

**Interoperability**  
**CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY**  
**“CalMHSA”**  
**PARTICIPATION AGREEMENT AMENDMENT NO. 2**  
**INTEROPERABILITY SOLUTION PROGRAM**

This Participation Agreement Amendment No. 2 (“Amendment No. 2”) amends Participation Agreement No. # 5132-INT-2023-SON (the “Agreement”) between the California Mental Health Services Authority (“CalMHSA”) and Sonoma County (“Participant”). CalMHSA and Participant may be referred to individually as a “Party” and collectively as “Parties.”

**1. Purpose**

CalMHSA and Participant agree to amend the Agreement to add implementation and subscription services for the CalMHSA Connex Closed Loop Referral (“CLR”) and Prior Authorization (“PA”) Module, as described in this Amendment No. 2. The module will enable counties to manage end-to-end referral and authorization workflows electronically and improve care coordination through an interoperable, FHIR-based infrastructure compliant with federal and state interoperability requirements.

The term of the CLR/PA services and associated fees under this Amendment No. 2 shall run from January 1, 2026 through December 31, 2026, unless earlier terminated in accordance with the Agreement. All other services under the Agreement shall continue to follow the term specified in the Agreement.

This Amendment No. 2 increases the total funding under the Agreement by \$157,500, which is in addition to the total funding stated on the Cover Sheet of the Agreement.

**2. Revised Exhibit A – Program Description and Funding**

This Amendment No. 2 revises Exhibit A of the Agreement to include the following:

Project Overview

CalMHSA will design, develop, and implement a Closed Loop Referral and Prior Authorization framework within the Connex platform to support county behavioral health agencies. The project will be compliant with the CMS Interoperability and Prior Authorization Final Rule (CMS-0057-F), the DHCS interoperability and data-sharing mandates, and Assembly Bill 352, HIPAA, and 42 CFR Part 2. Through this initiative, Participant, managed care plans, and community-based partners will have the tools to initiate, track, and confirm referrals and prior authorization requests within a single, secure system.

The CLR/PA implementation will help to improve coordination of care by allowing real-time data exchange between participating organizations and automating documentation processes that traditionally required manual effort.

### Project Objectives

The CLR/PA Module delivers a unified referral and authorization system that enables electronic management of end-to-end workflows within Connex, supports CalAIM and state/federal interoperability policies, and strengthens communication among counties, providers, managed care plans, and community partners. It provides real-time visibility into referral status, service engagement, and authorization outcomes while reducing administrative burden through workflow automation and built-in validation processes.

### Deliverables

1. Deliverable 1 – Project Initiation and Launch: CalMHSA will conduct a kickoff meeting to confirm project scope, governance structure, and key roles. Access to shared tools, testing environments, and communication channels will be established. A detailed project timeline, sprint plan, and progress tracking process will be developed to guide implementation.
2. Deliverable 2 – Referral and Prior Authorization Framework: CalMHSA will configure the backend infrastructure to support Coverage Requirements Discovery (CRD), Document Template & Rules (DTR), and Prior Authorization Submission (PAS) functions using FHIR standards. This includes enabling real-time determination of authorization requirements, facilitating submission of supporting documentation, and implementing audit logging for all referral and authorization transactions.
3. Deliverable 3 – User Interface and Referral Tools: CalMHSA will develop an intuitive interface within Connex for initiating, reviewing, and tracking referrals and authorizations. The interface will support secure document uploads, dynamic form visibility, and automated confirmation receipts, while maintaining real-time synchronization between the user interface and backend services. CalMHSA-configured assessments will be linked to service referrals to support end-to-end tracking of client progress, and all system actions will be logged for transparency.
4. Deliverable 4 – Access Controls and Security Configuration: CalMHSA will implement role-based permissions for county and provider users (including clinicians, administrators, and other designated roles). Field-level security settings will be configured to align with HIPAA, 42 CFR Part 2, and DHCS privacy and consent standards. Comprehensive system logging will confirm user activity and data transactions.
5. Deliverable 5 – Training and Deployment: Following testing and validation, CalMHSA will deploy the production-ready CLR/PA framework within Connex. Training sessions, user guides, and technical documentation will be provided, and CalMHSA will conduct post-launch stabilization and knowledge-transfer sessions with county staff.

### Participant Referral Partner Engagement

During implementation, CalMHSA and the Participant shall collaborate to identify and onboard referral partners such as community-based organizations and managed care plans. Engagement activities will include hosting orientation sessions, confirming technical readiness, reviewing workflows and data requirements, and clarifying privacy and referral confirmation practices.

By project completion, referral partners will be trained or connected to the Connex platform, and referral loop closure tracking will be validated across county and partner systems.

### Scope of Work

This Amendment No. 2 revises Exhibit A of the Agreement to include the following:

#### **CalMHSA Responsibilities**

CalMHSA will provide Participant the following services:

- CalMHSA shall lead the design, development, and deployment of the Closed Loop Referral and Prior Authorization (CLR/PA) framework within Connex.
- CalMHSA shall support alignment of the solution with CMS and DHCS interoperability standards (FHIR-based CRD, DTR, PAS).
- CalMHSA shall manage project coordination, quality assurance, user support, and performance monitoring throughout implementation.
- CalMHSA shall provide training sessions, user documentation, and implementation materials to Participant staff.
- CalMHSA shall maintain regular communication with Participant throughout progress reports, status updates, and milestone tracking.
- CalMHSA shall deliver post-launch first-line ("Tier 1") technical support and assistance through the Connex helpdesk.

#### **Participant Responsibilities**

Participant shall be responsible for the following:

- Participant shall designate a project lead and subject matter experts to participate in all phases of implementation, testing, and validation.
- Participant shall provide existing referral workflows, policies, and documentation to guide configuration.
- Participant shall coordinate engagement of local provider networks and Managed Care Plans (MCPs) to align referral processes.
- Participant shall participate in training and onboarding sessions.
- Participant shall comply with all data-sharing, privacy, and security standards required under the Agreement and applicable law.

- Participant shall maintain an up-to-date list of authorized users and promptly notify CalMHSA of any changes to user access or staffing.

### Funding

Pursuant to Exhibit A – Program Description and Funding and Exhibit B – General Terms and Conditions, Section V. Fiscal Provisions of the Agreement, the following funding terms are hereby added for the CalMHSA Connex Closed Loop Referral (“CLR”) and Prior Authorization (“PA”) Module for the period January 1, 2026 through December 31, 2026:

SERVICE TYPE	ONE-TIME FEE
Implementation & Project Management Fee	\$62,500
SUBSCRIPTION FEE	ANNUAL RATE
Annual Subscription Fee <ul style="list-style-type: none"><li>• Transaction Limit: 3000 per month</li></ul>	\$95,000
OPTIONAL ADDITIONAL SERVICES	RATE
Additional Monthly Transaction Capacity <ul style="list-style-type: none"><li>• Adds 500 additional transactions per month above the standard allotment in the subscription</li><li>• May be added in 500-transaction increments</li></ul>	\$500 per Month

**Invoicing:** Participant shall be invoiced for the One-Time Implementation & Project Management Fee upon execution of this Amendment No. 2. The Annual Subscription Fee shall be invoiced quarterly in arrears, with invoices issued at or after the close of each calendar quarter for services rendered during the preceding quarter. Optional Additional Services, including additional monthly transaction bundles, shall also be invoiced quarterly in arrears based on actual usage. All invoices issued under this Amendment No. 2 shall be payable within thirty (30) days of receipt in accordance with the payment terms of the Agreement.

The amounts above are in addition to the total funding stated on the Cover Sheet of the Agreement. All other fiscal provisions of the Agreement shall remain in full force and effect.

### **3. No Other Changes**

All other terms or provisions in the Agreement not cited in this Amendment No. 2, shall remain in full force and effect.

*(Authorized signatures follow on the next page)*

**4. Signatures**

**CalMHSA**

Signed: \_\_\_\_\_ Name (Printed): Dr. Amie Miller, Psy.D., MFT  
Title: Executive Director Date: \_\_\_\_\_

**Participant:**

Signed: \_\_\_\_\_ Name (Printed): \_\_\_\_\_  
Title: \_\_\_\_\_ Date: \_\_\_\_\_

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