

ORDINANCE 2022-01-27-0041

AUTHORIZING THE EXECUTION OF A RENEWAL AND AMENDMENT TO AN AGREEMENT WITH THE UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT SAN ANTONIO TO CONTINUE THE IMPLEMENTATION AND MANAGEMENT OF REFERRAL SERVICES FOR THE SAN ANTONIO METROPOLITAN HEALTH DISTRICT'S HEALTHY NEIGHBORHOODS PROGRAM TO INCREASE THE COMPENSATION TO A TOTAL AMOUNT OF \$115,550.00, INCLUSIVE OF THE RENEWAL.

* * * * *

WHEREAS, in 2018, City Council authorized the acceptance of funds from the Centers for Disease Control and Prevention's (CDC) Racial and Ethnic Approaches to Community Health (REACH) grant in an amount of up to \$900,000.00 per year for up to 5 years; and

WHEREAS, the REACH award aims to improve health, prevent chronic diseases, and reduce health disparities among certain racial and ethnic populations; and

WHEREAS, through REACH funding, the San Antonio Metropolitan Health District (Metro Health) proposed to implement culturally tailored interventions to address the preventable behaviors of tobacco use, poor nutrition, and physical inactivity, building on the success of the Healthy Neighborhoods program and Office of Health Equity; and

WHEREAS, a key strategy of the REACH grant is to build and promote bidirectional Community-Clinical Linkages (CCL) between healthcare clinics and community-based health and prevention programs; and

WHEREAS, in 2020, Metro Health contracted with the University of Texas Health Science Center at San Antonio on behalf of its Institute of Health Promotion Research (IHPR) on a feasibility study for making Community-Clinical Linkages between Metro Health programs (Diabetes Prevention & Asthma) and the Robert B. Green Campus of the University Health System (UHS) and UT Health Physicians; and

WHEREAS, results of the study lead to the initiation of embedding community referrals into clinical workflow processes; and

WHEREAS, through this project, IHPR facilitated relationships between Metro Health programs and resident physicians in family medicine clinics and in 2022, IHPR is expected to implement a referral button through its electronic medical record (EMR) system; and

WHEREAS, Metro Health will train clinic providers to initiate referrals, fully linking clients to Metro Health's prevention programs; and

WHEREAS, having a deep knowledge of and history with establishing the foundation of the CCL strategy, IHPR is uniquely positioned to move the CCL strategy forward due to existing relationships with

clinic providers, their understanding of the significance of EMR systems in healthcare, and their role in promoting community health programs; **NOW THEREFORE:**

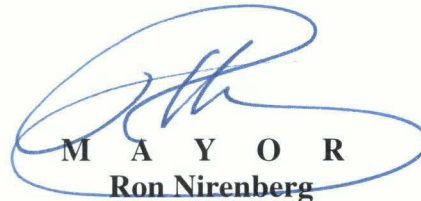
BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF SAN ANTONIO:

SECTION 1. The City Manager or designee, or the Director of the San Antonio Metropolitan Health District or designee, is authorized to execute a renewal and amendment to an agreement with The University of Texas Health Science Center at San Antonio to continue the implementation and management of referral services for the San Antonio Metropolitan Health District's Healthy Neighborhoods program ending September 29, 2022 to increase the compensation to a total amount of \$115,550.00, inclusive of the renewal. Funding for the agreement is contingent on carryforward funding provided through the Centers for Disease Control and Prevention's (CDC) Racial and Ethnic Approaches to Community Health (REACH) Grant Budget. A copy of the amendment is attached hereto and incorporated herein for all purposes as **Attachment I**.

SECTION 2. The financial allocations in this Ordinance are subject to approval by the Deputy Chief Financial Officer, City of San Antonio. The Deputy Chief Financial Officer may, subject to concurrence by the City Manager or the City Manager's designee, correct allocations to specific SAP Fund Numbers, SAP Project Definitions, SAP WBS Elements, SAP Internal Orders, SAP Fund Centers, SAP Cost Centers, SAP Functional Areas, SAP Funds Reservation Document Numbers, and SAP GL Accounts as necessary to carry out the purpose of this Ordinance.

SECTION 3. This Ordinance is effective immediately upon the receipt of eight affirmative votes; otherwise, it is effective ten days after passage.

PASSED AND APPROVED this 27th day of January, 2022.


M A Y O R
Ron Nirenberg

ATTEST:


Debbie Racca-Sittre, Acting City Clerk

APPROVED AS TO FORM:


Andrew Segovia, City Attorney



City of San Antonio

City Council Meeting January 27, 2022

25. 2022-01-27-0041

Ordinance approving a renewal and amendment to an agreement with The University of Texas Health Science Center at San Antonio to continue the implementation and management of referral services for the San Antonio Metropolitan Health District's Healthy Neighborhoods program to increase the compensation to a total amount of \$115,550.00, inclusive of the renewal funded by the CDC REACH grant budget. [Erik Walsh, City Manager; Claude Jacob, Director, Health]

Councilmember Rocha Garcia moved to Approve on Zoning Consent. Councilmember Courage seconded the motion. The motion carried by the following vote:

Aye: Nirenberg, Bravo, McKee-Rodriguez, Viagran, Rocha Garcia, Castillo, Cabello
Havrda, Sandoval, Pelaez, Courage, Perry

ATTACHMENT I

RENEWAL AND AMENDMENT OF PROFESSIONAL SERVICES AGREEMENT

This renewal and amendment is entered into by and between the City of San Antonio, a Texas Municipal Corporation, (hereinafter referred to as "City") acting by and through the San Antonio Metropolitan Health District ("Metro Health") and The University of Texas Health Science Center at San Antonio ("Institution" or "CONTRACTOR") an institution of The University of Texas System and an agency of the State of Texas, on behalf of its Institute for Health Promotion Research. City and CONTRACTOR may be referred to herein collectively as the "Parties."

The Parties hereto severally and collectively agree, and by the execution hereof are bound, to the mutual obligations herein contained and to the performance and accomplishment of the tasks hereinafter described.

WHEREAS, the U.S. Department of Health and Human Services' (DHHS) Racial and Ethnic Approaches to Community Health (REACH) Healthy Neighborhoods Project's (FALN #93.738, FAIN#NU58DP006589) purpose is to expand the existing Healthy Neighborhoods program to promote tobacco-free living, improved nutrition, and community-clinical strategies among African American and Latino communities on the near East, South, and West sides of San Antonio; and

WHEREAS, the City entered into an agreement ("the Agreement") with CONTRACTOR for services for a term of January 1, 2021 through September 29, 2021; and

WHEREAS, pursuant to the Agreement, CONTRACTOR services include supporting bi-directional communication/referrals between entities in the clinical sector and community based programs for Metro Health's REACH Healthy Neighborhoods Project (Project); and

WHEREAS, CONTRACTOR has continued to provide services as part of the Project and intends to continue to provide services in order to meet Project goals; and

WHEREAS, the Parties wish to amend the Agreement to renew and extend the term through September 29, 2022, amend the scope of services for CONTRACTOR to continue to provide additional services and increase the total compensation; and

WHEREAS, it is in the best interest of the City that an amendment and renewal of the Agreement now be executed; **NOW THEREFORE:**

City and CONTRACTOR agree to amend the Agreement as follows:

ARTICLE I **AMENDMENTS**

1. Article I, "Term", Section 1.1 is amended to read as follows:

1.1 The term of this Agreement commences on January 1, 2021 and terminates on September 29, 2022.

2. Article II, "Scope of Services", Section 2.1 is amended to add section 2.1.7 as follows:

2.1.7 During the period of September 30, 2021 through September 29, 2022, CONTRACTOR shall (1) continue facilitating community and clinical linkages (CCL) planning and implementation meetings, (2) serve as the liaison for the bi-directional transfer of referrals and patient participation information

for Metro Health programs and UHS providers, (3) plan for sustainability, and (4) submit monthly progress and support the development of an abstract, presentation, or manuscript as follows:

a. **CCL planning and implementation meetings.** CONTRACTOR shall facilitate CCL planning and implementation meetings for the purpose of discussing the implementation of CCL workflows and bi-directional referral processes between Metro Health and UHS clinics. These meetings will occur (a) between CONTRACTOR and Metro Health (e.g., bi-monthly meetings with Metro Health CCL coordinator), (b) between CONTRACTOR and UHS clinics, and (c) between CONTRACTOR, UHS, and Metro Health. The goal for these meetings will be to establish, build, and strengthen meaningful and mutually beneficial relationships for CCL work.

b. **CCL liaison.** CONTRACTOR shall serve as the liaison for coordinated care for UHS patients using community health workers (CHWs). CONTRACTOR shall provide partial support for CHWs and research area specialists to:

1. Manage the referral and enrollment of patients into the Diabetes Prevention and Diabetes Management programs. This includes CHWs completing and submitting diabetes prevention and management enrollment forms.
2. Manage the bi-directional transfer of program participant progress. This includes a research area specialist receiving participation data from the Diabetes Management and Prevention program at enrollment, mid-point, and program completion. This information will be entered into the patient's medical record by the referring CHW.
3. Outreach to patients referred and enrolled into the QUITXT program. This includes CHWs outreaching to patients who have been referred to the program once a month for six months and progress notes placed in the patient's medical record.
4. Create processes for gathering and incorporating feedback from providers, patients, and community members.

c. **Plan for sustainability.** CONTRACTOR shall work closely with UHS and Metro Health to develop a Sustainability Plan. CONTRACTOR shall explore methods to implement and manage the bi-directional referral process. Methods may include, but are not limited to, CONTRACTOR providing for designated Metro Health staff to access the UHS medical records system (Epic) to directly manage the bi-directional referral process.

d. **Monthly progress reports and dissemination or documentation.** CONTRACTOR shall quarterly submit monthly progress reports that describe activities that occurred for each month and provide information on the number of patients referred to each program. Additionally, CONTRACTOR shall work with Metro Health and develop an abstract or manuscript to be submitted by September 29, 2022, that describes the process used to establish CONTRACTOR's CCL program. Contractor shall also submit a Final Report to include:

1. Summary of year of activities, including names of partner clinics and local health and prevention programs.
2. Number of clinics that have formal partnerships with local health and prevention programs.
3. Number of patients referred to local health and prevention programs (reported in aggregate, not identifiable).
4. Number of patients enrolled in local health and prevention programs in the community after receiving a referral from the partner clinic.
5. Summary of feedback gathered from providers through Key Informant interviews and patients through interviews and/or satisfaction surveys.
6. Recommendations to the program for continuing and/or building on the work in subsequent years.

3. Article III, "Compensation to Contractor", Section 3.1 is amended to read as follows:

3.1 In consideration of CONTRACTOR's performance in a satisfactory and efficient manner, as determined solely by the Director, of all services and activities set forth in this Agreement, City agrees to pay CONTRACTOR a fee of ONE HUNDRED AND FIFTEEN THOUSAND FIVE HUNDRED FIFTY DOLLARS (\$115,550.00) as total compensation, to be paid to CONTRACTOR as set out below:

- a. Deliverable #1: 1st Quarterly Report (due February 28, 2021) - \$10,000.00
- b. Deliverable #2: 2nd Quarterly Report (due May 28, 2021) - \$10,000.00
- c. Deliverable #3: Final Report (due September 29, 2021) - \$18,000.00
- d. Deliverable #4: Monthly Progress Reports for January, February, March 2022 (due April 15, 2022) - \$19,000.00
- e. Deliverable #5: Monthly Progress Reports for April, May, June 2022 (due July 15, 2022) - \$19,000.00
- f. Deliverable #6: Monthly Progress Reports for July and August 2022 (due September 16, 2022) - \$19,000.00
- g. Deliverable #7: Sustainability Plan and Final Report due by September 30, 2022 - \$20,550.00

4. Article XVII, "Compliance", Section 17.6 is added as follows:

17.6 By signing this Agreement Contractor certifies that:

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions, which can be found at <https://www.state.gov/documents/organization/149465.pdf>.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S.C. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

5. Article XVIII, "Compliance", Section 18.11 is amended to read as follows:

18.11 Unless disclosure is authorized by the City, CONTRACTOR agrees to maintain in confidence all information pertaining to the Project or other information and materials prepared for, provided by, or obtained from City including, without limitation, reports, information, project evaluation, project designs, data, other related information (collectively, the "Confidential Information") and to use the Confidential Information for the sole purpose of performing its obligations pursuant to this Agreement. CONTRACTOR shall protect the Confidential Information and shall take all reasonable steps to prevent the unauthorized disclosure, dissemination, or publication of the Confidential Information. If disclosure is required (i) by law or (ii) by order of a governmental agency or court of competent jurisdiction, CONTRACTOR shall give the Director prior written notice that such disclosure is required with a full and complete description regarding such requirement. CONTRACTOR shall establish specific procedures designed to meet the obligations of this Article, including, but not limited to execution of confidential disclosure agreements, regarding the Confidential Information with CONTRACTOR's subcontractors prior to any disclosure of the Confidential Information. This Article shall not be construed to limit the funding agency's, State's or the City's authorized representatives' right to obtain copies, review and audit records or other information, confidential or otherwise, under this Agreement. Upon termination or expiration of this Agreement, CONTRACTOR shall return to City all copies of materials related to the Project, including the Confidential Information. All confidential obligations contained herein (including those pertaining to information transmitted orally) shall survive the termination of this Agreement for a period of four years from the termination or expiration hereof, unless otherwise required by laws, regulations or rules pertaining to confidentiality. The Parties shall ensure that their respective employees, agents, and contractors are aware of and shall comply with the aforementioned obligations.

Additionally, CONTRACTOR shall execute a HIPAA Business Associate Agreement in substantially the same form as shown in **Attachment I**, which is intended to protect the privacy and provide for the security of Protected Health Information disclosed pursuant to this Agreement in compliance with the Health Insurance Portability and Accountability Act of 1996, as amended, and regulations promulgated thereunder by the U.S. Department of Health and Human Services and other applicable laws.

ARTICLE II

TERMS AND CONDITIONS

All other terms, conditions, covenants and provisions of the Agreement are hereby continued and shall remain in effect in their original form, except for the provisions modified by this renewal and amendment.

EXECUTED and **AGREED** to on this _____ day of _____, 202____. This renewal and amendment may be executed in any number of counterparts, each of which shall be deemed an original and constitute one and the same instrument.

CITY OF SAN ANTONIO

**THE UNIVERSITY OF TEXAS
HEALTH SCIENCE CENTER
AT SAN ANTONIO**



Claude A. Jacob DrPH(c), MPH
Health Director
San Antonio Metropolitan Health District

Chris G. Green, CPA,
Sr. Director, Office of Sponsored Programs

APPROVED AS TO FORM:

_____ for
City Attorney

WITNESSETH:

HIPAA BUSINESS ASSOCIATE AGREEMENT

This HIPAA Business Associate Agreement (**Agreement**) is entered into by and between the City of San Antonio ("**Covered Entity**"), and The University of Texas Health Science Center at San Antonio an institution of The University of Texas System and an agency of the State of Texas, on behalf of its Institute for Health Promotion Research, a **Business Associate** ("**BA**"), referred to collectively herein as the "**Parties**."

WHEREAS, the City of San Antonio and BA have entered into a Professional Services Contract ("Service Contract"), executed on _____, whereby BA provides services to the Covered Entity; and

WHEREAS, Covered Entity and BA may need to use, disclose and/or make available certain information pursuant to the terms of the Service Contract, some of which may constitute Protected Health Information ("PHI"); and

WHEREAS, Covered Entity and BA intend to protect the privacy and provide for the security of PHI disclosed to each other pursuant to the Service Contract in compliance with the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 ("HIPAA") and regulations promulgated thereunder by the U.S. Department of Health and Human Services (the "HIPAA Regulations"), Health Information Technology for Economic and Clinical Health Act ("HITECH Act") and other applicable laws; and

WHEREAS, the purpose of this Agreement is to satisfy certain standards and requirements of HIPAA and the HIPAA Regulations, including, but not limited to, Title 45, Section 164.504(e) of the Code of Federal Regulations ("C.F.R."), as the same may be amended from time to time;

NOW THEREFORE, for good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the Parties, intending to be legally bound, hereby agree as follows:

A. Definitions. For the purposes of this Agreement, the following terms have the meanings ascribed to them:

- (1) "Breach" shall mean an impermissible use or disclosure under the Privacy Rule that compromises the security or privacy of the protected health information. An impermissible use or disclosure of protected health information is presumed to be a breach unless the covered entity or business associate, as applicable, demonstrates that there is a low probability that the protected health information has been compromised based on a risk assessment of at least the following factors:
 - (a) the nature and extent of the protected health information involved, including the types of identifiers and the likelihood of re-identification;
 - (b) the unauthorized person who used the protected health information or to whom the disclosure was made;
 - (c) whether the protected health information was actually acquired or viewed; and
 - (d) the extent to which the risk to the protected health information has been mitigated.
- (2) "Designated Record Set" shall have the same meaning as the term "designated record set" in 45 C.F.R. 164.501.
- (3) "Disclosure" with respect to PHI, shall mean the release, transfer, provision of access to or divulging in any other manner of PHI outside the entity holding the PHI.

- (4) "Health Information" is defined in 45 C.F.R. 160.103 as any information, including genetic information, whether oral or recorded in any form or medium that: (1) is created or received by a health care provider, health plan, public health authority, employer, life insurer, school or university, or health care clearinghouse; and (2) relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual.
- (5) "Individual" means the person who is the subject of protected health information and shall include a person who qualifies as a personal representative in accordance with 45 C.F.R. 164.502(g).
- (6) "Individually Identifiable Health Information" is defined in 45 C.F.R. 160.103 as information that is a subset of health information, including demographic information collected from an individual, and: (1) is created or received by a health care provider, health plan, employer, or health care clearinghouse; and (2) relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual; and (i) identifies the individual; or (ii) with respect to which there is a reasonable basis to believe the information can be used to identify the individual.
- (7) "Privacy Rule" shall mean the regulations for Privacy of Individually Identifiable Health Information at 45 C.F.R. Part 160 and Part 164, Subpart E.
- (8) "Protected Health Information" or "PHI" shall have the same meaning as the term "protected health information" in 45 C.F.R. 160.103, limited to the information created or received by BA from or on behalf of Covered Entity. PHI includes "Electronic Protected Health Information" or "EPHI" and shall have the meaning given to such term under the HIPAA Rule, including but not limited to 45 C.F.R. Parts 160, 162, 164, and under HITECH.
- (9) "Required By Law" means a mandate contained in law that compels an entity to make a use or disclosure of protected health information and that is enforceable in a court of law. Required by law includes, but is not limited to, court orders and court-ordered warrants; subpoenas or summons issued by a court, grand jury, a governmental or tribal inspector general, or an administrative body authorized to require the production of information; a civil or an authorized investigative demand; Medicare conditions of participation with respect to health care providers participating in the program; and statutes or regulations that require the production of information, including statutes or regulations that require such information if payment is sought under a government program providing public benefits. 45 C.F.R. 164.103.
- (10) "Secretary" shall mean the Secretary of the U.S. Department of Health and Human Services or his designee.
- (11) "Security Rules" shall mean the Security Standards for the Protection of Electronic Protected Health Information codified at 45 C.F.R. Part 164.
- (12) The Health Information Technology for Economic and Clinical Health ("HITECH") Act shall mean Division A, Title XII of the American Recovery and Reinvestment Act of 2009 (Pub. L. 111-5).

B. BA Obligations and Activities. BA agrees that it shall:

- (1) Not use or disclose the PHI other than as permitted or required by this Agreement or as Required by Law;

- (2) Establish and maintain appropriate administrative, physical, and technical safeguards that reasonably and appropriately protect, consistent with the services provided under this Agreement, the confidentiality, integrity, and availability of the electronic protected health information that it creates, receives, maintains, or transmits on behalf of Covered Entity;
- (3) Mitigate, to the extent practicable, any harmful effect that is known to BA of a use or disclosure of PHI by BA in violation of the requirements of this Agreement;
- (4) Report to Covered Entity any use or disclosure of PHI of which BA is aware or becomes aware that is not provided for or allowed by this Agreement as well as any Security Incident as defined by 45 C.F.R. 164.304 that BA becomes aware of;
- (5) Ensure that a business associate agreement is in place with any of its agents or subcontractors with which BA:
 - (a) does business, and
 - (b) to whom it provides PHI received from, or created or received by BA on behalf of, Covered Entity; and ensures such agents or subcontractors are aware of and agree to the same restrictions and conditions that apply through this Agreement to BA with respect to such information, and further agree to implement reasonable and appropriate administrative, physical and technical safeguards that render such PHI unusable, unreadable and indecipherable to individuals unauthorized to acquire or otherwise have access to such PHI;
- (6) Provide access, at the request of Covered Entity, and in a reasonable time and manner as agreed by the Parties, to PHI in a Designated Record Set to Covered Entity or, as directed by Covered Entity, to an Individual in order to meet the requirements 45 C.F.R. §164.524;
- (7) Make any amendment(s) to PHI in a Designated Record Set that the Covered Entity directs or agrees to pursuant to 45 C.F.R. 164.526 at the request of the Covered Entity or an Individual, and in a reasonable time and manner agreed to by the Parties;
- (8) Make available to the Covered Entity or to the Secretary all internal practices, books and records, including policies and procedures and PHI, relating to the use and disclosure of PHI received from, or created or received by the BA on behalf of the Covered Entity, for purposes of the Secretary in determining Covered Entity's compliance with the Privacy Rule;
- (9) Document disclosures of PHI, and information related to such disclosures, as would be required for Covered Entity to respond to a request from an Individual for an accounting of disclosures of PHI in accordance with 45 C.F.R. 164.528;
- (10) Provide Covered Entity or an Individual, in a reasonable time and manner as agreed to by the Parties, information collected in accordance with Section B(9) of this Agreement, to permit Covered Entity to respond to a request by an Individual for an accounting of disclosures of PHI in accordance with 45 C.F.R. 164.528;
- (11) Immediately, and in no event later than three days from discovery, notify Covered Entity of any breach of PHI, including ePHI, and will coordinate with Covered Entity to identify, record, investigate, and report to an affected individual and U.S. Department of Health and Human Services, as required, any covered PHI breach. Breach notification to Covered Entity must include: names of individuals with contact information for those who were or may have been impacted by the HIPAA Breach; a brief description of the circumstances of the HIPAA Breach, including the date of the breach and date of discovery; a description of the types of unsecured

PHI involved in the breach; a brief description of what the BA has done or is doing to investigate the breach and mitigate harm. BA will appoint a breach liaison and provide contact information to provide information and answer questions Covered Entity may have concerning the breach;

- (12) Comply with all Security Rules requirements;
- (13) Comply with the Privacy Rule for any obligation Covered Entity delegates to BA;
- (14) Under no circumstances sell PHI in such a way as to violate Texas Health and Safety Code, Chapter 181.153, effective September 1, 2012, nor shall BA use PHI for marketing purposes in such a manner as to violate Texas Health and Safety Code Section 181.152, or attempt to re-identify any information in violation of Texas Health and Safety Code Section 181.151, regardless of whether such action is on behalf of or permitted by the Covered Entity.

C. Permitted Uses and Disclosures by BA

- (1) Except as otherwise limited in this Agreement, BA may use or disclose PHI to perform functions, activities, or services for, or on behalf of, Covered Entity as specified in the Service Contract, provided that such use or disclosure would not violate the Privacy Rule if done by Covered Entity.
- (2) Except as otherwise limited in this Agreement, BA may disclose PHI for the proper management and administration of the BA, provided that disclosures are Required By Law, or BA obtains reasonable assurances from the person to whom the information is disclosed that it will remain confidential and used or further disclosed only as Required By Law or for the purpose for which it was disclosed to the person, and the person notifies the BA of any instances of which it is aware in which the confidentiality of the information has been breached.
- (3) Except as otherwise limited in this Agreement, BA may use PHI to provide Data Aggregation Services to Covered Entity as permitted by 45 C.F.R. 164.504(e)(2)(i)(B).
- (4) BA may use PHI to report violations of law to appropriate Federal and State authorities, consistent with 45 C.F.R. 164.502(j)(1).

D. Obligations of Covered Entity. Covered Entity shall inform BA of its privacy practices and restrictions as follows. Covered Entity shall:

- (1) Notify BA of any limitations in its notice of privacy practices in accordance with 45 C.F.R. 164.520, to the extent that such limitation may affect BA's use or disclosure of PHI;
- (2) Notify BA of any changes in, or revocation of, permission by any Individual to use or disclose PHI, to the extent that such changes may affect BA's use or disclosure of PHI;
- (3) Notify BA of any restriction to the use or disclosure of PHI that Covered Entity has agreed to in accordance with 45 C.F.R. 164.522 to the extent that such changes may affect BA's use or disclosure of PHI.
- (4) Coordinate with BA regarding any PHI breach and make timely notification to affected individuals within 60 days of discovery.

E. Permissible Requests by Covered Entity.

Covered Entity shall not request BA to use or disclose PHI in any manner that would not be permissible under the Privacy Rule if done by Covered Entity, except that the BA may use or disclose PHI for data aggregation or management and administrative activities of the BA.

F. Term and Termination.

- (1) This Agreement becomes effective on the date it is signed by the last Party. This Agreement shall terminate when all PHI encompassed by this Agreement is destroyed or returned to Covered Entity or, if it is infeasible to return or destroy the PHI, protections are extended to such information in accordance with the termination provisions in this Section.
- (2) Termination for Cause. Upon Covered Entity's knowledge of a material breach by BA, Covered Entity shall either (a) provide an opportunity for BA to cure the breach in accordance with the terms of the Service Contract or, if the BA does not cure the breach or end the violation within the time for cure specified in the Service Contract, end the violation and terminate this Agreement and the Service Contract; or (b) immediately terminate this Agreement and the Service Contract if BA has breached a material term of this Agreement and cure is not possible. If neither termination nor cure is feasible, Covered Entity shall report the violation to the Secretary.
- (3) Effect of Termination.
 - (a) Except as provided below in paragraph (b) of this Section F(3), upon termination of this Agreement for any reason, BA shall return or destroy all PHI received from the Covered Entity, or created or received by BA on behalf of Covered Entity. This provision shall apply to PHI that is in the possession of BA or its subcontractors or agents. BA shall not retain any copies of PHI.
 - (b) In the event that BA determines that returning or destroying PHI is infeasible, BA shall provide to Covered Entity written notification of the condition that makes the return or destruction of PHI infeasible. Upon BA's conveyance of such written notification, BA shall extend the protections of this Agreement to such PHI and limit further uses and disclosures of such PHI to those purposes that make its return or destruction infeasible, for so long as BA maintains such PHI.
- (4) Notwithstanding any other provision under this Agreement, the Parties agree that the Service Contract may be terminated by either Party without penalty should the other Party violate a material obligation under this Agreement.

G. Amendment to Comply with Law. The Parties agree to take written action as is necessary to amend this Agreement to comply with any Privacy Rules and HIPAA legal requirements for Covered Entity without the need for additional council action.

H. Survival. The respective rights and obligations of the BA under Sections B, C (2) and (4), and F(3) shall survive the termination of this Agreement.

I. Interpretation. Any ambiguity in this Agreement shall be interpreted to permit Covered Entity to comply with the Privacy Rule.

J. Regulatory References. A reference in this Agreement to a section in the Privacy Rule means the section as in effect or amended.

- K. **No Third Party Beneficiaries.** Nothing express or implied in this Agreement is intended to confer, nor shall anything herein confer upon any person other than Covered Entity, BA, and their respective successors or assigns, any rights, remedies, obligations, or liabilities whatsoever.
- L. **INDEMNIFICATION.** BA and Covered Entity acknowledge they are subject to, and comply with, the applicable provisions of the Texas Tort Claims Act, as set out in the Civil Practice and Remedies Code, Section 101.001, et. seq. and the remedies authorized therein regarding claims or causes of action that may be asserted by third parties for accident, injury or death. BA and Covered Entity shall each promptly notify the other in writing of any claim or demands that become known against them in relation to or arising out of activities under this Agreement.
- M. **Reimbursement.** BA will, to the extent authorized by relevant law, reimburse Covered Entity for reasonable costs incurred responding to a PHI breach by BA or any of BA's subcontractors.
- N. **Waiver.** No provision of this Agreement or any breach thereof shall be deemed waived unless such waiver is in writing and signed by the party claimed to have waived such provision or breach. No waiver of a breach shall constitute a waiver of or excuse any different or subsequent breach.
- O. **Assignment.** Neither party may assign (whether by operation of law or otherwise) any of its rights or delegate or subcontract any of its obligations under this Agreement without the prior written consent of the other party. Notwithstanding the foregoing, Covered Entity shall have the right to assign its rights and obligations hereunder to any entity that is an affiliate or successor of Covered Entity, without the prior approval of BA.
- P. **Entire Agreement.** This Agreement constitutes the complete agreement between Business Associate and Covered Entity relating to the matters specified in this Agreement, and supersedes all prior representations or agreements, whether oral or written, with respect to such matters. In the event of any conflict between the terms of this Agreement and the terms of the Service Contract or any such later agreement(s), the terms of this Agreement shall control unless the terms of such Service Contract comply with the Privacy Standards and the Security Standards. No oral modification or waiver of any of the provisions of this Agreement shall be binding on either party. This Agreement is for the benefit of, and shall be binding upon the parties, their affiliates and respective successors and assigns. No third party shall be considered a third-party beneficiary under this Agreement, nor shall any third party have any rights as a result of this Agreement.
- Q. **Governing Law.** This Agreement shall be governed by and interpreted in accordance with the laws of the State of Texas. Venue of any court action brought directly or indirectly by reason of this Agreement shall be in Bexar County, Texas.

EXECUTED to be effective _____, 202__, by the **City of San Antonio**, signing by and through its program manager.

COVERED ENTITY
By City of San Antonio

BUSINESS ASSOCIATE:

By: _____

By: Chris G. Green

Claude A. Jacob DrPH(c), MPH
Health Director
San Antonio Metropolitan Health District

Chris G. Green, CPA,
Sr. Director, Office of Sponsored Programs

APPROVED AS TO FORM:

_____ for
City Attorney