

AGREEMENT FOR NCQA PATIENT-CENTERED MEDICAL HOME (PCMH) RECOGNITION PROGRAM

The individual or organization designated below is referred to as the "Practice," and by submission of its designee's signature, agrees to the terms from the National Committee for Quality Assurance, or "NCQA," for Practice's participation in NCQA's PCMH Recognition Program.

This Agreement is effective on the date signed by NCQA and remains in effect following the Practice's enrollment in NCQA's PCMH Recognition Program and through the evaluation process, any criteria denial or recognition status decision, and all subsequent renewals. Practice agrees that in addition to the obligations under this Agreement, the Practice agrees to abide by and be bound by the policies and procedures for NCQA's PCMH Recognition Program that are in effect at the time Practice undergoes its NCQA survey, and as updated from time to time, including without limitation:

- NCQA's PCMH Standards and Guidelines that describe eligibility criteria, the process for seeking and sustaining NCQA PCMH Recognition, and notification requirements of recognized practices.
- NCQA's Guidelines for Advertising and Marketing that describe how recognized practices can promote their NCQA status and restrictions for marketing recognition status.
- NCQA Fee Schedules that establish survey pricing and payment policies.

Practice agrees to these additional terms for participation in NCOA's PCMH Recognition Program:

- 1. Practice agrees to provide only true, accurate and complete information to NCQA, and to make available to NCQA and its surveyors, reviewers, auditors, and members of the Review Oversight Committee and Reconsideration Committee information and materials about Practice and its clinicians to verify what appears in the application materials, survey tools, and data submissions. Practice also agrees that NCQA may provide to an NCQA-Certified credentialing verification organization licensure and other information to verify.
- 2. If recognized by NCQA, Practice agrees to continue to meet the requirements of PCMH recognition during the life of Practice's recognition. Practice must report to NCQA the occurrence of any reportable event in accordance with the PCMH Recognition Program policies and procedures, including without limitation a change in practice location, clinicians listed with the Practice or licensure or qualification status of a clinician, final determination by a state or federal agency with respect to an investigation, material change in structure or operation of the Practice, or the merger, acquisition or consolidation of the Practice. Practice also agrees to submit to audits, investigations, and discretionary reviews as described in the policies and procedures.
- 3. Practice understands and agrees that NCQA reserves the right to release and publish, and authorize others to publish, Practice's results under specific reporting categories, competencies, and criteria, including annual reporting and distinctions, and to use aggregate data about Practice and its clinicians as described in the policies and procedures for NCQA's PCMH Recognition Program.

- NCQA bears no responsibility for any use by third parties of the results or data, or for any effect of such release and publication on Practice.
- 4. NCQA also reserves the right to notify applicable licensing authorities and regulatory agencies if aspects of the Practice's operations pose a potential imminent threat to the health and safety of its patients and/or NCQA has reason to believe that information submitted to NCQA is fraudulent or has been falsified.
- 5. If recognition under NCQA's PCMH Recognition Program results in monetary rewards from purchasers, plans or others tied to quality, Practice understands and agrees that NCQA neither recommends nor decides whether or to what extent Practice should or will receive such rewards. Practice also agrees that NCQA PCMH Recognition is not transferable to any other person or organization unless approved by NCQA. Practice's recognition status is subject to change as described in the policies and procedures of NCQA's Recognition Program.
- 6. The deliberations of NCQA, its surveyors, reviewers, auditors, and members of the Review Oversight Committee and Reconsideration Committee information are considered and treated as peer review materials generated for the purpose of reviewing the professional services of Practice, notwithstanding any statutes, case law or other authority that would not recognize such information as peer review materials. Practice understands and agrees that the survey of the Practice and annual assessment does not constitute a warranty or representation of any kind by NCQA regarding the quality or nature of Practice's services.
- 7. Practice agrees to indemnify NCQA from and against any and all liability, loss, or damages arising from (1) third party claims regarding the quality or nature of the health care services provided or arranged by Practice or Practice's non-fulfillment of its obligations under this Agreement and NCQA's PCMH Standards and Guidelines; (2) the Practice's failure to achieve desired results under NCQA's PCMH Recognition Program; or (3) payment and network decisions made by third parties based on Practice's status under NCQA's PCMH Recognition Program; provided, that this provision shall not apply to the extent Practice is an institution of a state government, a political subdivision of a state or otherwise afforded sovereign immunity under applicable law. In no event, will NCQA be responsible for any claims or demands of third parties, or any lost profits, loss of business, loss of use, lost savings, or other consequential, special, incidental, indirect, exemplary, or punitive damages, even if advised of the possibility of such damages.
- 8. Practice will not provide to NCQA protected health information, as that term is defined under HIPAA and the Federal privacy and security regulations established at 45 C.F.R. Parts 160 and 164, as amended from time to time, unless requested by NCQA. If NCQA requests a patient example, Practice will provide a de-identified example that blocks or removes any element of protected health information. If NCQA requests an element of protected health information in evidence, such as a date of service, then Practice agrees to only provide the minimum necessary to satisfy the NCQA criteria. NCQA does not request, and a Practice should never submit evidence with patient names, social security numbers, street or email addresses, or telephone numbers to satisfy NCQA criteria. NCQA may see protected health information during virtual check-ins or an investigation as described in the PCMH Standards and Guidelines. Practice and NCQA acknowledge that they will enter into, or have entered into a Business Associate Agreement, which governs any use and disclosure of protected health information for purposes of Practice' health care quality assessment and review by NCQA and satisfaction of NCQA's criteria.

- 9. Any and all claims or actions arising under this Agreement shall be governed by the law of the District of Columbia regardless of any applicable conflicts of laws principles, and shall be exclusively resolved by a court of competent jurisdiction within the District of Columbia; provided, that this provision shall not apply if Practice is an institution of a state government, a political subdivision of a state or otherwise afforded sovereign immunity under applicable law.
- 10. A waiver of any term or condition by either party shall not constitute a waiver of any other term or condition under this Agreement, and nothing in this Agreement shall be deemed an express or implied waiver of sovereign immunity by Practice, if applicable. Sections 2, 5, 7 and 8 shall survive expiration of this Agreement or Practice's withdrawal from or loss of NCQA PCMH Recognition. This Agreement is binding on the parties' successors and permitted assigns.

THE PRACTICE AGREES TO ENTER INTO THIS AGREEMENT BY MEANS OF ELECTRONIC SIGNATURE. THE PERSON SIGNING BELOW REPRESENTS THAT BY TYPING IN AND SUBMITTING THEIR ELECTRONIC SIGNATURE TO NCQA, THEY BIND PRACTICE TO THE TERMS OF THIS AGREEMENT AND ARE AUTHORIZED TO VALIDLY ENTER INTO AND BIND PRACTICE TO THE TERMS OF THIS AGREEMENT. THIS AGREEMENT MAY ONLY BE MODIFIED IN WRITING.

Print Name of Practice:County of Monterey
By:
Name/Title: Elsa Jimenez, Director of Health
Date: 04/17/2019
National Committee for Quality Assurance
By:
Name/Title:
Date:

NCQA Patient Centered Medical Home (PCMH) Recognition Program Agreement

COUNTY OF MONTEREY

Date:
Approved as to Fiscal Provisions:
By: Gary Giboney, Auditor-Controller
Date:
Approved as to Legal Form:
By: <u>Jaella</u> Stacy L. Saetta, Deputy County Counsel
Date: 4/9/19



BUSINESS ASSOCIATE AGREEMENT

This Business Associate Agreement (the "BAA") is entered into between the National Committee for Quality Assurance ("NCQA") and the individual or entity whose signature appears below as evidence of agreement to these the terms hereinafter referred to as "Covered Entity." This BAA and any agreement for accreditation, certification, distinction, or recognition entered into by Covered Entity and NCQA establish the terms of the relationship between NCQA and Covered Entity.

WHEREAS, Covered Entity is seeking accreditation, certification or recognition by NCQA and may disclose data to NCQA and input data into data collection tools stored and maintained by NCQA, which data may include certain Protected Health Information (as defined in 45 C.F.R. § 160.103) that is subject to protection under the Federal Privacy, Security, Breach Notification, and Enforcement Rules established at 45 C.F.R. Parts 160 and 164, as amended from time to time (collectively the "HIPAA Rules"), promulgated pursuant to the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), and the Health Information Technology for Economic and Clinical Health Act provisions of the American Recovery and Reinvestment Act of 2009, Pub. Law No. 111-5 ("ARRA");

WHEREAS, NCQA may act in the role of a Business Associate (as defined in 45 C.F.R. § 160.103) for purposes of Covered Entity's health care quality assessment and review by NCQA and satisfaction of NCQA's standards and requirements and the HIPAA Rules dictate that the Covered Entity shall enter into an agreement with a Business Associate to whom it provides PHI, and this BAA shall apply to that PHI;

WHEREAS, Covered Entity may have entered into, may subsequently enter into, or may enter into simultaneously with this BAA, an agreement with NCQA to seek accreditation, certification or recognition and apply for an NCQA survey (hereinafter any such agreement will be referred to as a "Contract") and this BAA shall be applicable to any such Contract entered into by Covered Entity and NCQA when NCQA acts as a Business Associate of Covered Entity, as defined under the HIPAA Rules; and

WHEREAS, the purpose of this BAA is to satisfy certain standards and requirements of the HIPAA Rules, as the same may be amended from time to time.

NOW THEREFORE, in consideration of the mutual promises below, the receipt and sufficiency of which is hereby acknowledged, the parties agree as follows:

I. GENERAL PROVISIONS

Section 1. **Definitions.** Unless otherwise specified in the Contract or this BAA, all capitalized terms used herein and not otherwise defined shall have the meanings established by

- 45 C.F.R. Parts 160 and 164, as amended from time to time. "PHI" shall mean Protected Health Information, as defined in 45 C.F.R. § 160.103, limited to the information received from or on behalf of Covered Entity. "Electronic PHI" shall mean Electronic Protected Health Information, as defined in 45 C.F.R. § 160.103, limited to the information received from or on behalf of Covered Entity. The terms "use" and "disclosure" and any and all other terms with defined meanings established by 45 C.F.R. Parts 160 and 164, as amended from time to time, shall have the same meaning for the purpose of this BAA. References in the Contract or this BAA to a section or subsection of 45 C.F.R. Parts 160 and 164, and/or ARRA under Title 42 of the United States Code are references to provisions of ARRA and shall be deemed a reference to that provision and its existing and future implementing regulations, when and as each is effective and compliance is required under the applicable provision.
- Section 2. **Effect.** This BAA shall apply to any PHI subject to the Contract and to any PHI disclosed by Covered Entity for purposes of Covered Entity's health care quality assessment by NCQA and satisfaction of NCQA's standards and requirements and using data collection tools stored and maintained by NCQA. Any provision of the Contract, including all exhibits or other attachments thereto and all documents incorporated therein by reference, that is directly contradictory to one or more terms of this BAA ("Contradictory Term"), shall be superseded by the terms of this BAA to the extent and only to the extent of the contradiction and only to the extent that it is reasonably impossible to comply with both the Contradictory Term and the terms of this BAA. Notwithstanding anything in this Agreement to the contrary, nothing in this BAA shall alter the rights and obligations of the respective parties under the HIPAA Rules.

II. RESPONSIBILITIES OF NCQA

Section 1. Use and Disclosure of Protected Health Information. NCQA may:

- (a) use and/or disclose PHI only in the fulfillment of the Contract, this BAA, or as Required By Law, and in compliance with each applicable requirement of 45 C.F.R. § 164.504(e);
- (b) use the PHI in its possession for its proper management and administration and to fulfill any legal responsibilities of NCQA;
- (c) disclose PHI in its possession to a third party for the purpose of NCQA's proper management and administration or to fulfill any legal responsibilities of NCQA if the disclosures are Required by Law, and NCQA has received from the third party written assurances that (i) the information will be held confidentially and be used or further disclosed only as Required by Law or for the purposes for which it was disclosed to the third party, and (ii) the third party will notify NCQA (and, in accordance with Article II, Section 3 of this BAA, NCQA shall notify Covered Entity) of any instances of which it becomes aware in which the confidentiality of the information has been breached:
- (d) create a Limited Data Set and use and disclose such Limited Data Set pursuant to the Data Use Agreement as set forth in Article VI of this BAA; and

- (e) de-identify PHI obtained by NCQA under this BAA and/or the Contract, and use and/or disclose such de-identified data in the fulfillment of the Contract or this BAA, and in compliance with the de-identification requirements of the HIPAA Rules.
- NCQA shall request, use and/or disclose the minimum amount of PHI necessary with regard to its use and/or disclosure of PHI under this Section 1. NCQA shall not use or disclose PHI in a manner that would violate Subpart E of 45 C.F.R. Part 164 if done by Covered Entity. All other uses and disclosures of PHI not authorized by this BAA or the Contract are prohibited. NCQA acknowledges that it may be subject to the civil and criminal enforcement provisions set forth at 42 U.S.C. 1320d-5 and 1320d-6, as amended from time to time, for failure to comply with the use and disclosure requirements and any guidance issued by the Secretary from time to time.
- Section 2. Appropriate Safeguards. NCQA will use appropriate administrative, technical and physical safeguards to prevent the use or disclosure of PHI, other than as provided for by the Contract, this BAA or as Required by Law, in accordance with the requirements set forth in Subpart C of 45 C.F.R. Part 164, including implementing administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of the Electronic PHI that it creates, receives, maintains, or transmits on behalf of Covered Entity. NCQA will also keep current and document such security measures in written policies, procedures or guidelines, and make its policies and procedures, and documentation relating to such safeguards, available to the Secretary in accordance with the HIPAA Rules.
- Section 3. Reporting of Improper Use or Disclosure of PHI. NCQA will within ten (10) business days of becoming aware of any use or disclosure of PHI not permitted or required by the Contract or this BAA, or of any Security Incident with respect to Electronic PHI of which it becomes aware, report such use, disclosure or Security Incident to Covered Entity. NCQA agrees to mitigate, to the extent practicable, any harmful effect that is known to NCQA of a use or disclosure of PHI by NCQA in violation of the requirements of this BAA. NCQA further agrees to report without unreasonable delay, and in no case later than thirty (30) calendar days after discovery, any Breach of any Unsecured PHI in accordance with the security breach notification requirements set forth in 45 C.F.R. §§ 164.400, 164.402, and 164.410 and any guidance issued by the Secretary from time to time.
- Section 4. Subcontractors and Agents. NCQA agrees that any time PHI is provided or made available to its subcontractors or agents, NCQA will enter into an agreement with the subcontractor or agent that contains the same conditions and restrictions on the use and disclosure of PHI as contained in the Contract and this BAA in accordance with 45 C.F.R. §§ 164.502(e)(1)(ii) and 164.308(b)(2), if applicable, and will ensure that all of its subcontractors and agents to whom it provides Electronic PHI agree to implement reasonable and appropriate safeguards to protect such Electronic PHI.
- Section 5. **Right of Access, Amendment and Accounting of Disclosures**. With respect to the PHI in NCQA's possession, NCQA agrees to the following:
- (a) within fifteen (15) calendar days of receiving a written request from Covered Entity, NCQA will make available to Covered Entity information necessary for Covered Entity to make an Accounting of Disclosures of PHI about an Individual in accordance with the Privacy

Regulations as set forth in 45 C.F.R. § 164.528 and, in accordance with the requirements for Accounting for Disclosures made through an Electronic Health Record in 42 U.S.C. 17935(c), and when directed by Covered Entity, NCQA shall make that accounting directly to the Individual.

- (b) NCQA shall record the following information regarding each disclosure of PHI subject to an Accounting of Disclosures pursuant to 45 C.F.R. § 164.528: (1) date of disclosure; (2) name of entity or person who received the PHI and, if known, the address of such entity or person; (3) a brief description of the PHI; and (4) a brief statement of the purpose of the disclosure that reasonably informs the Individual of the basis for the disclosure or a copy of a written request for disclosure. For multiple such disclosures of PHI to the same person or entity for a single purpose, NCQA shall provide Covered Entity, pursuant to Article II, Section 5(a) of this BAA, (1) the information set forth in Article II, Section 5(b) of this BAA regarding the first disclosure; (2) the frequency, periodicity or number of disclosures made during the accounting period; and (3) the date of the last such disclosure during the accounting period.
- (c) make available its internal practices, books, and records relating to the use and disclosure of PHI to the Secretary of the Department of Health and Human Services in accordance with the HIPAA Rules; and
- (d) forward to Covered Entity within five (5) business days of receiving any requests an Individual makes of NCQA pursuant to 45 C.F.R. §§ 164.524 or 164.526, so that Covered Entity may respond to such requests. NCQA shall not respond directly to those Individual requests.

Section 6. **Exchange of PHI and Communications.** NCQA agrees to the following:

- (a) NCQA shall not directly or indirectly receive remuneration in exchange for any PHI in compliance with 45 C.F.R. §§ 164.502(a)(5), 164.504(e)(2)(i), and 164.508(a);
- (b) NCQA shall not make or cause to be made any communication about a product or service that is prohibited by 45. C.F.R. §§ 164.502(a)(5), 164.504(e)(2)(i), and 164.508(a);
- (c) NCQA shall not make or cause to be made any written fundraising communication that is prohibited by 45 C.F.R. § 164.514(f).

III. OBLIGATIONS OF COVERED ENTITY

- Section 1. **Limitations on Protected Health Information.** Covered Entity agrees that it will not furnish to NCQA any PHI that is subject to any restrictions on the use and/or disclosure of PHI as provided for in 45 C.F.R. § 164.522 that will affect NCQA's use or disclosure of the PHI under this BAA; provided that, with respect to restrictions that Covered Entity is required to agree to under 45 C.F.R. § 164.522(a), Covered Entity shall provide NCQA with clear written notice of those restrictions and the PHI to which they pertain.
- Section 2. **Compliance with HIPAA and ARRA**. Covered Entity in performing its obligations and exercising its rights under this Agreement shall use and disclose Protected Health Information in compliance with the HIPAA Rules and ARRA. Covered Entity agrees that it will

not provide to NCQA PHI unless expressly requested by NCQA in the fulfillment of the Contract.

Section 3. Covered Entity Requests. Covered Entity shall not require NCQA to use or disclose Protected Health Information in any manner that would not be permissible under Subpart E of 45 C.F.R. Part 164 if done by Covered Entity.

IV. TERMINATION OF AGREEMENT

- Section 1. **Termination of Agreement by Covered Entity.** Upon Covered Entity's knowledge of a breach of a material term of this BAA by NCOA, Covered Entity shall provide NCQA with written notice of that breach in sufficient detail to enable NCQA to understand the specific nature of that breach and afford NCQA the opportunity to cure the breach; provided, however, that if NCQA fails to cure the breach within a reasonable time specified by Covered Entity, Covered Entity may terminate this BAA. Upon termination of this BAA under this Section, NCQA will comply with the return or destruction provisions of Article IV, Section 3 below, and Covered Entity may terminate the Contract, unless the parties mutually agree that NCQA may review Covered Entity pursuant to the Contract using only a Limited Data Set. pursuant to the Data Use Agreement in Article VI of this BAA, or with information that has been de-identified. If after termination of this BAA pursuant to this Section the parties agree that NCQA will continue its review of Covered Entity under the Contract using a Limited Data Set or de-identified information, the Contract shall continue in effect and the terms of this BAA that apply to such review of Covered Entity pursuant to the Contract shall survive to the extent necessary for NCQA to conduct the Survey of Covered Entity.
- Section 2. **Termination of Agreement by NCQA.** Upon NCQA's knowledge of a breach of a material term of this BAA by Covered Entity, NCQA shall provide Covered Entity with written notice of that breach in sufficient detail to enable Covered Entity to understand the specific nature of that breach and afford Covered Entity the opportunity to cure the breach; provided, however, that if Covered Entity fails to cure the breach within a reasonable time specified by NCQA, NCQA may terminate this BAA as well as terminate the Contract.
- Section 3. **Return or Destruction of PHI.** Within thirty (30) calendar days after termination or expiration of the Contract or this BAA, NCQA agrees to either return to Covered Entity or destroy all PHI received from the Covered Entity or created or received by NCQA on behalf of the Covered Entity and which NCQA still maintains in any form, including such information in possession of NCQA's subcontractors. NCQA agrees not to retain any copies of such PHI. If return or destruction of the PHI is not feasible, NCQA agrees to extend the protections, limitations and restrictions of this BAA to NCQA's use and disclosure of PHI retained after termination and to limit any further uses or disclosures to the purposes that make return or destruction infeasible. Any de-identified information retained by NCQA shall not be reidentified except for a purpose permitted under this BAA.

V. LIMITATION OF LIABILITY

Section 1. **Hold Harmless.** Each party agrees to hold harmless the other party to this BAA from and against any and all claims, losses, liabilities, costs and other expenses (including

reasonable attorney fees and costs associated with any suits, actions, proceedings, claims, or official investigations or inquiries) incurred as a result of: (i) any misrepresentation or nonfulfillment of any undertaking on the part of the party pursuant to this BAA; and (ii) negligent or intentional acts or omissions in the party's performance under this BAA. In no event will a party be responsible for any damages, caused by the failure of the other party to perform its responsibilities. If Covered Entity is an institution of a state government or a political subdivision of such state, this Article V shall apply only to the extent permitted under applicable state law, and nothing herein shall be deemed an express or implied waiver of sovereign immunity.

Section 2. **Damages.** NO PARTY SHALL BE LIABLE TO ANOTHER PARTY HERETO FOR ANY INCIDENTAL, CONSEQUENTIAL, SPECIAL, OR PUNITIVE DAMAGES OF ANY KIND OR NATURE RELATING TO OR ARISING FROM THE PERFORMANCE OR BREACH OF OBLIGATIONS SET FORTH IN THIS BAA, WHETHER SUCH LIABILITY IS ASSERTED ON THE BASIS OF CONTRACT, TORT (INCLUDING NEGLIGENCE OR STRICT LIABILITY), OR OTHERWISE, EVEN IF THE PARTY HAS BEEN ADVISED OF THE POSSIBILITY OF SUCH LOSS OR DAMAGES.

VI. DATA USE AGREEMENT

- Section 1. **Preparation of the Limited Data Set.** In accordance with Article II, Section 1(d) of this BAA NCQA may, on behalf of Covered Entity, prepare a Limited Data Set ("LDS") in accordance with the requirements set forth in this BAA.
- Section 2. **Minimum Necessary Data Fields in the LDS.** In preparing the LDS, NCQA will include the data fields which are the minimum necessary to accomplish the purposes set forth in Section 4 of this Article VI.
- Section 3. **Responsibilities of NCQA.** All of the restrictions, obligations, requirements and conditions of this BAA shall apply to such LDS in the same manner as they apply to PHI under this BAA. NCQA agrees to not use or further disclose the LDS other than as permitted by this Article VI or as otherwise Required by Law. NCQA further agrees that it will not identify the information in the LDS or contact the Individuals whose PHI is in the LDS, except where such contact is based on information derived entirely from a source other than the LDS.
- Section 4. **Permitted Uses and Disclosures of the LDS.** NCQA may use and/or disclose the LDS for its Research and Public Health activities and the Health Care Operations of the Covered Entity.

VII. MISCELLANEOUS

Section 1. Choice of Law and Jurisdiction. The law of the District of Columbia shall govern this BAA. The parties agree that any dispute arising under this BAA shall only be resolved in a court of competent jurisdiction in the District of Columbia. Notwithstanding the foregoing, this choice of law and venue provision shall not apply if Covered Entity is an institution of a state government and afforded sovereign immunity under applicable state law.

- Section 2. **Change in Law.** The parties agree to negotiate to amend this BAA (a) as necessary to comply with any amendment to any provision of HIPAA or its implementing regulations, ARRA, or to comply with any other applicable laws or regulations, or amendments thereto, and/or (b) in the event any such law or regulation or amendment thereto materially alters either party or both parties' obligations under this BAA. The parties agree to negotiate in good faith mutually acceptable and appropriate amendment(s) to this BAA to give effect to such revised obligations. If the parties are unable to agree to mutually acceptable amendment(s) within sixty (60) calendar days of the relevant change in law or regulations, either party may terminate this BAA and the Contract consistent with the terms of this BAA and the Contract. Notwithstanding the preceding sentence, the parties agree that this BAA is written to encompass ARRA and its implementing regulations.
- Section 3. **Third Party Beneficiaries.** Nothing in this BAA shall confer upon any person other than the parties and their respective successors or assigns, any rights, remedies, obligations, or liabilities whatsoever.
- Section 4. Survival. Article I; Article IV, Section 3; and Article V, and Article VII of this BAA shall survive termination of this BAA and continue indefinitely solely with respect to PHI NCQA retains in accordance with Article IV, Section 3. Article VI shall survive the termination of this BAA with regard to any LDS that NCQA possesses. The last sentence of Article IV Section 1 shall survive termination of this BAA with regard to any deidentified information NCQA creates using Covered Entity's PHI.
- Section 5. **Notice.** Any notice, consent, request or waiver, or other communications to be given hereunder by either party shall be given in writing and will be deemed to have been given when delivered personally or by registered mail, postage prepaid and return receipt requested or by facsimile with a confirming copy placed in the United States mail addressed as provided below or to such other address as either party may designate by written notice to the other.

If to NCQA:

National Committee for Quality Assurance 1100 13th Street, NW, Third Floor Washington, DC 20005

Attention: General Counsel and Chief Privacy Officer

Fax: 202-955-3599

If to Covered Entity:

Name of Individual/	Entity: _County	of Monterey	
Address:	1615 Bunker Hi	ll Way, Suite 140 _	
City/State/Zip:	_Salinas, CA	93906	
Fax:_831 796-1388			

The parties acknowledge that it is their intent to enter into this BAA by means of electronic signature. The person entering into this BAA on behalf of Covered Entity represents that by electronically signing this Agreement and by typing in and submitting their electronic signature to NCQA, they hereby bind the Covered Entity to the terms of this BAA and further, that such individual signing is authorized to validly enter into and bind Covered Entity to the terms of this BAA.

For Covered Entity:		
By: For		
Print Name: _Elsa Jimenez		
Title:Director of Health		
Date: 04/17/2019		
For National Committee for Quality Ass	urance	
Ву:		
Print Name:		
Title:		 ~~~
Date:		