



**Health & Human Services
Agency
COUNTY OF TULARE
AGENDA ITEM**

BOARD OF SUPERVISORS

KUYLER CROCKER
District One

PETE VANDER POEL
District Two

AMY SHUKLIAN
District Three

J. STEVEN WORTHLEY
District Four

MIKE ENNIS
District Five

AGENDA DATE: June 27, 2017

Public Hearing Required	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Scheduled Public Hearing w/Clerk	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Published Notice Required	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Advertised Published Notice	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Meet & Confer Required	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Electronic file(s) has been sent	Yes	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Budget Transfer (Aud 308) attached	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Personnel Resolution attached	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Agreements are attached and signature line for Chairman is marked with tab(s)/flag(s)	Yes	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>

CONTACT PERSON: Timothy D. Durick, Psy.D. PHONE: 624-8000

SUBJECT: Approve an agreement with Kings View Corporation

REQUEST(S):

That the Board of Supervisors:

1. Approve an agreement with Kings View Corporation for the provision of outpatient methadone maintenance program in an amount not to exceed \$780,000 effective from July 1, 2017 through June 30, 2018; and
2. Authorize the Chairman of the Board to sign three (3) copies of the agreement.

SUMMARY:

Kings View Corporation provides Drug/Medi-Cal methadone maintenance services to Drug/Medi-Cal eligible consumers. Consumers enrolled in this program also receive physician follow-up services and referrals to other agencies for rehabilitation. Drug/Medi-Cal eligible consumers from anywhere in Tulare County may be treated at this facility. The target population is opioid dependent individuals age eighteen (18) and older. In addition, Kings View Corporation provides methadone detox for eligible consumers funded through 2011 Realignment Funds. This program is operated under the California State Department of Health Care Services Substance Use Disorder program regulations, as outlined in Title 9 of the Administrative Code.

This agreement did not include a Request For Proposal process because Kings View Corporation is one of only two providers in Tulare County that provide outpatient methadone maintenance treatment. We contract with both providers. Kings View Corporation offers services to an estimated 700 consumers per month

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through their clinic in the City of Tulare. Retaining Kings View Corporation as a provider will provide continuity of care to these consumers.

This agreement has been approved as to form by County Counsel. The following term deviates substantively from the standard County boilerplate: A mutual indemnification provision was specifically requested by the Contractor.


FISCAL IMPACT/FINANCING:

Funding for this agreement in an amount not to exceed \$780,000 will be included in the Fiscal Year 2017-2018 budget. These services are paid through the Drug Medical and Realignment revenues. There will be no additional net cost to the County General Fund.

LINKAGE TO THE COUNTY OF TULARE STRATEGIC BUSINESS PLAN:

The County's five-year strategic plan includes the Quality of Life Initiative that encourages innovative provision of quality supportive services for at-risk adults, youth and children in state and federally mandated programs. This agreement increases the ability to fulfill that obligation by providing methadone maintenance to opioid dependent individuals in Tulare County.

ADMINISTRATIVE SIGN-OFF:



Timothy D. Durick, Psy.D.
Director of Mental Health

Cc: Auditor-Controller
County Counsel
County Administrative Office (2)

Attachment Agreement

**BEFORE THE BOARD OF SUPERVISORS
COUNTY OF TULARE, STATE OF CALIFORNIA**

IN THE MATTER OF APPROVE AN
AGREEMENT WITH KINGS VIEW
CORPORATION

)
) Resolution No. _____
) Agreement No. _____

UPON MOTION OF SUPERVISOR _____, SECONDED BY
SUPERVISOR _____, THE FOLLOWING WAS ADOPTED BY THE
BOARD OF SUPERVISORS, AT AN OFFICIAL MEETING HELD _____
_____, BY THE FOLLOWING VOTE:

AYES:
NOES:
ABSTAIN:
ABSENT:

ATTEST: MICHAEL C. SPATA
COUNTY ADMINISTRATIVE OFFICER/
CLERK, BOARD OF SUPERVISORS

BY: _____
Deputy Clerk

* * * * *

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