

**INDIVIDUAL CHILD WELFARE WRAPAROUND SERVICES CONTRACT**

New       Renewal       Modification

Region	County	Date Contract Begins	Date Contract Ends (before end of current fiscal year)
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This contractual agreement for purchasing Wraparound Program Services is between the Department of Human Services and:

Provider Name	Date
Street Address	City State Zip Code

The Department is contracting to purchase the services listed below in accordance with the service rates, maximum service amounts, and all other conditions outlined in this agreement.

<u>Services</u>	<u>Service Description</u>	<u>Rate/Unit</u>	<u>Maximum Service Amount</u>
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Attach any program description or other information concerning the services.

**Maximum Contract Amounts =**

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## General Contract Conditions

1. The provider agrees to provide Child Welfare Wraparound Services for the Department of Human Services consistent with all terms of this agreement.
2. The Department of Human Services will authorize the provider to deliver services for specific clients determined by the Department to be eligible for wraparound funding. The provider shall claim reimbursement from the Department only for services provided to these clients.
3. The total amount of this contract represents the maximum amount the provider can be reimbursed for providing wraparound services for the Department under this agreement. The actual amount of reimbursement will vary depending on the referral of clients by the Department to provider.
4. At intervals specified by the Department the provider shall submit billings containing: the names of clients receiving services from the provider, the dates and amounts of service provided to each client, the total number of service units provided for all clients during the billing period, and the total amount being billed. Additionally, the provider shall maintain a written log documenting all contacts made on behalf of assigned clients. At a minimum, these logs shall include the nature of the contacts and the amount of service time provided.
5. The provider is considered an independent contractor in delivering service for the Department under this agreement and will receive no other benefits other than those described in this agreement. The provider is responsible for reporting all income received under this agreement to the state and federal governments as required by law. The Department will report fees paid under this agreement to the state and federal governments. The Department assumes no liability for actions of the provider in delivering services.
6. Individuals providing wraparound program services who are expected to receive \$1,000 or more in state payments for services may be determined to be employees of the state of Iowa for payment purposes, based on regulations and rulings of the Internal Revenue Service. If the Department of Revenue and Finance makes this determination, then these individuals will be reimbursed through the state payroll system, with federal and state income taxes and social security payments automatically withheld by the state.
7. This contract may not be assigned to another contractor or agency without the consent of the Department.
8. The provider agrees to comply with all applicable state and federal laws and regulations.
9. The provider shall preserve confidential information about all assigned clients and their families. In the event of a breach of this provision, the Department may immediately terminate this contract. Additionally, the provider may be held personally liable in the case of civil damages.
10. It is the responsibility of the provider to contact this agency within 24 hours of the end of the provider's assignment or contract to request a possible reassignment. Failure to respond will be considered a voluntary resignation.
11. If funding anticipated for the continued fulfillment of this contract is not at any time forthcoming or sufficient, the Department reserves the right to terminate this contract immediately by providing verbal or written notice to the contractor. The provider shall be reimbursed in full for services provided before the date of termination.
12. Either party may terminate this contract with 30 days notice to the other party.

**Special Contract Conditions**

Describe any special requirements that the provider submit verification of service delivery, progress reports, or other conditions for the delivery of the specific services under this agreement. **Outline the schedule of payment for services and procedure for payment.**

Provider Signature	Date
DHS Regional Administrator or Designee Signature	Date
JCO Supervisor Signature (if appropriate)	Date