insureds ("additional Insureds") under each commercial general liability and automobile insurance policy. Agreement #_____ must be present.

Certificate of Liability Insurance (aka: COI)

CERTIFICATE OF LIABILITY					INSURA	NCE	DATE (N	HWD0(YYYY)	
THIS CERTIFICATE IS ISSUE CERTIFICATE DOES NOT AF BELOW. THIS CERTIFICATE REPRESENTATIVE OR PRODU IMPORTANT: If the certificate terms and conditions of the p	FFIRMATIVE E OF INSU UCER, AND holder is a	RAN THI	OR NEGATIVELY AMERICE DOES NOT CONSTI E CERTIFICATE HOLDER DDITIONAL INSURED, the	ND, EXTEND OF ITUTE A CONTE L. e policy(ies) mu:	R ALTER THE CO RACT BETWEEN	THE ISSUING INSURE SUBROGATION IS WA	BY THE R(S), AU	POLICIES ITHORIZED	
				CONTACT					
				NAME: PHONE AAC, NO. EXTE		FAX (AJC, No.)			
C /		l E		AL NO. EXTE		LIAIC, Not			
SAMPLE				INSURER(S) AFFORDING COVERAGE				NAIC #	
				NSURER A :					
			NSURER B :			1			
				INSURER C :	INSURER C :				
				INSURER D:					
			INSURER E :						
			INSURER F:						
		OVERAGES CERTIFICATE NUMBER:			REVISION NUMBER:				
THIS IS TO CERTIFY THAT THE INDICATED. NOTWITHSTANDING CERTIFICATE MAY BE ISSUED EXCLUSIONS AND CONDITIONS	POLICIES OF G ANY REQ OR MAY PE OF SUCH PO	OF IN	SURANCE LISTED BELOW EMENT, TERM OR CONDITI IN, THE INSURANCE AFFO IES. LIMITS SHOWN MAY HA	ORDED BY THE PAVE BEEN REDUCT	JED TO THE INSUR TRACT OR OTHER OLICIES DESCRIBE	ED NAMED ABOVE FOR DOCUMENT WITH RESP ED HEREIN IS SUBJECT	TO ALL 1	WHICH THIS	
THIS IS TO CERTIFY THAT THE INDICATED. NOTWITHSTANDIN CERTIFICATE MAY BE ISSUED EXCLUSIONS AND CONDITIONS OF TYPE OF INSURANCE GENERAL LIABILITY.	POLICIES OF G ANY REQ OR MAY PE OF SUCH PO	OF IN	SURANCE LISTED BELOW EMENT, TERM OR CONDITI IN, THE INSURANCE AFFO IES. LIMITS SHOWN MAY HA	ORDED BY THE PAVE BEEN REDUCT	JED TO THE INSUR TRACT OR OTHER OLICIES DESCRIBE ED BY PAID CLAIMS	ED NAMED ABOVE FOR DOCUMENT WITH RESP TO HEREIN IS SUBJECT	TO ALL T	WHICH THIS	
THIS IS TO CERTIFY THAT THE INDICATED. NOTWITHSTANDINI CERTIFICATE MAY BE ISSUED. EXCLUSIONS AND CONDITIONS (IN INDICATE OF INSURANCE GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY	POLICIES OF ANY REQUEST OF SUCH POLICIES	OF IN	SURANCE LISTED BELOW EMENT, TERM OR CONDITI IN, THE INSURANCE AFFO IES. LIMITS SHOWN MAY HA	ORDED BY THE PAVE BEEN REDUCT	JED TO THE INSUR TRACT OR OTHER OLICIES DESCRIBE ED BY PAID CLAIMS	TED NAMED ABOVE FOR DOCUMENT WITH RESP TO HEREIN IS SUBJECT LIMIT FOR THE PROPERTY OF THE PROP	TO ALL T	WHICH THIS	
THIS IS TO CERTIFY THAT THE INDICATED. NOTWITHSTANDINI CERTIFICATE MAY BE ISSUED. EXCLUSIONS AND CONDITIONS OF EXCLUSIONS AND CONDITIONS GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY	POLICIES OF G ANY REQ OR MAY PE OF SUCH PO	OF IN	SURANCE LISTED BELOW EMENT, TERM OR CONDITI IN, THE INSURANCE AFFO IES. LIMITS SHOWN MAY HA	ORDED BY THE PAVE BEEN REDUCT	JED TO THE INSUR TRACT OR OTHER OLICIES DESCRIBE ED BY PAID CLAIMS	ED NAMED ABOVE FOR DOCUMENT WITH RESP TO HEREIN IS SUBJECT LIMITED FOR THE DAY OF THE DA	TO ALL T	WHICH THIS	
THIS IS TO CERTIFY THAT THE INDICATED. NOTWITHSTANDINI CERTIFICATE MAY BE ISSUED. EXCLUSIONS AND CONDITIONS OF EXCLUSIONS AND CONDITIONS GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY	POLICIES OF ANY REQUEST OF SUCH POLICIES	OF IN	SURANCE LISTED BELOW EMENT, TERM OR CONDITI IN, THE INSURANCE AFFO IES. LIMITS SHOWN MAY HA	ORDED BY THE PAVE BEEN REDUCT	JED TO THE INSUR TRACT OR OTHER OLICIES DESCRIBE ED BY PAID CLAIMS	ED NAMEO ABOVE FOR DOCUMENT WITH RESPONDED HEREIN IS SUBJECT. LIMITED TO THE PROPERTY OF T	TO ALL T	WHICH THIS	
THIS IS TO CERTIFY THAT THE INDICATED. NOTWITHSTANDIN CERTIFICATE MAY BE ISSUED. EXCLUSIONS AND CONDITIONS TYPE OF INSURANCE GENERAL LIABILITY COMMERCIAL GENERAL LIABIL CLAIMS-MADE 000	POLICIES C G ANY REQ OR MAY PE OF SUCH PC	OF IN	SURANCE LISTED BELOW EMENT, TERM OR CONDITI IN, THE INSURANCE AFFO IES. LIMITS SHOWN MAY HA	ORDED BY THE PAVE BEEN REDUCT	JED TO THE INSUR TRACT OR OTHER OLICIES DESCRIBE ED BY PAID CLAIMS	ED NAMEO ABOVE FOR DOCUMENT WITH RESPECT HEREIN IS SUBJECT. LIMITED AND ASSOCIATED SUBJECT OF PROPERTY TO PROPERTY TO PROPERTY OF PROPERTY OF PROPERTY AS A POP PROJECT OF PROPERTY AS A POP PROJECT OF PROPERTY AS A POP PROJECT OF P	TO ALL 1	WHICH THIS	
THIS IS TO CERTIFY THAT THE INDICATED. NOTWITHSTANDING CERTIFICATE MAY BE ISSUED. EXCLUSIONS AND CONDITIONS. TYPE OF INSURANCE GENERAL LUABILITY COMMERCIAL GENERAL LUABIL COMMERCIAL GENERAL LUABILITY CONTROL OF THE COMMERCIAL COMMERCIAL GENERAL LUABILITY GENT. AGGREGATE LUMIT APPLIES	POLICIES C G ANY REQ OR MAY PE OF SUCH PC	OF IN	SURANCE LISTED BELOW EMENT, TERM OR CONDITI IN, THE INSURANCE AFFO IES. LIMITS SHOWN MAY HA	ORDED BY THE PAVE BEEN REDUCT	JED TO THE INSUR TRACT OR OTHER OLICIES DESCRIBE ED BY PAID CLAIMS	ED NAMEO ABOVE FOR DOCUMENT WITH RESPONDED HEREIN IS SUBJECT. LIMITED TO THE PROPERTY OF T	TO ALL 1	WHICH THIS	
THIS IS TO CERTIFY THAT THE INDICATED. NOTWITHSTANDINI CERTIFICATE MAY BE ISSUED I EXCLUSIONS AND CONDITIONS OF GENERAL LIABILITY COMMERCIAL GENERAL LIABIL CLAIMS-MADE GOYL AGGREGATE LIMIT APPLIES	POLICIES C G ANY REQ OR MAY PO OF SUCH PC AL IN	OF IN	SURANCE LISTED BELOW EMENT, TERM OR CONDITI IN, THE INSURANCE AFFO IES. LIMITS SHOWN MAY HA	ORDED BY THE PAVE BEEN REDUCT	JED TO THE INSUR TRACT OR OTHER OLICIES DESCRIBE ED BY PAID CLAIMS	ED NAMEO ABOVE FOR DOCUMENT WITH RESPECT HEREIN IS SUBJECT. LIMITED TO RENTED PROPERTY TO RENTED PROPERTY (Fa occurrence) MED EXP (Any one person) PERSONAL & ADV RUJERY GENERAL AGGREGATE PRODUCTS - COMPOP AGG	TO ALL T	WHICH THIS	
THIS IS TO CERTIFY THAT THE INDICATED. NOTWITHSTANDINI CERTIFICATE MAY BE ISSUED I EXCLUSIONS AND CONDITIONS (THE TOP TO THE TOP THE	POLICIES C G ANY REQ OR MAY PE OF SUCH PC INT INT INT INT INT INT INT INT INT INT	OF IN	SURANCE LISTED BELOW EMENT, TERM OR CONDITI IN, THE INSURANCE AFFO IES. LIMITS SHOWN MAY HA	ORDED BY THE PAVE BEEN REDUCT	JED TO THE INSUR TRACT OR OTHER OLICIES DESCRIBE ED BY PAID CLAIMS	ED NAMEO ABOVE FOR DOCUMENT WITH RESPECT HEREIN IS SUBJECT. LIMITED AND ASSOCIATED SUBJECT OF PROPERTY TO PROPERTY TO PROPERTY OF PROPERTY OF PROPERTY AS A POP PROJECT OF PROPERTY AS A POP PROJECT OF PROPERTY AS A POP PROJECT OF P	TO ALL T	WHICH THIS	
THIS IS TO CERTIFY THAT THE INDICATED, NOTWITHSTANDIN CERTIFICATE MAY BE ISSUED EXCLUSIONS AND CONDITIONS (TYPE OF INSURANCE GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY ANY AUTO ALL OWNED ATTOMOBILE LIABILITY ANY AUTO ALL OWNED ATTOMOBILE AT	POLICIES C G ANY REQ OR MAY PE OF SUCH PC IN	OF IN	SURANCE LISTED BELOW EMENT, TERM OR CONDITI IN, THE INSURANCE AFFO IES. LIMITS SHOWN MAY HA	ORDED BY THE PAVE BEEN REDUCT	JED TO THE INSUR TRACT OR OTHER OLICIES DESCRIBE ED BY PAID CLAIMS	ED NAMED ABOVE FOR DOCUMENT WITH RESPONDED HEREIN IS SUBJECT LIMITED AND ASSOCIATION OF THE PROPERTY OF THE P	ECT TO ALL I	WHICH THIS	
THIS IS TO CERTIFY THAT THE INDICATED, NOTWITHSTANDING CERTIFICATE MAY BE ISSUED EXCLUSIONS AND CONDITIONS (TYPE OF HISURANCE GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY ANY AUTO ALL OWNED ATTOMOBILE LIABILITY ANY AUTO ALL OWNED ATTOMOBILE LIABILITY ANY AUTO ALL OWNED ATTOMOBILE ATTOMOB	POLICIES C G ANY REQ OR MAY PE OF SUCH PC INTY COUR PER: LOC	OF IN	SURANCE LISTED BELOW EMENT, TERM OR CONDITI IN, THE INSURANCE AFFO IES. LIMITS SHOWN MAY HA	ORDED BY THE PAVE BEEN REDUCT	JED TO THE INSUR TRACT OR OTHER OLICIES DESCRIBE ED BY PAID CLAIMS	ED NAMED ABOVE FOR DOCUMENT WITH RESP DOCUMENT WITH RESP DOCUMENT WITH RESP CASH OF THE PROPERTY OF THE PROPER	ECT TO ALL 1 TS S S S S S S S S S S S S S S S S S S	WHICH THIS	
THIS IS TO CERTIFY THAT THE INDICATED. NOTWITHSTANDIN CERTIFICATE MAY BE ISSUED. EXCLUSIONS AND CONDITIONS OF TYPE OF INSURANCE CENERAL LIABILITY COMMERCIAL GENERAL LIABILITY ANY AUTO ALL OWNED AUTOS HIRED AUTOS HIRED AUTOS HIRED AUTOS	POLICIES C G ANY REG OR MAY PR OF SUCH PC IN IN I	OF IN	SURANCE LISTED BELOW EMENT, TERM OR CONDITI IN, THE INSURANCE AFFO IES. LIMITS SHOWN MAY HA	ORDED BY THE PAVE BEEN REDUCT	JED TO THE INSUR TRACT OR OTHER OLICIES DESCRIBE ED BY PAID CLAIMS	ED NAMEO ABOVE FOR DOLUMENT WITH RESPECT HEREIN IS SUBJECT. LIMITED HEREIN IS SUBJECT. EACH OCCUBRENCE DANAGE TO RENTED PREMISES (Ea occurence) MED EXP (Any one person) PERSONAL & ADV RUJERY GENERAL AGGREGATE PRODUCTS - COMPADE AGG COMMENCE SPRIGLE LIMIT (EA accident) BOOLY BUJURY (For person)	ECT TO ALL 1 75 5 5 5 5 5 5 5 5 5 5 5 5	WHICH THIS	
THIS IS TO CERTIFY THAT THE INDICATED. NOTWITHSTANDING CERTIFICATE MAY BE ISSUED. EXCLUSIONS AND CONDITIONS TYPE OF INSURANCE GENERAL LIABILITY COMMERCIAL GENERAL LIABIL COMMERCIAL GENERAL LIABILITY ANY AUTO ALL QUINED ANTONDBUE LIABILITY ANY AUTO ANTONDBUE LIABILITY ANY AUTO ALL QUINED AUTOS UMBRELLA LIAB OCI UMBRELLA LIAB OCI OTHERED AUTOS OCITICATED OCITICATED	POLICIES C G ANY REG OR MAY PE OF SUCH PC M M M M M M M M M M M M M M M M M M M	OF IN	SURANCE LISTED BELOW EMENT, TERM OR CONDITI IN, THE INSURANCE AFFO IES. LIMITS SHOWN MAY HA	ORDED BY THE PAVE BEEN REDUCT	JED TO THE INSUR TRACT OR OTHER OLICIES DESCRIBE ED BY PAID CLAIMS	ED NAMEO ASSIVE FOR DOCUMENT WITH RESPONDED HEREIN IS SUBJECT. LIMITED HEREIN IS SUBJECT. LACH OCCURSENCE DANAGE TO TRENTED PREMISSE (En SCELIMOND). MED EXP (Any one person) PERSONAL A ADV MURRY GENERAL AGGREGATE PRODUCTS - COMPNOP AGG. COMBRILD SIPIGLE LIMIT (En accident) BODIL Y BUJURY (Per person) BODIL Y BUJURY (PER SON) BUJURY (PERSON)	ECT TO ALL 1 TS S S S S S S S S S S S S S S S S S S	WHICH THIS	
THIS IS TO CERTIFY THAT THE INDICATED. NOTWITHSTANDIN CERTIFICATE MAY BE ISSUED. EXCLUSIONS AND CONDITIONS (TYPE OF INSURANCE GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY CONTA AGGREGATE LIMIT APPLIES POLICY SECT L AUTOMOBILE LIABILITY ALL OWNED AUTOS HIRED AUTOS UMBRELLA LIAB CLA UMBRELLA LIAB CLA EXCESS LIAB CLA	POLICIES C G ANY REG OR MAY PR OF SUCH PC IN IN I	OF IN	SURANCE LISTED BELOW EMENT, TERM OR CONDITI IN, THE INSURANCE AFFO IES. LIMITS SHOWN MAY HA	ORDED BY THE PAVE BEEN REDUCT	JED TO THE INSUR TRACT OR OTHER OLICIES DESCRIBE ED BY PAID CLAIMS	ED NAMEO ABOVE FOR DOLUMENT WITH RESPECT HEREIN IS SUBJECT. LIMITED HEREIN IS SUBJECT. EACH OCCUBRENCE DANAGE TO RENTED PREMISES (Ea occurence) MED EXP (Any one person) PERSONAL & ADV RUJERY GENERAL AGGREGATE PRODUCTS - COMPADE AGG COMMENCE SPRIGLE LIMIT (EA accident) BOOLY BUJURY (For person)	ECT TO ALL 1 TS S S S S S S S S S S S S S S S S S S	WHICH THIS	
THIS IS TO CERTIFY THAT THE INDICATED. NOTWITHSTANDIN CERTIFICATE MAY BE ISSUED. EXCLUSIONS AND CONDITIONS OF TYPE OF INSURANCE CENERAL LIABILITY COMMERCIAL GENERAL LIABILITY ANY AUTO ALLOWRED AUTOS HIRRED AUTOS UMBRELLA LIAB UMBRELLA LIAB UMBRELLA LIAB UMBRELLA LIAB UMBRELLA LIAB UMBRELLA LIAB UCL DEED RETENTIONS	POLICIES C G ANY REG OR MAY PE OF SUCH PC M M M M M M M M M M M M M M M M M M M	OF IN	SURANCE LISTED BELOW EMENT, TERM OR CONDITI IN, THE INSURANCE AFFO IES. LIMITS SHOWN MAY HA	ORDED BY THE PAVE BEEN REDUCT	JED TO THE INSUR TRACT OR OTHER OLICIES DESCRIBE ED BY PAID CLAIMS	ED NAMEO ABOVE FOR DOLUMENT WITH RESPECT HEREIN IS SUBJECT. LIMITED HEREIN IS SUBJECT. EACH OCCURRENCE DANAGE TO RENTED PREMISS (Ea OCCURENCE) MED EXP (Any one person) PERSONAL & ADV RUJERY GENERAL AGGREGATE PRODUCTS - COMPADE AGG COMBINED SINGLE LIMIT (Ea ACCIDENT PRODUCTS - COMPADE AGG COMBINED SINGLE LIMIT (EA ACCIDENT PRODUCTS - COMPADE AGG COMBINED SINGLE LIMIT (EA ACCIDENT PRODUCTS - COMPADE AGG COMBINED SINGLE LIMIT (EA ACCIDENT PRODUCTS - COMPADE AGG COMBINED SINGLE LIMIT (EA ACCIDENT PRODUCTS - COMPADE AGG COMBINED SINGLE LIMIT (EA ACCIDENT PRODUCTS - COMPADE AGG COMBINED SINGLE LIMIT (EA ACCIDENT PRODUCTS - COMPADE AGG COMBINED SINGLE LIMIT (EA ACCIDENT PRODUCTS - COMPADE AGG COMBINED SINGLE LIMIT (EA ACCIDENT PRODUCTS - COMPADE AGG COMBINED SINGLE LIMIT (EA ACCIDENT PRODUCTS - COMPADE AGG COMPADE A	ECT TO ALL 1 75 3 3 5 5 5 5 5 5 5 5 5 5 5	WHICH THIS	
THIS IS TO CERTIFY THAT THE INDICATED. NOTWITHSTANDIN CERTIFICATE MAY BE ISSUED. EXCLUSIONS AND CONDITIONS TO TYPE OF INSURANCE CENERAL LIABILITY COMMERCIAL GENERAL LIABIL COMMERCIAL GENERAL LIABILITY ANY AUTO ALTOMOBLE LIABILITY ANY AUTO ALTOMOBLE LIABILITY ANY AUTO AUTOS UMBRELLA LIAB DED DETENTIONS WORKERS COMPENSATION AND EMPLOYERS LIABILITY WORKERS COMPENSATION AND EMPLOYERS LIABILITY WORKERS COMPENSATION AND EMPLOYERS LIABILITY	POLICIES C G ANY REO OR MAY PE OF SUCH PC M M LITY LITY LOCA PER: LOC SULED SWMED SWMED SWMED SWMED	OF IN	SURANCE LISTED BELOW EMENT, TERM OR CONDITI IN, THE INSURANCE AFFO IES. LIMITS SHOWN MAY HA	ORDED BY THE PAVE BEEN REDUCT	JED TO THE INSUR TRACT OR OTHER OLICIES DESCRIBE ED BY PAID CLAIMS	ED NAMEO ABOVE FOR DOLUMENT WITH RESPECT HEREIN IS SUBJECT. LIMITED HEREIN IS SUBJECT. LIMITED HEREIN IS SUBJECT. EACH OCCUBRENCE BANAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) BODILY BAULTY (Per person) BODILY BAULTY (Person) BODILY BAULTY (P	ECT TO ALL 1 75 3 3 3 3 5 5 5 5 5 5 5 5 5	WHICH THIS	
THIS IS TO CERTIFY THAT THE INDICATED, NOTWITHSTANDING CERTIFICATE MAY BE ISSUED. EXCLUSIONS AND CONDITIONS (TYPE OF INSURANCE GENERAL LIABILITY COMMERCIAL GENERAL LIABIL COMMERCIAL GENERAL LIABILITY ALL OWNED AUTOS AUTOS HIRED AUTOS WORKERS LIABILITY AUTOS	POLICIES OF GANY REG OF SUCH POPER OF S	OF IN	SURANCE LISTED BELOW EMENT, TERM OR CONDITI IN, THE INSURANCE AFFO IES. LIMITS SHOWN MAY HA	ORDED BY THE PAVE BEEN REDUCT	JED TO THE INSUR TRACT OR OTHER OLICIES DESCRIBE ED BY PAID CLAIMS	ED NAMEO ABDIVE FOR DOCUMENT WITH RESPONDED HEREIN IS SUBJECT LIMIT EACH OCCURRENCE DAMAGE TO RENDED PREMISSES (En occurrence) PREMISSES (En occurrence) PERSONAL & ADV ROURY GENERAL AGGREGATE PRODUCTS - COMPNOP AGG COMBILED SPRIGE LIMIT ES SOCIETATION (Per subidere) BOOLLY BUURY (PER subidere) BROFERTY DAMAGE ELL CACHA ACCIDENT ELL ESCHA ACCIDENT	ECT TO ALL 1 75 5 5 5 5 5 5 5 5 5 5 5 5	WHICH THIS	
THIS IS TO CERTIFY THAT THE INDICATED, NOTWITHSTANDIN CERTIFICATE MAY BE ISSUED EXCLUSIONS AND CONDITIONS (TYPE OF INSURANCE GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY ANY AUTO ALL OWNED AUTOS LIABILITY ANY AUTOS AUTOS LIABILITY ANY AUTOS AUTOS LIABILITY ANY AUTOS AUTOS AUTOS LIABILITY ANY AUTOS AUTOS LIABILITY ANY AUTOS AUTOS AUTOS AUTOS WORKENS COMPENSATION ANY PROPRIETORIPARTINE RESEAU	POLICIES OF GANY REG OF SUCH PER IN	DE IN UIREE ERTA OULCI OUL	SURANCE LISTED BELOW EMENT, TERM OR CONDITI IN, THE INSURANCE AFFO IES. LIMITS SHOWN MAY HA	ORDED BY THE PAVE BEEN REDUCT	JED TO THE INSUR TRACT OR OTHER OLICIES DESCRIBE ED BY PAID CLAIMS	ED NAMEO ABOVE FOR DOLUMENT WITH RESPECT HEREIN IS SUBJECT. LIMITED HEREIN IS SUBJECT. LIMITED HEREIN IS SUBJECT. EACH OCCUBRENCE BANAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) BODILY BAULTY (Per person) BODILY BAULTY (Person) BODILY BAULTY (P	ECT TO ALL 1 TO ALL 1 TS 3 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	WHICH THIS	



Compliance: Subgrantee Responsibilities

- Participate in required onboarding webinar
- Participate in required quarterly meetings
- Ensure funds are properly tracked and that all expenditures are allowable
- Maintain adequate records supporting grant expenditures
- Submit accurate narrative and financial reports by required due dates
- Respond to all desk review/audit inquiries in a timely manner



Compliance: Subgrantee Responsibilities

To support expenditures reported, sub-grantees must:

- Maintain an expenditure listing (G/L detail or other) that details all expenditures charged to the funds received
- Ensure all expenditures are reasonable and tie to and are for the purpose of the project
- Maintain adequate support, including, but not limited to:
 - Purchase orders/requests
 - Vendor invoices/receipts
 - Receiving documentation/packing slips
 - Timesheets/paystubs
 - Consultant or other contracts
 - Check stubs for payments made



Compliance: Subgrantee Responsibilities

Expenses must be allowable:

- Ensure expenses are necessary and reasonable for the performance of the grant and allocable to the grant
- Ensure you understand what expenses/costs are allowable under the terms of the grant and your subgrantee agreements
- Reach out to The Center if you have any questions related to allowable costs
- Ensure expenses are reasonable and support the overall project purpose/mission
- Understand what is strictly unallowed per the contract
- Monitor your approved budget (by line item/category)



ROLES







The Center at The Sierra Health Foundation (The Center)

- Execute subcontract agreements with Program Services
 Providers (PSPs) identified by DHCS
- Collect program and budget reports from funded partners and submit consolidated reports to CA. Dept. of Health Care Services (DHCS)
- Communicate regularly with DHCS
- Participate in Hear Us Program meetings

California Department of Health Care Services (DHCS)

- Federal funding awardee from SAMSHA
- Policy development and implementation

Health Management Associates Community Strategies (HMACS)

- Monthly Check-In Meetings
- Project Support and Project Resources
- Data collection processes
- Processing of data submissions
- Development of PowerPoint Presentations for Engagement

CALENDAR OF EVENTS





Required HEAR US Learning Community Meeting Dates:

Dates	Times	Location
December 7, 2022	10am-3pm PST	Sierra Health Foundation – The Center 1321 Garden Highway, Sacramento, CA 95833
January 26, 2023	9am-11am PST	Zoom
February 23, 2023	9am-11am PST	Zoom
March 23, 2023	9am-11am PST	Zoom
April 27, 2023	9am-11am PST	Zoom
May 25, 2023	9am-11am PST	Zoom
June 22, 2023	10am-3pm PST	In-Person





QUESTIONS







NEXT STEPS!

For questions in the future please reach out to recoveryservices@shfcenter.org





Next Step: #1

Please register for December 7, 2022, in-person convening, 9:00 a.m. – 3:00 p.m.

Location:

Sierra Health Foundation 1321 Garden Hwy, Sacramento, CA 95833

Agenda Overview

- Registration/Breakfast/Networking 9:00 am-10:00 am
- **Program Overview** 10:00am-Noon
- **Lunch** Noon-12:30 pm
- Keynote Speaker 12:30 pm-1:00 pm
- Working Session 1:00 pm-2:30 pm
- Wran-I In and Conclusion 2:30 3:00 p.m.







Next Step: #2

- Turn in your Insurance!
- Review your budget and your workplan







THANK YOU!!



