



**DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE**

**CONTRACT RENEWAL AGREEMENT**

**DEPARTMENT:** Behavioral Health, Developmental Disabilities & Addictive

**BID/RFP NUMBER:** 22RFP038A-CJC(A)

**BID/RFP TITLE:** Behavioral Health Network

**ORIGINAL APPROVAL DATE:** November 2, 2022

**RENEWAL EFFECTIVE DATES:** January 1, 2025 - December 31, 2025

**RENEWAL OPTION #: 2 OF 9**

**NUMBER OF RENEWAL OPTIONS:** 9

**RENEWAL AMOUNT:** \$4,208,688.44

**COMPANY'S NAME:** River Edge Behavioral Health

**ADDRESS:** 175 Emery Highway

**CITY:** Macon

**STATE:** GA

**ZIP:** 31217

**This Renewal Agreement No. 2 was approved by the Fulton County Board of**

**Commissioners on BOC DATE:** 11/6/2024 **BOC NUMBER:** 24-0737(A)

**CERTIFICATE OF INSURANCE:** The Contractor/Vendor is required to maintain insurance during the entire term of this Agreement, including any contract renewals. Upon request, the Contractor/Vendor must furnish the County a Certificate of Insurance showing the required coverage as specified in the Contract Agreement and any renewals. A current COI must be provided before the commencement of work on this project under this Contract Renewal. The cancellation of any policy of insurance required by this Agreement shall meet the requirements of notice under the laws of the State of Georgia as presently set forth in the Georgia Code.

**SIGNATURES: SEE NEXT PAGE**

**SIGNATURES:**

Contractor/Vendor agrees to accept the renewal option and abide by the terms and conditions set forth in the contract and specifications as referenced herein:

**FULTON COUNTY, GEORGIA**

**River Edge Behavioral Health**

Signed by:

*Robert L. Pitts*

**Robert L. Pitts, Chairman  
Fulton County Board of Commissioners**

DocuSigned by:

*Cass Hatcher*

**Cass Hatcher  
Chief Executive Officer**

**ATTEST:**

**ATTEST:**

DocuSigned by:

*Tonya R. Grier*

**Tonya R. Grier  
Clerk to the Commission**

**(Affix County Seal)**



**AUTHORIZATION OF RENEWAL:**

**Secretary/  
Assistant Secretary**

**(Affix Corporate Seal)**

**ATTEST:**

DocuSigned by:

*LaTrina R. Foster*

**LaTrina Foster, Director  
Behavioral Health, Developmental  
Disabilities & Addictive**

X JoAnne Sims

**Notary Public**

**County:** Jones

**Commission Expires:** 1/2/2027

**(Affix Notary Seal)**



RCS

X RM

**ITEM#:** \_\_\_\_\_ **RCS:** \_\_\_\_\_  
**REGULAR MEETING**

**ITEM#:** 24-0737 **RM:** 11/6/2024 1st Reg Meeting  
**SECOND REGULAR MEETING**

Certificate of Insurance



## **CERTIFICATE OF INSURANCE**

STATE OF GEORGIA  
DEPARTMENT OF ADMINISTRATIVE SERVICES  
CERTIFICATE OF INSURANCE

<b>Name and Address of Agency</b> Department of Administrative Services Risk Management Services 200 Piedmont Avenue SE Suite 1220 West Tower Atlanta, Georgia 30334-9010	<b>Coverages Afforded By:</b>		
	Company Letter	A	State of Ga. Risk Management Services
	Company Letter	B	Nationwide Casualty Company
	Company Letter	C	
<b>Name and Address of Insured</b> CSB-River Edge Behavioral Health 175 Emery Hwy. Macon, GA 31217	Company Letter	D	
	Company Letter	E	

This certificate is given as a matter of information only and confers no rights upon the certificate holder. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policy(ies) described herein is subject to all the terms, exclusions and conditions of such policy(ies). This certificate does not amend, extend or otherwise alter the coverages afforded by the policy(ies) described herein.

COMPANY LETTER	TYPES OF INSURANCE	POLICY NUMBER	POLICY EXPIRES	LIMITS APPLY SEPARATELY PER POLICY
A	COV. LIABILITY (GL, MEDICAL MALPRACTICE) A TORT CLAIMS LIABILITY POLICY. State agency or Authority is insured When sued in state courts.	TCP 401-14-25	6/30/2025	BODILY INJURY & PROPERTY DAMAGE & PERSONAL INJURY COMBINED
A	B EMPLOYEE LIABILITY POLICY. Employee is insured when sued Individually.	CGL 401-14-25	6/30/2025	PER PERSON \$1,000,000
	C STATE AUTHORITY POLICY. Coverage applies when Authority. is sued in federal court			AGGREGATE \$3,000,000
				OCCURRENCE POLICIES (X)
A	Contractual and/or Additional Insured Coverage applies to Certificate Holder if policy A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> is checked			
	COV. AUTOMOBILE LIABILITY COVERAGE D Owned, rented, and non-owned automobiles when Agency or Authority is sued in state court or employee is sued in federal court	TCP 401-14-25	6/30/2025	C.S.L PER PERSON \$1,000,000
				AGGREGATE \$3,000,000
	E Physical Damage Coverage			Other than Coll. 500 Ded. Coll. 500 Ded.
	F Excess Authority Coverage when Authority is sued in federal court			LIMITS SHOWN INCLUDE THE LIMITS OF LIABILITY SHOWN UNDER COVERAGES C-D FOR AUTHORITIES ONLY SINGLE LIMIT LIABILITY:
	G Excess Contractual and /or additional insured coverage when certificate holder is sued in federal or state court yes <input type="checkbox"/> no <input type="checkbox"/>			
A	H WORKER'S COMP. COVERAGE	SELF-INSURED	NONE	STATUTE
B	COV. MISC. COVERAGE I Property J Other Fidelity Bond	FCO2308758	6/30/2025	\$50,000,000

## DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES

**Contractual Liability is NOT provided and the Certificate Holder is NOT an additional insured. Coverage applies to state employees while performing state assigned duties.**

**CANCELLATION:**

In the event of cancellation of the policy(ies) described herein, Risk Management Services will endeavor to provide 30 days written notice to the certificate holder, however Risk Management Services assumes no legal responsibility for failure to do so.

NAME AND ADDRESS OF CERTIFICATE HOLDER		DATE ISSUED: <u>06/06/2024</u>
TO WHOM IT MAY CONCERN		 AUTHORIZED REPRESENTATIVE

Certificate Of Completion

Envelope Id: 881A3386656048F99F2435CE5C4EBA28		Status: Completed
Subject: 22RFP038A-CJC(A), Fulton County Behavioral Health Network (2nd Renewal)		
Parcel ID:		
Employee Name:		
Source Envelope:		
Document Pages: 4	Signatures: 4	Envelope Originator:
Certificate Pages: 6	Initials: 0	Brian Jones
AutoNav: Enabled	Stamps: 2	141 Pryor Street
Envelopeld Stamping: Enabled		Purchasing & Contract Compliance, Suite 1168
Time Zone: (UTC-05:00) Eastern Time (US & Canada)		Atlanta, GA 30303
		brian.jones@fultoncountyga.gov
		IP Address: 172.56.77.146


Record Tracking

Status: Original	Holder: Brian Jones	Location: DocuSign
11/14/2024 5:38:25 PM	brian.jones@fultoncountyga.gov	
Security Appliance Status: Connected	Pool: StateLocal	
Storage Appliance Status: Connected	Pool: Fulton County Government	Location: DocuSign

Signer Events	Signature	Timestamp
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Cass Hatcher	<div>DocuSigned by:</div> <div>Cass Hatcher</div> <div>6AABCC38ADC9426...</div>	Sent: 11/14/2024 5:56:10 PM
chatcher@river-edge.org		Viewed: 11/18/2024 8:40:56 AM
CEO		Signed: 11/18/2024 8:46:16 AM
Security Level: Email, Account Authentication (None)	Signature Adoption: Pre-selected Style	
	Using IP Address: 173.221.204.52	

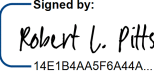
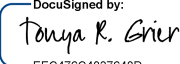

Electronic Record and Signature Disclosure:  
Accepted: 11/18/2024 8:40:56 AM  
ID: 06db5d0a-d66b-45c2-8101-68fe45673495

JoAnne Sims	<div>Signed</div> <div></div>	Sent: 11/18/2024 8:46:18 AM
jsims@river-edge.org		Viewed: 11/18/2024 8:50:03 AM
Security Level: Email, Account Authentication (None)		Signed: 11/18/2024 9:23:03 AM
	Using IP Address: 173.221.204.52	

Electronic Record and Signature Disclosure:  
Accepted: 11/18/2024 8:50:03 AM  
ID: 7f7574df-7296-4777-a8d0-6cfd3358a543

LaTrina R. Foster	<div>DocuSigned by:</div> <div>LaTrina R. Foster</div> <div>F89646A7B011429...</div>	Sent: 11/18/2024 9:40:06 AM
LaTrina.Foster@fultoncountyga.gov		Viewed: 11/18/2024 1:38:10 PM
BHDD Director		Signed: 11/18/2024 1:38:37 PM
Fulton County Government	Signature Adoption: Pre-selected Style	
Security Level: Email, Account Authentication (None)	Using IP Address: 69.232.248.225	

Electronic Record and Signature Disclosure:  
Not Offered via DocuSign

Signer Events	Signature	Timestamp
<p>Nikki Peterson nikki.peterson@fultoncountyga.gov Chief Deputy Clerk to the Board of Commissioners Fulton County Government Security Level: Email, Account Authentication (None)</p> <p><b>Electronic Record and Signature Disclosure:</b> Accepted: 11/27/2017 1:39:37 PM ID: b7ce88ee-0c66-4f3a-bfee-705e0af602d8</p>	<p><b>Completed</b></p> <p>Using IP Address: 68.208.197.4</p>	<p>Sent: 11/18/2024 1:38:40 PM Viewed: 11/18/2024 6:54:13 PM Signed: 11/19/2024 11:50:39 AM</p>
<p>Robert L. Pitts harriet.thomas@fultoncountyga.gov Chairman Security Level: Email, Account Authentication (None)</p> <p><b>Electronic Record and Signature Disclosure:</b> Accepted: 11/19/2024 1:46:52 PM ID: 5948adca-5170-4515-ad14-04f1282861c0</p>	<p>Signed by:  14E1B4AA5F6A44A...</p> <p>Signature Adoption: Pre-selected Style Using IP Address: 68.208.197.4</p>	<p>Sent: 11/19/2024 11:50:41 AM Viewed: 11/19/2024 1:46:52 PM Signed: 11/19/2024 1:47:53 PM</p>
<p>Tonya R. Grier tonya.grier@fultoncountyga.gov Clerk to the Commission Fulton County Security Level: Email, Account Authentication (None)</p> <p><b>Electronic Record and Signature Disclosure:</b> Accepted: 3/16/2018 10:54:59 AM ID: f3f241e8-3027-4447-9476-6cf20ae25dd4</p>	<p>DocuSigned by:  EEC476C4837648D...</p> <p></p> <p>Signature Adoption: Pre-selected Style Using IP Address: 68.208.197.4</p>	<p>Sent: 11/19/2024 1:47:55 PM Viewed: 11/19/2024 1:51:50 PM Signed: 11/19/2024 1:52:01 PM</p>
<p>Brian Jones brian.jones@fultoncountyga.gov President-Elect Fulton County Government Security Level: Email, Account Authentication (None)</p> <p><b>Electronic Record and Signature Disclosure:</b> Not Offered via DocuSign</p>	<p><b>Completed</b></p> <p>Using IP Address: 74.174.59.4</p>	<p>Sent: 11/19/2024 1:52:04 PM Viewed: 11/19/2024 1:54:59 PM Signed: 11/19/2024 1:55:23 PM</p>

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
<p>Brian Jones brian.jones@fultoncountyga.gov President-Elect Fulton County Government Security Level: Email, Account Authentication (None)</p> <p><b>Electronic Record and Signature Disclosure:</b></p>	<p><b>VIEWED</b></p> <p>Using IP Address: 74.174.59.4</p>	<p>Sent: 11/18/2024 9:23:05 AM Viewed: 11/18/2024 9:40:05 AM</p>

Certified Delivery Events	Status	Timestamp
Not Offered via DocuSign		
Carbon Copy Events	Status	Timestamp
Dian DeVaughn dian.devaughn@fultoncountyga.gov Security Level: Email, Account Authentication (None)	COPIED	Sent: 11/19/2024 1:55:26 PM Viewed: 11/19/2024 3:50:46 PM
Electronic Record and Signature Disclosure: Not Offered via DocuSign		

Witness Events	Signature	Timestamp
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Notary Events	Signature	Timestamp
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Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	11/14/2024 5:56:10 PM
Envelope Updated	Security Checked	11/14/2024 6:47:03 PM
Certified Delivered	Security Checked	11/19/2024 1:54:59 PM
Signing Complete	Security Checked	11/19/2024 1:55:23 PM
Completed	Security Checked	11/19/2024 1:55:26 PM

Payment Events	Status	Timestamps
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Electronic Record and Signature Disclosure
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From time to time, Carahsoft OBO Fulton County, Georgia (we, us or Company) may be required by law to provide to you certain written notices or disclosures. Described below are the terms and conditions for providing to you such notices and disclosures electronically through the DocuSign, Inc. (DocuSign) electronic signing system. Please read the information below carefully and thoroughly, and if you can access this information electronically to your satisfaction and agree to these terms and conditions, please confirm your agreement by clicking the 'I agree' button at the bottom of this document.

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If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

### **Consequences of changing your mind**

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. To indicate to us that you are changing your mind, you must withdraw your consent using the DocuSign 'Withdraw Consent' form on the signing page of a DocuSign envelope instead of signing it. This will indicate to us that you have withdrawn your consent to receive required notices and disclosures electronically from us and you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

### **All notices and disclosures will be sent to you electronically**

Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

### **How to contact Carahsoft OBO Fulton County, Georgia:**



You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: [glenn.king@fultoncountyga.gov](mailto:glenn.king@fultoncountyga.gov)

**To advise Carahsoft OBO Fulton County, Georgia of your new e-mail address**

To let us know of a change in your e-mail address where we should send notices and disclosures electronically to you, you must send an email message to us at [glenn.king@fultoncountyga.gov](mailto:glenn.king@fultoncountyga.gov) 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..

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- i. decline to sign a document from within your DocuSign session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;
- ii. send us an e-mail to [glenn.king@fultoncountyga.gov](mailto:glenn.king@fultoncountyga.gov) and in the body of such request you must state your e-mail, full name, US Postal Address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

**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
- Until or unless I notify Carahsoft OBO Fulton County, Georgia as described above, I consent to receive from exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to me by Carahsoft OBO Fulton County, Georgia during the course of my relationship with you.