



State of Utah

GARY R. HERBERT
Governor

SPENCER J. COX
Lieutenant Governor

Department of Human Services

ANN SILVERBERG WILLIAMSON
Executive Director

Division of Substance Abuse and Mental Health

DOUG THOMAS
Director

March 25, 2019

Craig Buttars
Cache County Executive
199 North Main
Logan, UT 84321

Dear Mr. Buttars:

In accordance with Utah Code Annotated 62A-15-103, the Division of Substance Abuse and Mental Health has completed its annual review of Cache County (District 1 Mental Health Authority) and Bear River Mental Health, its contracted service provider; the final report is enclosed. The scope of the review included fiscal management, children, youth, family and adult mental health services and general operations.

The center has many strengths; however, this report by its nature focuses on the exceptions and areas in need of improvement. The Division has approved all corrective action plans submitted by the Center/County in response to each reported finding, which have been included in the final report. If you have any questions, please contact Chad Carter (801)538-4072

We appreciate the cooperation and assistance of the staff and look forward to a continued professional relationship.

Sincerely,

Doug Thomas

Doug Thomas
Division Director

Enclosure

cc: Jeff Scott, Box Elder County Commission
Bill Cox, Rich County Commission
Beth Smith, Director, Bear River Mental Health

DSAMH, 195 North 1950 West, Salt Lake City, Utah 84116
Telephone (801) 538-3939 • www.dsamh.utah.gov



Site Monitoring Report of

Cache County - District 1 Mental Health Authority and
Bear River Mental Health

Local Authority Contract #160238

Review Date: November 27th, 2018

Table of Contents

Section One: Site Monitoring Report	3
Executive Summary	4
Summary of Findings	5
Governance and Fiscal Oversight	6
Mental Health Mandated Services	8
Child, Youth and Family Mental Health	9
Adult Mental Health	12
Section Two: Report Information	15
Background	16
Signature Page	19

Section One: Site Monitoring Report

Executive Summary

In accordance with Utah Code Section 62A-15-103, the Division of Substance Abuse and Mental Health (also referred to in this report as DSAMH or the Division) conducted a review of Cache County (District 1 Mental Health Authority) and its contracted service provider, Bear River Mental Health (also referred to in this report as BRMH or the Center) on November 27th, 2018. The focus of the review was on governance and oversight, fiscal management, pediatric and adult mental health services, and general operations.

The nature of this examination was to evaluate the Center's compliance with: State policies and procedures incorporated through the contracting process; State mandated mental health services; and Preferred Practice Guidelines. During the examination, the review teams evaluated: the reliability and integrity of the Center's data and its compliance with established programmatic and operational objectives. Additionally, the review included an examination, through sampling, of the Center's efficient and appropriate use of financial resources.

Any program or operational inadequacies are identified in this report as non-compliance issues. The chart on the following page provides a quick reference to locate any non-compliance issues identified by the monitoring team. A detailed description of the issues can be found in the body of this report.

Summary of Findings

Programs Reviewed	Level of Non-Compliance Issues	Number of Findings	Page(s)
<i>Governance and Oversight</i>	Major Non-Compliance Significant Non-Compliance Minor Non-Compliance Deficiency	None None None None	
<i>Child, Youth & Family Mental Health</i>	Major Non-Compliance Significant Non-Compliance Minor Non-Compliance Deficiency	None None None 2	9-10
<i>Adult Mental Health</i>	Major Non-Compliance Significant Non-Compliance Minor Non-Compliance Deficiency	None None None 1	12-13

Governance and Fiscal Oversight

The Division of Substance Abuse and Mental Health (DSAMH) conducted its annual monitoring review of the Local Authority, Cache County, and its contracted service provider, Bear River Mental Health (BRMH). The Governance and Fiscal Oversight section of the review was conducted on November 26th and 27th, 2018 by Chad Carter, Auditor IV.

A visit was conducted with Cache County to discuss their role in monitoring and compliance with State and Federal requirements. See FY19 comments below for more details.

A site visit and review was conducted at BRMH as the contracted service provider for Cache, Box Elder and Rich Counties. Overall cost per client data was analyzed and compared to the statewide Local Authority average. Personnel and subcontractor files were examined for compliance with state licensing laws and adherence to contractual requirements, as well as the Center's own policy. Executive travel reimbursements were reviewed to ensure they were appropriate and that no personal benefit has been gained. Board minutes were reviewed and discussions were conducted to determine if an appropriate level of involvement and financial oversight was provided.

As part of the site visit, the most recent version of the Medicaid Cost Report was reviewed. This report is a cost study conducted by the Local Authority and then reviewed/approved by the Department of Health (DOH), Medicaid Division. This report establishes the center's cost allocation plan as it pertains to overhead/administrative costs and spreads these costs across the Current Procedural Terminology (CPT) billing codes used by the Center that year. This allows the Division to fairly incorporate these overhead/administrative costs into the payments sent for services that qualify for funding found on the Center's contract allocation letter. BRMH provided backup to support their costs and billed amounts, using rates taken from their Medicaid Cost Report.

The Local Authority, Cache County received a single audit as required. The CPA firm Jones - Simkins completed the audit for the year ending December 31, 2017. The auditors issued an unqualified opinion in their report dated June 1, 2018. No findings or deficiencies were issued in the audit.

Cache County's contracted service provider, Bear River Mental Health, did not meet the threshold to require a single audit; but did receive an independent financial statement audit, which was also reviewed. The CPA firm Davis & Bott completed the audit for the year ending June 30, 2018. The auditors issued an unmodified opinion in their report dated October 23, 2018. No findings or deficiencies were issued.

Follow-up from Fiscal Year 2018 Audit:

No findings were issued in FY18.

Findings for Fiscal Year 2019 Audit:

FY19 Major Non-compliance Issues:

None

FY19 Significant Non-compliance Issues:

None

FY19 Minor Non-compliance Issues:

None

FY19 Deficiencies:

None

FY19 Recommendations:

None

FY19 Division Comments:

- 1) As part of the site visit, DSAMH met with Craig Buttars, County Executive for Cache County to discuss monitoring requirements and the official determination of their contracted service provider, BRMH as either a contractor or a subrecipient. The Division has identified some areas that require additional monitoring steps, specifically in regards to subrecipient classifications and Federal requirements. This requires Cache County, as the Division's contracted Local Authority and subrecipient of Federal funding, to be actively involved in the monitoring of services. Mr. Buttars stated that he would look over the Federal questionnaire and make an official determination on the status of BRMH. It was discussed that starting next year, the Division would include Cache County in annual monitoring to ensure they are taking appropriate steps to monitor BRMH. Mr. Buttars was receptive and eager to ensure they were in compliance. The issue of subrecipient requirements was also discussed with BRMH, who was also very willing to ensure they were in compliance. The Division appreciates the partnership we have with Cache County and Bear River Mental Health, and their willingness to work with us through the monitoring process. The Division is available to provide technical assistance at any time to ensure requirements are understood and are being properly addressed.

Mental Health Mandated Services

According to Utah Code 17-43-301, the Local Authority is required to provide the following ten mandated services:

- Inpatient Care
- Residential Care
- Outpatient Care
- 24-hour Emergency Services
- Psychotropic Medication Management
- Psychosocial Rehabilitation (including vocational training and skills development)
- Case Management
- Community Supports (including in-home services, housing, family support services, and respite services)
- Consultation and Education Services
- Services to persons incarcerated in a county jail or other county correctional facility

The mandate to provide services to those in county correctional facilities is not applicable to the children and youth population.

In subsection (4)(a)(ii) each local authority is required to “annually prepare and submit to the Division a plan approved by the county legislative body for mental health funding and service delivery, either directly by the local mental health authority or by contract.” This annual area plan provides the state Division of Substance Abuse and Mental Health with a measuring tool against which the local authority is measured during the annual monitoring site review.

A major focus of the monitoring efforts of the Division of Substance Abuse and Mental Health is to measure compliance with this legislative mandate to provide these services to the adults, youth, and children of Utah.

Child, Youth and Family Mental Health

The Division of Substance Abuse and Mental Health Children, Youth, & Families team conducted its annual monitoring review at Bear River Mental Health on November 27th, 2018. The monitoring team consisted of Mindy Leonard, Program Manager; and Brenda Chabot, Utah Family Coalition (Allies With Families). The review included the following areas: record reviews, discussions with clinical supervisors and management, a case staffing, program visits, allied agency visits, and feedback from families through questionnaires and a focus group. During the visit, the monitoring team reviewed the Fiscal Year 2018 audit; statistics, including the Mental Health Scorecard; Area Plans; Youth Outcome Questionnaires; family involvement; Family Resource Facilitation (Peer Support); High Fidelity Wraparound; Multi-Agency Coordinating Committees; school-based behavioral health; Mental Health Early Intervention Funding; civil commitment; compliance with Division Directives; and the Center's provision of the ten mandated services as required by Utah Code 17-43-301.

Follow-up from Fiscal Year 2018 Audit

FY18 Minor Non-compliance Issues:

- 1) *Unfunded Client Count:* Data reported to the Division of Substance Abuse and Mental Health regarding children and youth receiving unfunded services is incorrect. Data reported in Substance Abuse and Mental Health Information System (SAMHIS) indicates 1,103 children and youth were served using unfunded code. This represents a total of 72.8% of the total children and youth served by BRMH in FY17.

This issue has been resolved. This was a coding issue and it has been corrected.

Findings for Fiscal Year 2019 Audit

FY19 Major Non-compliance Issues:

None

FY19 Significant Non-compliance Issues:

None

FY19 Minor Non-compliance Issues:

None

FY19 Deficiencies:

- 1) *Use of Youth Outcome Questionnaire (YOQ) as an intervention:* BRMH does not utilize the YOQ in the clinical process, as evidenced through the chart review process. DSAMH recognizes and appreciates BRMH efforts in administering the YOQ above the 50% requirement as evidenced through OQ data reports and documentation in the charts. Division Directives require that the data from the OQ be shared with the client and incorporated into the clinical process. Of the ten charts reviewed only three had evidence of the YOQ being

used in an intervention. This amounts to only 30% of the charts showing the utilization of the YOQ in the clinical process.

Center's Response and Corrective Action Plan:

Action Plan: *Use of Youth Outcome Questionnaire (YOQ) as an intervention:* BRMH is working to provide mental health services to children and youth in outpatient and community settings. Outreach efforts are helping provide needed mental health services to children and youth in rural communities. The team of therapists involved in conducting community-based mental health services will be provided with print-versions of the YOQ-SR and YOQ-PR so as to gather more YOQ data from clients not seen at the Center. Ongoing training and supervision of this issue will be utilized to increase the effectiveness of this practice. Providers in the Center will also receive ongoing training and supervision around the importance of gathering YOQ data. Training on accessing the electronic version, when outside of the Center and inside the center, will be provided. Paper versions of the scale will also be available to each provider in her or his office providing clients with another opportunity to complete the YOQ and immediately review it in the session with his or her therapist.

Timeline for compliance: Within the next 30 days.

Person responsible for action plan: Adam Boman, Tim Frost, and Lance Bingham

- 2) *Respite Services:* BRMH provided Respite services at a lower rate than the rural and state averages and has shown a steady decrease in the number of youth receiving these services. The number of youth who received Respite services has decreased from 108 youth (6.8%) in FY16 to only 16 youth (1.1%) in FY18. It is recommended that BRMH continue to examine methods to increase access to this mandated service for children and youth.

Center's Response and Corrective Action Plan:

Action Plan: *Respite services:* Respite services are services offered to individuals caring for a child with significant mental health concerns to help reduce provider burn-out and/or allowing the provider time to focus on other children or tasks. Children who are classified as having Serious Emotional Disturbances (SED) can benefit from this service. BRMH will conduct an initial SED for each new child and adolescent client admitted to services as well as at each care plan review. At those times the treatment coordinator will assess whether respite services are needed and if so to what frequency and duration respite services need to be provided. BRMH's clinical supervisors will obtain internal data showing which child and adolescent clients are listed as SED and review with the treatment providers if respite services are warranted.

Timeline for compliance: Within the next 30 days.

Person responsible for action plan: Adam Boman, Tim Frost, and Lance Bingham

FY19 Recommendations:

- 1) It is recommended that BRMH investigate the ability for families with multiple children to help them access therapy in a timely manner. Many of the clients discussed the difficulty in the ability to get an appointment at the time they needed, this was especially true with regard to appointments after school. BRMH will need to continue to find ways to utilize respite services.

FY19 Division Comments:

- 1) *Family Feedback:* An overwhelming majority of parents indicated that they are included in their child's treatment planning and recovery. Cache County has very good feedback about the services that they provide. Overall the clients were happy with the amount and type of services that they were receiving. Many of the families stated that the front staff is very polite and helpful.

Adult Mental Health

The Adult Mental Health team conducted its annual monitoring review of Bear River Mental Health on November 27th, 2018. The team included Mindy Leonard, Mental Health Program Manager. The review included the following areas: Discussions with clinical supervisors and management teams, record reviews, site visits to administrative offices, a visit to Bear River House and the Cache County Jail. During the discussions, the team reviewed the FY18 audit; statistics, including the Mental Health Scorecard; area plans; Outcome Questionnaires, and the center's provision of the ten mandated services as required by Utah Code 17-43-301.

Follow-up from Fiscal Year 2018 Audit

FY18 Deficiencies:

- 1) *Use of Outcome Questionnaire (OQ) as an intervention:* DSAMH recognizes and appreciates BRMH efforts in administering the OQ at the 50% requirement as evidenced through OQ data reports and documentation in the charts. During FY18 chart reviews, there was no evidence in the progress notes indicating that the OQ scores were being used as a clinical tool for intervention. Division Directives require that the data from the OQ be shared with the client and incorporated into the clinical process, as evidenced in the chart.

This issue has not been resolved and will be continued in FY19; see Deficiency #1.

Findings for Fiscal Year 2019 Audit

FY19 Major Non-compliance Issues:

None

FY19 Significant Non-compliance Issues:

None

FY19 Minor Non-compliance Issues:

None

FY19 Deficiencies:

- 1) *Use of Outcome Questionnaire (OQ) as an intervention:* DSAMH recognizes and appreciates BRMH efforts in administering the OQ at the 50% requirement as evidenced through OQ data reports and documentation in the charts. During FY18 chart reviews, there was no evidence in the progress notes indicating that the OQ scores were being used as a clinical tool for intervention. Division Directives require that the data from the OQ be shared with the client and incorporated into the clinical process, as evidenced in the chart. Of the ten charts reviewed only three had evidence of OQ being used in an intervention. This amounts to only 30% of the sample.

Center's Response and Corrective Action Plan:

Action Plan: *Use of Outcome Questionnaire (OQ) as an intervention:* BRMH is working to provide mental health services to adults in outpatient and community settings. Outreach efforts are helping provide needed mental health services but create some challenges in administering the OQ. The team of therapists involved in conducting all adult mental health services will be provided with training on accessing the electronic version of the OQ from any location, so as to gather more OQ data from clients not seen at the Center or to go ahead and administer the OQ, outside of the normal administration process through the Center's EHR. Ongoing training and supervision of this issue will be utilized to increase the effectiveness of this practice. Providers in the Center will also receive ongoing training and supervision around the importance of gathering YOQ data. Paper versions of the scale will also be available to each provider in her or his office providing clients with another opportunity to complete the YOQ and immediately review it in the session with his or her therapist. Bear River Mental Health will also endeavor to create monitoring reports to help supervisors supervise around this issue. We will also include this item in the regular peer chart audit process. The availability to access the most recent OQ is within the center's EHR, but an automatic population of the results into the progress note, is not. We will look into the cost of adding this feature to our EHR.

Timeline for compliance: Within 30 Days

Person responsible for action plan: Dan Sorensen, Tim Frost, and Lance Bingham

FY19 Recommendations:

- 1) *Supported Employment/Individual Placement and Support (IPS):* Bear River Mental Health provides their employment services at Bear River House and Brigham City House. DSAMH's IPS Trainer and the Alliance House/Clubhouse IPS Trainer have provided ongoing, on-site Supported Employment/Individual Placement and Support (SE/IPS) training. Bear River's employment specialist supervisor and employment specialist staff have completed Westat's online IPS Practitioner Training. It is recommended that BRMH continue to work toward IPS fidelity and adhere to the evidence-based practice for Supported Employment. In addition, it is recommended that the BRMH employment team complete the Association of Community Rehabilitation Educators (ACRE) certification to become a Community Rehabilitation Program (CRP).

FY19 Division Comments:

- 1) *Bear River House:* The visit and interview at the Bear River House was very positive. The clients who utilize the Bear River House are very appreciative of the services that they receive. Two of the clients mentioned that they would like to have better transportation, but Cache County is doing a good job with what they have for resources and providing transportation within their means.
- 2) *Cache County Jail:* BRMH has a very good relationship with the Cache County Jail. The staff at the jail feel that Cache County is very responsive to the needs of their clients. When asked about competency, Cache County Jail staff stated that "they are quicker than they used to be." The staff felt that their Judge had a good working relationship with the competency

person and they were having better results with getting the assessments done.

- 3) *Suicide Coalition*: BRMH stated that the people running the Suicide Coalitions would be offended if BRMH stepped in to take a leadership role. DSAMH continues to encourage BRMH to provide leadership as the community mental health center/experts on initiatives that are priorities for the coalition and feels BRMH should continue to attend, engage and look for opportunities to remain active with the Suicide Coalitions.

Section Two: Report Information

Background

Utah Code Section 62A-15-103 outlines duties of the Division of Substance Abuse and Mental Health. Paragraph (2)(c) states that the Division shall:

- Consult and coordinate with local substance abuse authorities and local mental health authorities regarding programs and services,
- Provide consultation and other assistance to public and private agencies and groups working on substance abuse and mental health issues,
- Receive, distribute, and provide direction over public funds for substance abuse and mental health services,
- Monitor and evaluate programs provided by local substance abuse authorities and mental health authorities,
- Examine expenditures of any local, state and federal funds,
- Monitor the expenditure of public funds by local substance abuse authorities and mental health authorities,
- Contract with local substance abuse authorities and mental health authorities to provide a continuum of services in accordance with division policy, contract provisions, and the local plan,
- Assure that these requirements are met and applied uniformly by local substance abuse authorities and mental health authorities across the state,
- Conduct an annual program audit and review of each local substance abuse authority and mental health authority in the state and its contract provider in a review and determination that public funds allocated to by local substance abuse authorities and mental health authorities are consistent with services rendered and outcomes reported by them or their contract providers,
- Each local substance abuse authority and each mental health authority is exercising sufficient oversight and control over public funds allocated for substance abuse and mental health programs and services, and
- Other items determined by the division to be necessary and appropriate.

Non-Compliance Issues, Action Plans and Timelines

This report is organized into individual sections, in which inadequacies will be identified and discussed. Inadequacies are assigned a level of severity based on the combined judgment of the monitoring team. In order to fully understand the degree of severity, a short discussion of the inadequacy levels follows.

A **major non-compliance issue** is non-compliance in contract requirements which affect the imminent health, safety, or well being of individuals. In cases of non-compliance at this level, a written corrective action plan must be completed by the Local Authority immediately and compliance must be achieved within 24 hours or less.

It should be noted that in extreme cases where, in the professional opinion of the monitoring team, an elevated threat of imminent health, safety, or well being of individuals exists, contract payments may be suspended indefinitely.

A **significant non-compliance issue** is either 1) non-compliance with contract requirements that do not pose an imminent danger to clients but that result in inadequate treatment or care that jeopardizes the well being of individuals; OR 2) non-compliance in required training, paperwork, and/or documentation that are so severe or pervasive as to jeopardize the effectiveness of services and continued contract funding. This type of finding will also require the submission of a written corrective action plan in which the Local Authority identifies the steps it will take to rectify the issue and a time frame for accomplishing the correction. The due date for this submission shall be within 10 working days of receipt of the draft monitoring report by the Local Authority. Compliance must be achieved within 30 days of receipt of the draft monitoring report. Verification of the resolution may be accomplished in several ways including a follow-up visit, measurement during the next site review, a review of training documentation, a review of data submitted subsequent to the correction or a combination of these or any other method determined adequate to measure the resolution.

A **minor non-compliance issue** results when the reviewers identify a performance inadequacy that is relatively small in scope and does not impact client well being or jeopardize funding. This type of finding will require the submission of a written corrective action plan in which the Local Authority identifies the steps it will take to rectify the issue and a time frame for accomplishing the correction. The due date for this submission shall be within 15 working days of receipt of the draft monitoring report by the Local Authority. Compliance must be achieved within 60 days of receipt of the draft monitoring report. Verification of the resolution may be accomplished in several ways including a follow-up visit, measurement during the next site review, a review of training documentation, a review of data submitted subsequent to the correction or a combination of these or any other method determined adequate to measure the resolution.

A **deficiency** results when the contractor is not in full compliance, but the deficiency discovered is not severe enough to require a formal action plan. However, the monitoring team may request action to fix the problem by a given date.

A **recommendation** occurs when the contractor is in compliance. The Division is simply making a best practice or technical suggestion. The contractor is encouraged to implement the suggestion but not required.

In rare instances, a non-compliance issue from a previous year may continue unresolved at the time of the monitoring site visit. A recurring non-compliance issue will be prominently displayed in the current monitoring report and will require special attention by the Local Authority to ensure its immediate resolution.

Signature Page

We appreciate the cooperation afforded the Division monitoring teams by the management, staff and other affiliated personnel of Cache County (District 1 Mental Health Authority – Bear River Mental Health) and for the professional manner in which they participated in this review.

If there are any questions regarding this report please contact Chad Carter at (801)538-4072.

The Division of Substance Abuse and Mental Health

Prepared by:

Chad Carter Chad Carter Date March 25, 2019
Auditor IV

Approved by:

Kyle Larson Kyle Larson Date March 25, 2019
Administrative Services Director

Jeremy Christensen Jeremy Christensen Date March 26, 2019
Assistant Director Mental Health

Eric Tadehara Eric Tadehara Date March 26, 2019
Assistant Director Children’s Behavioral Health

Doug Thomas Doug Thomas Date March 26, 2019
Division Director

Certificate Of Completion

Envelope Id: 0A96135EF32C438394633FE4E0CA93E3	Status: Completed
Subject: Please DocuSign: Cover Letter Cache County.pdf, DSAMH Cache Co Report Final 3.25.19.pdf	
Source Envelope:	
Document Pages: 20	Signatures: 6
Certificate Pages: 5	Initials: 0
AutoNav: Enabled	Envelope Originator:
Envelopeld Stamping: Enabled	Kyle Larson
Time Zone: (UTC-07:00) Mountain Time (US & Canada)	195 N 1950 W
	Salt Lake City, UT 84116
	kblarson@utah.gov
	IP Address: 168.178.209.70

Record Tracking

Status: Original	Holder: Kyle Larson	Location: DocuSign
3/25/2019 3:17:00 PM	kblarson@utah.gov	

Signer Events

Signer Events	Signature	Timestamp
Chad Carter chadcarter@utah.gov Security Level: Email, Account Authentication (None)	 Signature Adoption: Pre-selected Style Using IP Address: 168.178.209.110	Sent: 3/25/2019 3:50:27 PM Viewed: 3/25/2019 3:51:04 PM Signed: 3/25/2019 3:51:30 PM

Electronic Record and Signature Disclosure:
Accepted: 3/25/2019 3:51:04 PM
ID: 9136191d-98e9-42f5-8d1c-2de875bb56f9

Eric Tadehara erictadehara@utah.gov Security Level: Email, Account Authentication (None)	 Signature Adoption: Drawn on Device Using IP Address: 216.4.8.52 Signed using mobile	Sent: 3/25/2019 3:51:35 PM Viewed: 3/26/2019 8:09:38 AM Signed: 3/26/2019 8:13:11 AM
--	---	--

Electronic Record and Signature Disclosure:
Accepted: 3/26/2019 8:09:38 AM
ID: 452b115f-c784-4175-8dde-495bf4da24e4

Jeremy Christensen Jeremy@Utah.gov Security Level: Email, Account Authentication (None)	 Signature Adoption: Pre-selected Style Using IP Address: 165.239.92.160	Sent: 3/25/2019 3:51:35 PM Viewed: 3/26/2019 3:20:32 PM Signed: 3/26/2019 3:20:56 PM
---	---	--

Electronic Record and Signature Disclosure:
Accepted: 3/26/2019 3:20:32 PM
ID: fa06b794-69ec-4aba-82df-0bb3f6cb14a1

Kyle Larson kblarson@utah.gov Administrative Services Director DSAMH Security Level: Email, Account Authentication (None)	 Signature Adoption: Pre-selected Style Using IP Address: 168.178.209.70	Sent: 3/25/2019 3:51:34 PM Viewed: 3/25/2019 3:53:31 PM Signed: 3/25/2019 3:53:44 PM
---	---	--

Electronic Record and Signature Disclosure:
Accepted: 11/2/2017 3:25:44 PM
ID: 0aec013e-2470-4c2f-a124-0e617981c4e8

Signer Events	Signature	Timestamp
Doug Thomas dothomas@utah.gov Director Security Level: Email, Account Authentication (None)	 Signature Adoption: Pre-selected Style Using IP Address: 165.239.92.37	Sent: 3/26/2019 3:21:01 PM Viewed: 3/26/2019 3:21:46 PM Signed: 3/26/2019 3:22:36 PM

Electronic Record and Signature Disclosure:
Accepted: 8/21/2017 12:22:51 PM
ID: d9991105-4e0a-46bf-a7ac-3e6ad7a79bdd

In Person Signer Events	Signature	Timestamp
-------------------------	-----------	-----------

Editor Delivery Events	Status	Timestamp
------------------------	--------	-----------

Agent Delivery Events	Status	Timestamp
-----------------------	--------	-----------

Intermediary Delivery Events	Status	Timestamp
------------------------------	--------	-----------

Certified Delivery Events	Status	Timestamp
---------------------------	--------	-----------

Carbon Copy Events	Status	Timestamp
--------------------	--------	-----------

Beth Smith beths@brmh.com President/CEO Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign	COPIED	Sent: 3/26/2019 3:22:40 PM Viewed: 3/27/2019 10:42:06 AM
---	---------------	---

Jeff Scott jscott@boxeldercounty.org Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign	COPIED	Sent: 3/26/2019 3:22:41 PM
---	---------------	----------------------------

Craig Buttars craig.buttars@cachecounty.org Cache County Executive Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign	COPIED	Sent: 3/26/2019 3:22:42 PM Viewed: 3/28/2019 1:36:13 PM
--	---------------	--

Bill Cox rcaging@allwest.net Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign	COPIED	Sent: 3/26/2019 3:22:43 PM
---	---------------	----------------------------

Notary Events	Signature	Timestamp
---------------	-----------	-----------

Envelope Summary Events	Status	Timestamps
-------------------------	--------	------------

Envelope Sent	Hashed/Encrypted	3/26/2019 3:22:43 PM
Certified Delivered	Security Checked	3/26/2019 3:22:43 PM
Signing Complete	Security Checked	3/26/2019 3:22:43 PM
Completed	Security Checked	3/26/2019 3:22:43 PM

Payment Events

Status

Timestamps

Electronic Record and Signature Disclosure

CONSUMER DISCLOSURES

Obtaining copies of documents

You will have the ability to download and print documents we send to you through the DocuSign system during and immediately after signing session and, if you elect to create a DocuSign signer account, you may access them for a limited period of time (usually 30 days) after such documents are first sent to you.

To advise State of Utah Department of Human Services of your new e-mail address

To let us know of a change in your e-mail address where we should send notices or amendments electronically to you, you must send an email message to us at bcmcontracts@gmail.com and in the body of such request you must state: your previous e-mail address, your new e-mail address. We do not require any other information from you to change your email address.

In addition, you must notify DocuSign, Inc. to arrange for your new email address to be reflected in your DocuSign account by following the process for changing e-mail in the DocuSign system.

Required hardware and software

Operating Systems:	Windows® 2000, Windows® XP, Windows Vista®; Mac OS® X
Browsers:	Final release versions of Internet Explorer® 6.0 or above (Windows only); Mozilla Firefox 2.0 or above (Windows and Mac); Safari™ 3.0 or above (Mac only)
PDF Reader:	Acrobat® or similar software may be required to view and print PDF files
Screen Resolution:	800 x 600 minimum
Enabled Security Settings:	Allow per session cookies

** These minimum requirements are subject to change. If these requirements change, you will be asked to re-accept the disclosure. Pre-release (e.g. beta) versions of operating systems and browsers are not supported.

Acknowledging your access and consent to receive materials electronically

To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please verify that you were able to read this electronic disclosure and that you also were able to print on paper or electronically save this page for your future reference and access or that you were able to e-mail this disclosure and consent to an address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format on the terms and conditions described above, please let us know by clicking the ‘I agree’ button below.

By checking the ‘I agree’ box, I confirm that:

- I can access and read this Electronic CONSENT TO ELECTRONIC RECEIPT OF ELECTRONIC CONSUMER DISCLOSURES document; and
- I can print on paper the disclosure or save or send the disclosure to a place where I can print it, for future reference and access; and

- I consent to receive through electronic means contracts, amendments, notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to me by State of Utah Department of Human Services during the course of my relationship with you.