

CENTRAL FLORIDA CARES HEALTH SYSTEM

Onboard Training

CONTRACTS ONBOARD TRAINING

RV 2.29.24



OVERVIEW



- I. Origin of CFCHS
- II. About CFCHS
- III. Purpose of CFCHS
- IV. Contract Agreement
- V. Required Reports
- VI. ConcordNow Contract Management
- VII. Invoice and Payment

I. ORIGIN OF CFCHS



Who We Are:

In 2012, Central Florida Cares Health System, Inc. (CFCHS) was designated by the Florida Department of Children and Families (DCF) as the Behavioral Health Managing Entity (ME) to administer a regional system of mental health and substance use care for the following circuits:

- Circuit 9 (Orange & Osceola Counties)
- Circuit 18 (Seminole & Brevard Counties)

II. ABOUT CFCHS



What We Do:

As an ME, CFCHS does not provide direct services but funds a services network comprised of organizations that offer various levels of behavioral health treatment for adults, children, as well as families. Treatment options include but are not limited to:

- Prevention
- Intervention
- Crisis Support
- Residential Treatment
- Outpatient Services, to include opioid and medication assisted treatment
- Supportive Housing

III. PURPOSE OF CFCHS



Mission:

The mission of CFCHS is to provide an affordable, high-quality behavioral health care system for persons with mental health and/or substance use disorders.

Vision:

The vision of CFCHS is to achieve a comprehensive and seamless behavioral health system that promotes recovery and resiliency.

CONTRACT AGREEMENT



IV. CONTRACT AGREEMENT



The purpose of this section is to become familiar with the agreement for the provision of Substance Abuse and Mental Health services in accordance with the details from the subcontract agreement and the Master Contract between Central Florida Cares Health System, Inc. (CFCHS) and the Florida Department of Children and Families (DCF) Central Region.

The review of this section will include the following:

- A. Contract Dashboard
- B. Important Contract Clauses
- C. Reference Documents
- D. Contract Obligations

IV. CONTRACT AGREEMENT



A. Contract Dashboard

Each agreement executed with a Service Provider will include the following details:

1. Contract Number
2. Contract Amount
3. Local Match Requirement (If applicable)
4. Contract Lifecycle

IV. CONTRACT AGREEMENT



B. Important Contract Clauses

It is important for the Provider to become familiar with all terms of the contract; however, the areas below include important details.

1. (Section A) Service Delivery
2. (Section B) Method of Payment
3. (Section D) Compliance with Standard Federal Provisions
4. (Section E.) Compliance with Standard State Provisions
5. (Section I.) Termination
6. (Section N.) Renewals

IV. CONTRACT AGREEMENT



C. Referenced Documents

The following documents (if applicable), or the latest revisions thereof, will be incorporated by reference and made part of the subcontract agreement.

Attachment I, Special Provisions
Attachment II, Audit Attachment
Attachment III, Certificate Regarding Lobbying

Exhibit A, Target Population and Performance Measures
Exhibit B, Required Reports
Exhibit C, Special Programming Report of Budget and Expenditures
Exhibit D, Specific Program/Services Allocations

Incorporated by Reference Document 1, Master Contract
Incorporated by Reference Document 2, Program Description(s)
Incorporated by Reference Document 3, Funding Detail
Incorporated by Reference Document 4, Incidentals Procedure
Incorporated by Reference Document 5, Care Coordination Procedure
Incorporated by Reference Document 6, CFCHS TANF Guide
Incorporated by Reference Document 7, Reintegrating Discharge Ready Individuals Plan
Incorporated by Reference Document 8, ALF-LMHL Plan
Incorporated by Reference Document 9, CFCHS Access to Care, Waiting List and Capacity Management Policy
Incorporated by Reference Document 10, Recovery Management Practices
Incorporated by Reference Document 11, State Opioid Response (SOR) Resource Guide

IV. CONTRACT AGREEMENT



D. Contract Obligations

The following includes important contract obligations under subcontract agreement:

1. A(2)(a) - Subcontractors must comply with any and all provisions applicable to Subcontractor as set out in the Master Contract and Exhibits as subsequently modified by amendments, which are incorporated into the subcontract.
2. A(2)(g) - Subcontractor shall provide deliverables, including reports and data as specified in the included Attachments and Exhibits, in accordance with the stated standard terms and conditions of the contract. The failure to comply is considered a breach of contract as specified in the Master Contract and could result in denial of payment until acceptable deliverables are received.

REQUIRED REPORTS



VI. REQUIRED REPORTS



The purpose of this section is to become familiar with the required report which are incorporated by reference and found in Exhibit B of the Provider Subcontract document package. The review of this section will include the following:

- A. Required Reports
- B. Required Report Examples
- C. Report Tracking System (RTS)
- D. Exhibit B Cross Walk

V. REQUIRED REPORTS



A. Required Reports:

All network provider subcontracts include Exhibit B: Required Reports, which illustrates important information such as Report Name, Due Dates, Applicability, and Frequency. The six frequencies of Required Reports are listed below:

- Upon Contract Execution
- Annual
- Semi-Annual
- Quarterly
- Monthly
- Ad-Hoc

V. REQUIRED REPORTS



EXHIBIT B: REQUIRED REPORTS

Report Name	Sub-reports	Citation	Frequency	Due (Calendar days unless otherwise specified)	Applicability
Attestation - Completion of Auxiliary Aids Service and Monitoring Plan		Section 504, ADA CFOP 60-10	Annually	30 days after contract execution and July 30 annually thereafter	Yes - regardless of number of employees
Attestation - Completion of Risk Analysis as per HIPAA Security Rule		45 CFR § 164.308(e)(1)(ii)(A)	Annually	30 days after contract execution and July 30 annually thereafter	Yes
Attestation - Serving Our Customers who are Deaf and Hard of Hearing training for direct service employees		Section 504, ADA CFOP 60-10	Annually	30 days after contract execution and July 30 annually thereafter	Yes - if 15 or more employees
Attestation - Emergency Preparedness Plan training for staff		CFCHS Specific	Annually	30 days after contract execution	Yes
Block Grant Report - Narrative		Template 3	Annually	May 30 each year of the contract period	Yes - if contracted for anything EXCEPT for profit, LUES, CNS
BNET Statement of Program Costs		Guidance 12	Annually	September 1 each year of the contract period	Yes - if contracted for BNET services
Civil Rights Compliance Checklist		45 CFR, Part 80 CFOP 60-16	Annually	30 days after contract execution and July 30 annually thereafter	Yes - if 15 or more employees
Contract Provider Property Inventory Form		Guidance 2 Template 1	Annually	30 days after contract execution and July 30 annually thereafter	Yes
CRS Financial Report and reconciliation		Guidance 27 CF-MH 1037	Annually	September 1 each year of the contract period	Yes - if contracted for CRS services
EOG/OPB Return on Investment - Projected Estimates		GHME1 C2-3.2.1	Annually	July 20 each year of the contract period	Yes - if contracted for an EOG project
Final data submission for fiscal year end		CFCHS Specific	Annually	July 31 each year of the contract period	Yes
Independent Financial Audit		65E-14.003, FAC	Annually	180 days after end of provider fiscal year, submitted in accordance with Attachment II	Yes - if receive over \$700,000 annually in state or federal funds
Insurance Certificates	Includes liability, auto, and medical malpractice with DCF and CFCHS named as additionally insured	GHME1 Section D.1 CFCHS Specific	Annually	30 days after contract execution and ongoing upon renewal of expired certificates	Yes
Local Match Form - Actuals		Template 9	Annually	July 30 each year of the contract period	Yes - if CFCHS contract requires local match
PATH Annual Report		Guidance 15	Annually	November 17 annually, submitted to http://www.pathdx.org/	Yes - if contracted for PATH services
PATH Intended Use Plan (IUP)		Guidance 15	Annually	March 1 of each year during the contract period	Yes - if contracted for PATH services
PPG Financial Status Report		Guidance 14	Annually	September 1 each year of the contract period	Yes - if contracted for PPG services
PPG Program Status Report		Guidance 14	Annually	September 1 each year of the contract period	Yes - if contracted for PPG services
Security Agreement Forms and Training Certificates for staff that touch CFCHS data systems		CFOP 50-2	Annually	30 days after contract execution and July 30 annually thereafter	Yes
Sliding fee scale - Annual Revision	reflecting annual Federal Poverty Guidelines revisions	65E-14.018, FAC CFCHS Sliding fee P&P	Annually	February 1 each year of the contract period	Yes
Special Audit Schedules	Includes: --Schedule of State Earnings --Schedule of Related Party Transaction Adjustments --Program/Cost Center Actual Expenses & Revenues Schedule --Schedule of Bed-Day Availability Payments	65E-14.003, FAC	Annually	With Independent Financial Audit. Or within 45 days of end of provider fiscal year if no Independent Financial Audit required.	Yes
FEP fiscal year-end financial report		CF-MH 1037	Annually	July 20 each year of the contract period	Yes - if contracted for FEP services
Incident Report	Report only those incidents that involve persons served that are funded partially or in whole by CFCHS or local match, and incidents related to employees, facilities, or issues that can have media involvement or impact service	CFOP 215-6	As Needed	Within 1 business day of occurrence, submitted to IRAS	Yes

A. Required Reports (Continued):

1. There are 70+ reports listed in Exhibit B. Therefore, it is recommended that you reach out to your CFCHS Contract Manager if you have questions about which ones are applicable to you.
2. General reminders of required reports from Exhibit B are sent out as a courtesy by the CFCHS contract management department.

V. REQUIRED REPORTS



B. Required Reports Examples:
Below are a few examples of required reports:

#	Report	Reports due Upon Contract Execution
1	Attestation	Request example from CFCHS Contract Manager
2	Fiscal Reports	Guidelines Templates Forms – Mental Health Substance Abuse Services (centralfloridacares.org)
3	Program Descriptions	Program description and organizational profile templates – Mental Health Substance Abuse Services (centralfloridacares.org)
4	Qualifying and Procurement Documentation	Request example from CFCHS Contract Manager
5	Non-Disclosure Form	https://www.myflfamilies.com/sites/default/files/2023-03/Access%20Confidentiality%20and%20Nondisclosure%20Agreement%200521.pdf

V. REQUIRED REPORTS



B. Required Reports Examples (Continued): Below are a few examples of required reports:

#	Report	Semi-Annual Required Report Form(s)
1	Block Grant Data Report	https://www.myflfamilies.com/document/53041

#	Report	Annual Required Report Form(s)
1	Attestation	Request example from CFCHS Contract Manager
2	Updated Certificates of Insurance	Request example from CFCHS Contract Manager
3	Financial Audit	Request example from CFCHS Contract Manager
4	Required/Refresher Training Certifications	Security Awareness, HIPAA, Deaf and Hard of Hearing trainings can be accessed by clicking here: https://www.myflfamilies.com/my-fl-learn

V. REQUIRED REPORTS



B. Required Reports Examples (Continued):
Below are a few examples of required reports:

#	Report	Quarterly Required Report Form(s)
1	Exception Attestation	Guidelines Templates Forms – Mental Health Substance Abuse Services (centralfloridacares.org)
2	ROI Reports (only for appropriation projects)	https://www.myflfamilies.com/sites/default/files/2023-06/Template%2030%20ROI%20Report%202021%2007%2001.pdf
3	Community Action Treatment (CAT)	https://www.myflfamilies.com/sites/default/files/2024-02/Guidance%2032%20CAT%202024%2002%2006.pdf
4	Invoice Reconciliation and Support Information (CF-MH 1040).	This includes a copy of a general ledger and trial balance for allowable expenditures.
5	NVRA Activities Reports	NVRA Voter Registration Agencies Quarterly Activities Report Form – Mental Health Substance Abuse Services (centralfloridacares.org)

V. REQUIRED REPORTS



B. Required Reports Examples (Continued):

Below are a few examples of required reports:

#	Report	Monthly Required Report Form(s)
1	Program Data Report	https://cfchsdata.org/Public/Logon?ReturnUrl=%2f
2	Census and Wait List	Most forms can be found in guidance or templates from the following website: https://www.myflfamilies.com/services/samh/providers/managing-entities/FY23-24
3	Auxiliary Aids Service Records (HHS)	https://fs16.formsite.com/DCFTraining/Monthly-Summary-Report/form_login.html

#	Report	Ad-Hoc Required Report Form(s)
1	Incident Reports	Provided by CFCHS Risk Management Specialist. Review process for IR here ---> https://vimeo.com/552588687
2	Response to Monitoring/Corrective Action Plans	Provided by CFCHS Quality Assurance Specialist

V. REQUIRED REPORTS



C. Report Tracking System (RTS):

CFCHS has created a user-friendly Report Tracking System to submit and track applicable Exhibit B Required Reports utilizing the following Cognito webpage:

<https://www.cognitofrms.com/CentralFloridaCaresHealthSystemInc1/ReportTrackingSystemRTS>

This process provides efficient visibility of live actions and timely report performance progress by integrating the following functions:

1. Provider contact information
2. Report upload
3. Notifications

You may also find the RTS PowerPoint presentation along with other helpful training material on our website by accessing the following link:

[Guidelines | Templates | Forms – Mental Health Substance Abuse Services \(centralfloridacares.org\)](https://centralfloridacares.org/Guidelines%20Templates%20Forms%20Mental%20Health%20Substance%20Abuse%20Services)

V. REQUIRED REPORTS



D. Exhibit B Crosswalk:

A crosswalk spreadsheet with all reports listed in the Exhibit B can be accessed by clicking on the link below. The crosswalk provides information on how each report on the Exhibit B is named in the new Report Tracking System (RTS) and/or if a report is required to be submitted through a system other than RTS.

https://centralfloridacares.org/wp-content/uploads/2024/03/Exhibit-B-with-Crosswalk-to-RTS_2-16-2024.xlsx

CONCORDNOW CONTRACT MANAGEMENT



VI. CONCORDNOW CONTRACT MANAGEMENT



Below are the following areas that will be covered in this section regarding ConcordNow Contracts Management Software:

- A. Concord Overview
- B. System Access Information
- C. Contract Review
- D. Contract Execution

VI. CONCORDNOW CONTRACT MANAGEMENT



A. CONCORDNOW OVERVIEW:

ConcordNow is a Contract Management Software that allows the ability to create, collaborate, sign, and manage all contracts in one platform. CFCHS utilizes the Concord Contract Management Software for the following purposes:

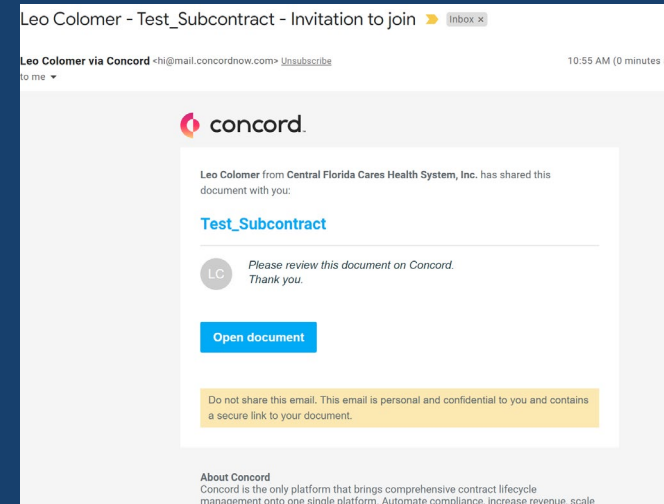
1. To provide contracts and contract amendments for Providers to review and sign.
2. To collaborate, negotiate, and ensure compliance of the Department and Managing Entities requirements with Provider Network.
3. To store and share executed contracts.

VI. CONCORDNOW CONTRACT MANAGEMENT



B. SYSTEM ACCESS INFORMATION:

1. Once the Provider Representative with signature authority along with the user for joint review is determined, CFCHS will send an invitation to the e-mail on file. This will allow the assigned representatives to access the contract/amendment within the system to review and sign.
2. The link to access the website is listed below: ConcordNow.com



Leo Colomer invited you to Test_Subcontract.
Review when you are ready.

CONTINUE TO
DOCUMENT

VI. CONCORDNOW CONTRACT MANAGEMENT



C. CONTRACT REVIEW:

1. CFCHS review:

- a) The CFCHS Contract Manager (CM) will assign an appropriate contract number in the following format: XXXNN where XXX is an acronym of the subcontractor's name and NN is the year in which the contract expires.
- b) When applicable, the review process can request the review and approval from the CEO, COO, or other delegates.
- c) Once contracts or amendments are approved by all requested CFCHS reviewers, the contract is loaded into the contract management software (currently ConcordNow) for review and signature by both parties.

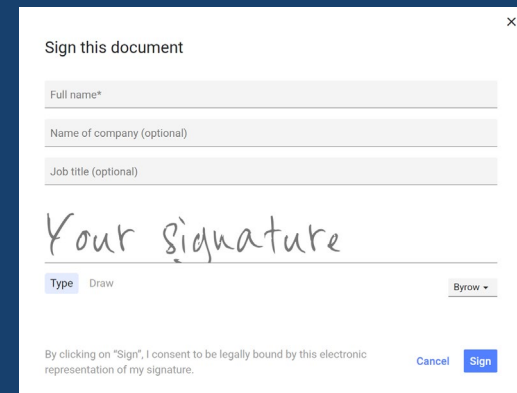
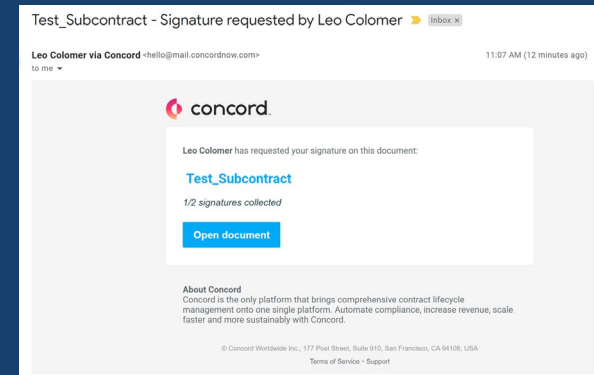
VI. CONCORDNOW CONTRACT MANAGEMENT




C. CONTRACT REVIEW CONTINUED...

2. Provider review:

- a) Multiple users from the Provider may join and review the document.
- b) Only one Provider Representative with signature authority may sign the document.
NOTE: The signer for the subcontractor must have the authority to commit the organization to terms of the contract.
- c) Once the document has been joined and reviewed, the Provider Representative will receive a SECOND automatic e-mail from Concord requesting an electronic signature.



 Leo Colomer invited you to Test_Subcontract.
Review and sign when you are ready.

[CONTINUE TO DOCUMENT](#)

VI. CONCORDNOW CONTRACT MANAGEMENT



D. CONTRACT EXECUTION:

1. After the provider signs the contract, the CFCHS CEO will then electronically sign the document.
2. This fully executed document is available for PDF download at any time and a copy will be e-mailed via assigned CFCHS Contract Manager.
3. All contract and amendment versions as well as contract attachments and exhibits are available on ConcordNow for your reference.
4. Revisions, Amendments, and Price-Level Increases to a contract must be clearly specified in the contract document.
5. Lapse (overutilization) Increases are subject to partial or all reimbursement after paying a Subcontractor their total contract amount. Lapse Increases do not require an amendment to the total contract amount.
6. Extensions, Renewals, and Terminations may be subject to a performance evaluation with the terms and conditions of the contract.

INVOICE AND PAYMENT



VII. INVOICE AND PAYMENT



Below are the steps for the monthly request of payments. As a reminder, payments are subject to the availability of funding.

- A. Method of Payments
- B. Data Reporting
- C. Invoice Validation
- D. Payment

VII. INVOICE AND PAYMENT



A. METHOD OF PAYMENT

There are FOUR primary payment methods utilized when invoices are processed for CFCHS contracts:

1. Non-bundled Fee-for-service

- a) Payment for units of service delivered in accordance with the terms and conditions of the subcontract at the unit price listed in the CFCHS approved funding details incorporated by reference. Rates in the funding detail are determined upon review and approval by CFCHS of fiscal reports. Payments are determined by using a Year-To-Date (YTD) method based on the following rules:
- b) Availability Covered Services – Pay prorated amount regardless of service units delivered
- c) Utilization Covered Services – Pay based on calculation of Unit Rate x YTD Units in Data System – YTD previous payments

VII. INVOICE AND PAYMENT



A. METHOD OF PAYMENT (continued)

2. Bundled Fee-for-service with monthly/quarterly reconciliation

- a) Upon review and approval of budget by CFCHS.
- b) Payment for the reimbursement of services on the basis of expected cost.
- c) A pro-rated monthly amount is calculated based on the budget amount. This is the amount paid monthly unless actuals are submitted every month.
- d) CF-MH 1040 form is required to be submitted monthly or quarterly demonstrating actual expenses with a final reconciliation to include a copy of a general ledger and trial balance for CFCHS to be able to reconcile payments versus actual expenses, as well as to verify allowability of expenditures. Please keep in mind this reconciliation process could mean you will receive a lower or no payment for the pertaining month.

VII. INVOICE AND PAYMENT



A. METHOD OF PAYMENT (continued)

3. Bundled Cost Reimbursement/Advance

- a) Payment for the reimbursement of costs for implementation of program(s).
- b) CF-MH 1038 Line-Item Operating budget must be submitted prior to payment. Review and approval of the form is required by CFCHS.
- c) CF-MH 1040 must be submitted for payment.

4. Case Rate

- a) Upon review and approval of budget by CFCHS.
- b) Payment for the reimbursement of services on the basis of expected cost.
- c) Based on a contractually defined package of services to be delivered within a defined period of time
- d) A negotiated payment/rate for a clinically-defined episode of care per member for a specific range of services.

VII. INVOICE AND PAYMENT



B. DATA REPORTING

Providers must submit data and/or the 1040 no later than midnight on the 5th of the month following the month of services for the monthly request of payments.

1. Reporting data for non-bundled fee-for- service:

Units of services provided must reported to the applicable systems below for payment.

- a) <https://cfchsdata.org/Public/Logon?ReturnUrl=%2f>
- b) Prevention data is submitted to <https://florida.prevention.systems/login>

2. Reporting data for bundled fee-for-service and cost reimbursement:

- a) Although the services are not paid based on data submitted, the contract still requires data to be submitted for services provided. Please submit data utilizing the following link: <https://cfchsdata.org/Public/Logon?ReturnUrl=%2f>

In some instances, there may be spreadsheets that include performance measures or data that we are not able to capture in the data system. If that applies, we must receive the spreadsheet for payment to be processed.

VII. INVOICE AND PAYMENT



C. INVOICE VALIDATION

An electronic reverse invoice packet containing a check request for the payment of covered services together with the burn rate sheet (utilization trend of program expenditures) is processed for approval. A validation and approval process for both CFCHS and the Provider is completed to ensure accuracy of payments. If the Provider has earned more than the prorated amount for the month, the following rules apply:

1. Funded with Restricted Other Cost Accumulators (OCA's) - Generally Pay what is earned until exhausted.
2. Funded with General Revenue – Generally pay up to the monthly target burn rate.

VII. INVOICE AND PAYMENT



C. INVOICE VALIDATION CONTINUED...

1. CFCHS Invoice validation process:

- a) CFCHS Contract Manager completes reverse invoice packet and routes document package for internal approval to CFCHS Contracts Director, COO, and CFO.
- b) CFCHS Contract Manager enters approved reverse invoice packet information into the master invoice, which is completed for 100% of the provider network.
- c) The Finance Department utilizes the master invoice and approved reverse invoice packets to generate subcontractor payments.
- d) CFCHS Contract Manager sends monthly burn rate spreadsheet providing the approved monthly payments via e-mail to provider billing and contract point of contact; and copies the finance point of contact.

VII. INVOICE AND PAYMENT



C. INVOICE VALIDATION CONTINUED

2. Provider Invoice approval process:

- a) The Provider reviews the reverse invoice packet for accuracy. If there are any questions regarding the payments or data on the invoice, the Provider should contact their assigned CFCHS Contract Manager.
- b) The Provider enters any sliding fees collected.
- c) The Provider approves the document by signing electronically and returning the document to their assigned CFCHS Contract Manager.

VII. INVOICE AND PAYMENT



D. PAYMENT

1. Invoice Payment Disbursement is completed by the CFCHS Finance Department.
2. Providers may be paid via check or Electronic Funds Transfer (EFT).
3. Providers must complete 'Electronic Payment Authorization' Form to set up EFTs. The form is available from your assigned CFCHS Contract Manager upon request.
4. Payments are typically processed and disbursed by the 27th of the month the invoice is provided.
 1. Per CFCHS contract with DCF, the requirement states we shall make payments within 7 working days after receipt of payment from DCF. Meaning there may be months later in the FY where payments will occur later than the 27th.

VII. INVOICE AND PAYMENT



- For any additional questions or concerns regarding the Invoice and Payment Process, please contact your assigned CFCHS Contract Manager



XII. QUESTIONS

Thank you!

CONTACT INFORMATION

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