

**PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS**

AGENDA ITEM SUMMARY

Meeting Date: September 16, 2025

☒ Consent ☐ Regular
☐ Ordinance ☐ Public Hearing

Department

Submitted By: Community Services

Submitted For: Behavioral Health Substance Use Disorders

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve:

- A) Third Amendment to Contract for Provision of Services with Florida Association of Recovery Residences (FARR) (R2023-1280), to amend, revise and extend the end date from September 30, 2025 to September 30, 2026, and to increase the total amount by \$60,000 for a new not-to-exceed amount of \$300,000; and continue providing education, training, and engaging with FARR certified recovery residences regarding the Recovery Capital Index (RCI).**
- B) Fourth Amendment to Contract for Provision of Services with Palm Beach County Substance Abuse Coalition, Inc. dba Palm Beach County Behavioral Health Coalition (PBCBHC) and the Recovery Community Hub of Palm Beach County (HUB) (R2024-1191), to extend the end date from September 30, 2025 to September 30, 2026, for recovery support services to individuals, families, and others directly impacted by opioid and substance use disorder, and to increase the funding amount by \$1,100,000 for Fiscal Year (FY) 2026 for a new not-to-exceed amount of \$5,400,000.**

Summary: The amendments are necessary to continue the Opioid Response Initiative services currently in place. The Third Amendment with FARR is required to provide education, training, and engagement for FARR-certified recovery residences regarding the RCI, a peer-reviewed, validated tracking instrument that measures recovery wellness and assesses the effectiveness of intervention. Through this initiative, RCI will provide education and training on Medication Assisted Treatment (MAT)/Medication Assisted Recovery (MAR) to FARR certified residences, including their owners and staff. Additionally, it will support the development of best practices and compliance in following medical prescriptions for individuals utilizing MAT/MAR, and educate owners to broaden acceptance of MAT/MAR in recovery residences.

The Fourth Amendment with PBCBHC and HUB aims to provide recovery support services, with PBCBHC serving as fiscal agent to the HUB and its network of community-based Recovery Community Organizations (RCO) and allied Recovery Community Centers (RCC). Funded organizations are monitored by the Community Services Department (CSD) to ensure both programmatic and fiscal accountability. Countywide (JBR)

Background and Justification: In the spring of 2017, the Board of County Commissioners (BCC) adopted an Opioid Response Plan (ORP) to guide its efforts in addressing the opioid epidemic. The BCC subsequently identified the opioid epidemic, behavioral health, and substance use disorder as a high strategic priority and adopted a strategic goal to establish a person-centered, recovery-oriented system of care to improve the quality of care and long-term recovery outcomes.

In November 2022, the BCC approved the Behavioral Health and Substance Use Master Plan 2022 (Plan 2022). Following that, on October 22, 2024 (Agenda Item 5E-1), the BCC approved the Behavioral Health and Substance Use Disorder (BHSUD) Plan 2024 (Plan 2024). The development of the Plan was informed by the Palm Beach County Behavioral Health, Substance Use, and Co-Occurring Disorders Advisory (BHSUCOD). Plan 2024 aims to enhance the County's capacity and effectiveness in developing a comprehensive, integrated, and effective BHSUD prevention, treatment, support, and recovery policies. This plan also offers recommendations regarding the County's provision of services to County citizens.

Attachments:

1. Third Amendment to Contract for Provision of Services with FARR
2. Fourth Amendment to Contract for Provision of Services with PBCBHC

Recommended By:


DocuSigned by:
Tarauna Malliotra
1459E4101E1049C

8/26/2025

Department Director

Date _____

Approved By:


Deputy County Administrator

7/2/25
Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2025	2026	2027	2028	2029
Capital Expenditures					
Operating Costs	-0-	1,160,000			
External Revenue	-0-	-0-			
Program Income (County)					
In-Kind Match (County)					
NET FISCAL IMPACT	-0-	1,160,000			
No. ADDITIONAL FTE POSITIONS (Cumulative)					

Is Item Included In Proposed Budget? Yes X No
Does this item include the use of federal funds? Yes No X
Does this item include the use of state funds? Yes No X

Budget Account No.:

Fund 0001 Dept 146 Unit 7621 Object 3401 Program Code Program Period _____

B. Recommended Sources of Funds/Summary of Fiscal Impact:

Funding Source is Palm Beach County. The FY26 increase of \$1,160,000 is included in the proposed budget.

Julie Dowd

Digitally signed by Julie Dowe
 DN: c=org, DC=pbcgov, OU=Enterprise, OU=CS
 Users, CN=Julie Dowe, E=JDowe@pbcgov
 Reason: I am approving this document
 Date: 2025.08.27 10:47:30-0400
 PDF Editor Version: 12.1.0

C. Departmental Fiscal Review:

Julie Dowe, Director of Finance and Support Services

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Development and Control Comments:

ASDelle 8/27/25
OFMB RJW 8.27.25

Contract Development and Control

B. Legal Sufficiency:

Brian Mel 8/28/2025
Assistant County Attorney

C. Other Department Review:

Department Director

This summary is not to be used as a basis for payment.

THIRD AMENDMENT

THIRD AMENDMENT TO CONTRACT FOR
PROVISION OF SERVICES

THIS THIRD AMENDMENT TO CONTRACT FOR PROVISION OF SERVICES dated March 22, 2022 (R2022-0269), is made on this 16th day of September, 2025, by and between Palm Beach County, a Political Subdivision of the State of Florida, by and through its Board of County Commissioners, hereinafter referred to as the COUNTY, and Florida Association of Recovery Residences, Inc., hereinafter referred to as the AGENCY, a not-for-profit corporation authorized to do business in the State of Florida, whose Federal Tax I.D. is 46-0634210.

In consideration of the mutual promises contained herein, the COUNTY and the AGENCY agree as follows:

WHEREAS, on March 22, 2022, the above-named parties entered into a retroactive Contract for Provision of Services, (R2022-0269) (the Contract), for a term beginning October 1, 2021, in an amount not to exceed \$60,000.00 to provide Recovery Supports services to residents of Palm Beach County; and

WHEREAS, on September 13, 2022, the above-named parties entered into a First Amendment to the Contract (R2022-0930) (the First Amendment), which extended the term of the Contract by one (1) year, added programmatic requirements, and increased the not-to-exceed amount by \$60,000.00 for a new total Contract amount of \$120,000.00; and

WHEREAS, on September 19, 2023, the above-named parties entered into a Second Amendment to the Contract (R2023-1280) (the Second Amendment), which extended the term of the Contract by two (2) years, added programmatic requirements, and increased the not-to-exceed amount by \$120,000.00 for a new total Contract amount of \$240,000.00; and

WHEREAS, the need exists to amend the Contract, to: extend the term of the Contract by one (1) year by amending **ARTICLE 3 SCHEDULE**; increase the not-to-exceed Contract amount by \$60,000 by amending **ARTICLE 4 PAYMENTS TO AGENCY**; revise **ARTICLE 14 NONDISCRIMINATION**; revise **ARTICLE 16 AGENCY’S PROGRAMMATIC REQUIREMENTS**; revise **ARTICLE 17 ACCESS AND AUDITS**; add new **ARTICLE 41 DISCLOSURE OF FOREIGN GIFTS AND CONTRACTS WITH FOREIGN COUNTRIES OF CONCERN**; add new **ARTICLE 42 HUMAN TRAFFICKING AFFIDAVIT**; replace **EXHIBIT A-1** with **EXHIBIT A-2**; and replace **EXHIBIT B-2** with **EXHIBIT B-3**.

NOW THEREFORE, the COUNTY and the AGENCY mutually agree that the Contract entered into on March 22, 2022 is hereby amended as follows:

- I. The foregoing recitals are true and correct and incorporated herein by reference and made a part of the parties’ Contract.
- II. The first two paragraphs in **ARTICLE 3 SCHEDULE** are amended to read as follows:

The term of this Contract shall be for one (1) year, starting October 1, 2021 (initial term) and will automatically renew for four (4) additional one (1)-year term(s) (renewal term), unless either party

notifies the other prior to the expiration of the initial term or any renewal term of its intent not to renew in accordance with the time parameters stated herein.

Quarterly billing, reports and other items shall be delivered or completed in accordance with the detailed schedule set forth in **EXHIBIT A-2, EXHIBIT B-3 and ARTICLE 16.**

- III. The first three paragraphs in **ARTICLE 4 PAYMENTS TO AGENCY** are amended to read as follows:

The total amount to be paid by the COUNTY under this Contract for services and materials shall not exceed a total amount of **THREE HUNDRED THOUSAND DOLLARS AND ZERO CENTS (\$300,000.00)** over a five-year period of which **SIXTY THOUSAND DOLLARS AND ZERO CENTS (60,000.00)** was budgeted in Fiscal Year 2022, 2023, 2024 and 2025, with an anticipated annual allocation of **SIXTY THOUSAND DOLLARS AND ZERO CENTS (\$60,000.00)** to be budgeted in Fiscal Year 2026.

The AGENCY will bill the COUNTY on a quarterly basis, or as otherwise provided, at the amounts set forth in **EXHIBIT B-3** for services rendered toward the completion of the Scope of Work. Where incremental billings for partially completed items are permitted, the total billings shall not exceed the estimated percentage of completion as of the billing date.

The program and unit cost definitions for this Contract year are set forth in **EXHIBIT B-3**. All requests for payments of this Contract shall include an original cover memo on AGENCY letterhead signed by the Chief Executive Officer, Chief Financial Officer, or their designee.

- IV. Replaced **ARTICLE 13 NONDISCRIMINATION** in its entirety with the following:

The COUNTY is committed to assuring equal opportunity in the award of contracts and complies with all laws prohibiting discrimination. Pursuant to Palm Beach County Resolution R2025-0748, as may be amended, the AGENCY warrants and represents that throughout the term of the Contract, including any renewals thereof, if applicable, all of its employees are treated equally during employment without regard to race, color, religion, disability, sex, age, national origin, ancestry, marital status, familial status, sexual orientation, or genetic information. Failure to meet this requirement shall be considered default of the Contract.

As a condition of entering into this Contract, the AGENCY represents and warrants that it will comply with the COUNTY'S Commercial Nondiscrimination Policy as described in Resolution R2025-0748, as amended. As part of such compliance, the AGENCY shall not discriminate on the basis of race, color, national origin, religion, ancestry, sex, age, marital status, familial status, sexual orientation, disability, or genetic information in the solicitation, selection, hiring or commercial treatment of subcontractors, vendors, suppliers, or commercial customers, nor shall the AGENCY retaliate against any person for reporting instances of such discrimination. The AGENCY shall provide equal opportunity for subcontractors, vendors and suppliers to participate in all of its public sector and private sector subcontracting and supply opportunities, provided that nothing contained in this clause shall prohibit or limit otherwise lawful efforts to remedy the effects of marketplace discrimination that have occurred or are occurring in the COUNTY'S relevant marketplace in Palm Beach County.

The AGENCY understands and agrees that a material violation of this clause shall be considered a material breach of this Contract and may result in termination of this Contract, disqualification or debarment of the AGENCY from participating in COUNTY contracts, or other sanctions. This clause is not enforceable by or for the benefit of, and creates no obligation to, any third party. AGENCY shall include this language in its subcontracts.

- V. Updated paragraph 20 to **ARTICLE 16 AGENCY’S PROGRAMMATIC REQUIREMENTS** to read as follows:

20. AGENCY may provide Key Personnel appropriate training according to their staff qualifications, in compliance with Section 760.10, Florida Statutes, as may be amended, including but not limited to:
- a. Trauma-Informed Care (TIC), Adverse Childhood Experiences (ACEs), and Motivational Interviewing (MI) training;
 - b. AGENCY shall provide recovery capital indexing training (as applicable) in collaboration with COUNTY’s designated vendor.

- VI. Update section **b** to **ARTICLE 17 ACCESS AND AUDIT** to read as follows:

- b. The annual financial audit report shall include a schedule of financial assistance specifically identifying all contracts and grant revenue by sponsoring agency and contract/grant number if required by the Single Audit Act.

- VII. New **ARTICLE 41 DISCLOSURE OF FOREIGN GIFTS AND CONTRACTS WITH FOREIGN COUNTRIES OF CONCERN** is added to the Contract to read as follows:

ARTICLE 41 DISCLOSURE OF FOREIGN GIFTS AND CONTRACTS WITH FOREIGN COUNTRIES OF CONCERN

Pursuant to F.S. 286.101, as may be amended, by entering into this Contract or performing any work in furtherance thereof, the AGENCY certifies that it has disclosed any current or prior interest of, any contract with, or any grant or gift received from a foreign country of concern where such interest, contract, or grant or gift has a value of \$50,000 or more and such interest existed at any time or such contract or grant or gift was received or in force at any time during the previous five (5) years.

- VIII. New **ARTICLE 42 HUMAN TRAFFICKING AFFIDAVIT** is added to the Contract to read as follows:

ARTICLE 42 HUMAN TRAFFICKING AFFIDAVIT

AGENCY warrants and represents that it does not use coercion for labor or services as defined in section 787.06, Florida Statutes. AGENCY has executed **EXHIBIT G**, Nongovernmental Entity Human Trafficking Affidavit, which is attached hereto and incorporated herein by reference.

- IX. A new **EXHIBIT A-2 SCOPE OF WORK**, attached hereto and incorporated herein by reference, shall replace **EXHIBIT A-1 SCOPE OF WORK**, in its entirety.

- X. A new **EXHIBIT B-3 PAYMENT SCHEDULE**, attached hereto and incorporated herein by reference, shall replace **EXHIBIT B-2 PAYMENT SCHEDULE**, in its entirety.
- XI. All other provisions of the Contract not modified in the First Amendment, Second Amendment, and this Third Amendment remain in full force and effect.

REMAINDER OF PAGE LEFT BLANK INTENTIONALLY

IN WITNESS WHEREOF, the Board of County Commissioners of Palm Beach County, Florida has made and executed this Third Amendment on behalf of the COUNTY and AGENCY has hereunto set his/her hand the day and year above written.

ATTEST:

Michael A. Caruso
Clerk of the Circuit Court and Comptroller
Palm Beach County

PALM BEACH COUNTY, FLORIDA,
a Political Subdivision of the State of Florida
BOARD OF COUNTY COMMISSIONERS

BY: _____
Deputy Clerk

BY: _____
Maria G. Marino, Mayor

AGENCY:

FLORIDA ASSOCIATION OF RECOVERY
RESIDENCES, Inc.

BY:

Signed by:
Michael Schlossman, CEO
CB4B0907BE0E4BE

AGENCY'S Signatory Name

Michael Schlossman
AGENCY'S Signatory Name Typed

APPROVED AS TO FORM AND
LEGAL SUFFICIENCY



Initial
JBR

Assistant County Attorney

APPROVED AS TO TERMS AND CONDITIONS

DocuSigned by:
Taruna Malhotra
1459E4101E1049C

Taruna Malhotra, Deputy Director

**FY 2022 – 2026 AD VALOREM
SCOPE OF WORK**

Agency Name: Florida Association of Recovery Residences, Inc.
Program Name: Recovery Capital Initiative
Location: Palm Beach County
Service: Recovery Supports
Funding: Behavioral Health and Substance Use Response Funds

Scope of Work:

A. Project description

Recovery Capital Initiative

For the purposes of this Contract, the Recovery Capital Initiative seeks to educate and train Florida Association of Recovery Residences (FARR) Palm Beach County-based certified recovery residences regarding the Recovery/Resilience Capital Index (RCI). The RCI is a person-centered and validated survey instrument required and deployed by Palm Beach County as an outcomes measurement of an individual’s overall health and wellness particularly as it relates to recovery from substance use disorder.

FARR currently has 269 housing providers certified statewide, representing 1,971 units and 9,842 beds. Palm Beach County accounts for 102 providers (38 percent) of the statewide recovery residence providers, representing 767 units (39 percent) and 3,664 beds (37 percent). Given this significant presence, the County has an interest in requiring and deploying RCI in the County’s recovery residence environment in order to appropriately measure long-term recovery outcomes in this environment and enhance understanding of a person-centered Recovery-Oriented System of Care (ROSC). As such, an aim of the project is to build recovery capital capacity within FARR certified recovery residences in Palm Beach County. The intent is to foster an environment that maximizes a resident’s opportunity to achieve long-term recovery through education, monitoring and measuring outcomes.

Additionally, ensuring housing stability, a key predictor to achieving long-term recovery outcomes, and adequate Medication Assisted Recovery/Medication Assisted Treatment (MAR/MAT) housing capacity are of keen interest to the County. Thus, another aim of the project is to ensure that certified recovery residences in the county are compliant with the enactment of Florida Statute §397.487(13), which prohibits certified recovery residences from denying housing based solely on an individual’s prescribed use of federally approved medications for substance use disorder.

B. Priority Population:

Palm Beach County FARR certified residences and individuals in FARR certified housing in Palm Beach County.

C. Required Deliverables

The AGENCY, through the Recovery Capital Initiative, shall provide the following

- I. Increase MAR/MAT bed capacity by:**
 - 1. Conducting two (2) different web-based and/or in person educational sessions, on a semi-

annual basis related to MAR/MAT, which may be combined with web-based and/or in-person Recovery-Oriented Ecosystem of Care and RCI educational sessions described below.

- II.** Increase FARR Certified residences owners', directors' and staffs' understanding of a person centered Recovery-Oriented Ecosystem of Care (ROSC) and increase their participation in the county's deployment of the RCI to measure overall recovery wellness, including but not limited to the following actions:
1. Developing one (1) new web-based educational video in collaboration with CommonlyWell (RCI Vendor), which focuses on why taking the RCI survey is important to an individual's recovery.
 2. Developing and distributing a white paper consistent with the Office of Behavioral Health and Substance Use Disorders' (OBHSUD) body of work on recovery capital that includes recommended strategies for residence managers and owners for integrating RCI deployment in FARR certified residences. Additionally, FARR is to provide education on best practices on these topics to FARR Certified residences' owners, directors and/or staff.
 3. Conduct a minimum of one web-based and/or in-person ROSC and RCI educational sessions each quarter.
 4. Collaborate with *CommonlyWell* to support increase in certified residences' capacity to routinely administer and increase participants' engagement in utilizing the RCI as a well-being tool, as well as to contribute data to FARR's RCI Dashboard.
 5. Provide, offer and encourage the use of the RCI tool for all FARR Certified Recovery Residences that are located and/or based in Palm Beach County. Refrain from promoting the use of any other recovery capital survey instruments with FARR Certified Recovery Residences that are located and/or based in Palm Beach County.
- III.** Ensure compliance with National Association of Recovery Residence (NARR) Standards of best practices and Florida recovery residence statutes by:
1. Provide monthly complaint resolution and compliance reports to Palm Beach County.

FY 2022 – 2026 AD VALOREM
UNITS OF SERVICE RATE AND DEFINITION

Agency Name: Florida Association of Recovery Residences, Inc. (FARR)
Program: Recovery Capital Initiative

Description	Unit Rate	Total FY 2022	Total FY 2023	Total FY 2024	Total FY 2025	Total FY 2026	Total Amount
Recovery Capital Initiative							
A monthly report must be submitted along with the invoice and signed cover letter that includes, but is not limited to the following: Progress updates on RCI developments, education/ trainings, white paper on best practices for Medication Assisted Recovery (MAR)/ Medication Assisted Treatment (MAT) integrated with RCI deployment in FARR certified residences, and activities with dates, number of participants, and the name of facilitators.	Actual Cost*	60,000	60,000	60,000	60,000	60,000	300,000

For all service categories listed above, expenses will be reimbursed at the actual cost of services listed in the monthly submission. The backup documentation – copies of paid receipts, copies of checks, invoices, or any other applicable documents acceptable to the Palm Beach County Department of Community Services will be requested as part of the invoice submission, and via desk and/or on-site monitoring on a periodic basis.

NONGOVERNMENTAL ENTITY HUMAN TRAFFICKING AFFIDAVIT
Section 787.06(13), Florida Statutes

THIS AFFIDAVIT MUST BE SIGNED AND NOTARIZED

I, the undersigned, am an officer or representative of Florida Association of Recovery Residences (CONTRACTOR) and attest that CONTRACTOR does not use coercion for labor or services as defined in section 787.06, Florida Statutes.

Under penalty of perjury, I hereby declare and affirm that the above stated facts are true and correct.

[Signature]
(Signature of Officer or Representative)

Michael Schlossman , CEO
(Printed Name of Officer or Representative)

State of Florida, County of Palm Beach

Sworn to and subscribed before me by means of [X] physical presence or [] online notarization this, 7th day of August, 2025, by Michael Schlossman
Personally known [X] OR produced identification [].

Type of identification produced

[Signature]
NOTARY PUBLIC (Signature)
My Commission Expires:
State of Florida at large



(Notary Seal)

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000009177

Entity Name: FLORIDA ASSOCIATION OF RECOVERY RESIDENCES, INC.

Current Principal Place of Business:

2240 WOOLBRIGHT RD
SUITE 413
BOYNTON BEACH , FL 33426

Current Mailing Address:

2240 WOOLBRIGHT RD
SUITE 413
BOYNTON BEACH, FL 33426 US

FEI Number: 46-0634210

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAMSEY, SUSAN B ESQ.
525 OKEECHOBEE BLVD
SUITE 1700
WEST PALM BEACH, FL 33401 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SUSAN B RAMSEY 03/24/2025
Electronic Signature of Registered Agent Date

Officer/Director Detail :

Title	TREASURER	Title	PRESIDENT
Name	GORDON, MICHAEL	Name	CABOT, MICHAEL
Address	2240 WOOLBRIGHT RD SUITE 413	Address	2240 WOOLBRIGHT RD SUITE 413
City-State-Zip:	BOYNTON BEACH FL 33426	City-State-Zip:	BOYNTON BEACH FL 33426
Title	SECRETARY	Title	VP
Name	HURLEY, KARYN	Name	SLATTERY, PATRICK
Address	2240 WOOLBRIGHT RD SUITE 413	Address	2240 WOOLBRIGHT RD SUITE 413
City-State-Zip:	BOYNTON BEACH FL 33426	City-State-Zip:	BOYNTON BEACH FL 33426
Title	DIRECTOR	Title	DIRECTOR
Name	ATKINSON, WILL	Name	MCGARRY, NEAL
Address	2240 WOOLBRIGHT RD SUITE 413	Address	2240 WOOLBRIGHT RD SUITE 413
City-State-Zip:	BOYNTON BEACH FL 33426	City-State-Zip:	BOYNTON BEACH FL 33426
Title	DIRECTOR	Title	CEO
Name	BENFAIDA, TRAVIS	Name	SCHLOSSMAN, MICHAEL
Address	2240 WOOLBRIGHT RD SUITE 413	Address	2240 WOOLBRIGHT RD SUITE 413
City-State-Zip:	BOYNTON BEACH FL 33426	City-State-Zip:	BOYNTON BEACH FL 33426

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL SCHLOSSMAN CEO & CHIEF LEGAL OFFICER 03/24/2025
Electronic Signature of Signing Officer/Director Detail Date

Officer/Director Detail Continued :

Title DIRECTOR
Name RAPAGLIA, RAY
Address 2240 WOOLBRIGHT RD
SUITE 413
City-State-Zip: BOYNTON BEACH FL 33426

Title DIRECTOR
Name EDDOWES, STEPHANY
Address 2240 WOOLBRIGHT RD
SUITE 413
City-State-Zip: BOYNTON BEACH FL 33426

Title DIRECTOR
Name MARTIN, HEATHER
Address 2240 WOOLBRIGHT RD
SUITE 413
City-State-Zip: BOYNTON BEACH FL 33426

Title DIRECTOR
Name PERFETTI, TORY
Address 2240 WOOLBRIGHT RD
SUITE 413
City-State-Zip: BOYNTON BEACH FL 33426

Title DIRECTOR
Name WEBB, JENNIFER
Address 2240 WOOLBRIGHT RD
SUITE 413
City-State-Zip: BOYNTON BEACH FL 33426

Title DIRECTOR
Name INGRAHAM, RYAN
Address 2240 WOOLBRIGHT RD
SUITE 413
City-State-Zip: BOYNTON BEACH FL 33426



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
8/18/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER BB Insurance Marketing Inc 10167 W Sunrise Blvd 3rd Floor Plantation FL 33322		CONTACT NAME: Certificate Department PHONE (A/C, No, Ext): 888-728-0817 FAX (A/C, No): 954-452-0450 E-MAIL ADDRESS: certificates@bbimi.com		
INSURED Florida Association of Recovery Residences Inc. 2240 Woolbright Rd, Suite 413 Boynton Beach FL 33426 FLORASS-01		INSURER(S) AFFORDING COVERAGE		NAIC #
		INSURER A : Atlantic Specialty Insurance		27154
		INSURER B : Property and Casualty Insurance Company of Hartford		34690
		INSURER C : Federal Insurance Company		20281
		INSURER D :		
		INSURER E :		
		INSURER F :		

COVERAGES **CERTIFICATE NUMBER:** 53304982 **REVISION NUMBER:**

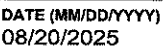
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	21 SBM BS1KHJ	4/21/2025	4/21/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		21 SBM BS1KHJ	4/21/2025	4/21/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB DED RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
C A	Professional Liability Directors & Officers		J06804810 MML-001744-1024	11/20/2024 10/31/2024	11/20/2025 10/31/2025	1,000,000 Each Claim 1,000,000 Each Claim 1,000,000 Agg 1,000,000 Agg

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Professional & Trade Association for Recovery Residences located at 2240 Woolbright Rd, Suite 347 & 413, Boynton Beach, FL 33426.

Palm Beach County Board of County Commissioners, a Political Subdivision of the State of Florida, its Officers, Employees, and Agents are additional insureds with respect to General Liability when required to be named as such per written contract, and in accordance with all terms of the Additional Insured Endorsement attached to the policy.

CERTIFICATE HOLDER Palm Beach County Board of County Commissioners C/O Dept. of Community Services Attn: Contract Manager 810 Datura Street West Palm Beach FL 33401	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
--	---



PRODUCER AUTOMATIC DATA PROCESSING INSURANCE AGCY INC 1 ADP BLVD MS 325 ROSELAND, NJ 07068 (877) 677-0428	CONTACT NAME: PHONE (A/C, No, Ext): (877) 677-0428 <div style="float: right;"> FAX (A/C, No): (877) 677-0430 </div> E-MAIL ADDRESS: spcbicadp@travelers.com														
INSURED FLORIDA ASSOCIATION OF RECOVERY RESIDENCES, INC. 2240 W WOOLBRIGHT RD STE 413 BOYNTON BEACH, FL 33426	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: center;">NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : THE TRAVELERS INDEMNITY COMPANY OF AMERICA</td> <td></td> </tr> <tr> <td>INSURER B :</td> <td></td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : THE TRAVELERS INDEMNITY COMPANY OF AMERICA		INSURER B :		INSURER C :		INSURER D :		INSURER E :		INSURER F :	
INSURER(S) AFFORDING COVERAGE	NAIC #														
INSURER A : THE TRAVELERS INDEMNITY COMPANY OF AMERICA															
INSURER B :															
INSURER C :															
INSURER D :															
INSURER E :															
INSURER F :															

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. 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 POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS C/O DEPT OF COMMUNITY SERVICES ATTN: CONTRACT MANAGER 810 DATURA STREET WEST PALM BEACH, FL 33401	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE <i>Renan M. Beltran</i>

ACORD 25 (2016/03) **The ACORD name and logo are registered marks of ACORD**

FOURTH AMENDMENT

FOURTH AMENDMENT TO CONTRACT FOR PROVISION OF SERVICES

THIS FOURTH AMENDMENT TO CONTRACT FOR PROVISION OF SERVICES dated October 19, 2021, (R2022-1591), is made on this 11th day of September, 2025, by and between Palm Beach County, a Political Subdivision of the State of Florida, by and through its Board of Commissioners, hereinafter referred to as the COUNTY, and **Palm Beach County Substance Abuse Coalition, Inc. dba Palm Beach County Behavioral Health Coalition**, hereinafter referred to as the AGENCY, a not-for-profit corporation authorized to do business in the State of Florida, whose Federal Tax I.D. number is **80-0501520**.

In consideration of the mutual promises contained herein, the COUNTY and the AGENCY agree as follows:

WHEREAS, on October 19, 2021, the above-named parties entered into a Contract (R2021-1591) (the Contract) to provide certain services under the Opioid Response Initiative in an annual amount of \$250,000; and

WHEREAS, on March 22, 2022, the above-named parties entered into the First Amendment to Contract for Provision of Services (First Amendment) (R2022-0234), in an amount not to exceed \$550,000 to provide certain services under the Opioid Response Initiative; and

WHEREAS, on May 2, 2023, the above-named parties entered into the Second Amendment to Contract for Provision of Services (Second Amendment) (R2023-0561), in an amount not to exceed \$3,050,000; and

WHEREAS, on September 17, 2024, the above-named parties entered into the Third Amendment to Contract for Provision of Services (Third Amendment) (R2024-1191), in an amount not to exceed \$4,300,000; and

WHEREAS, the need exists to amend the Contract, to add a fourth one-year term by updating **ARTICLE 3 – SCHEDULE**; increase the not-to-exceed Contract amount by amending **ARTICLE 4 – PAYMENTS TO AGENCY**; replace **ARTICLE 13 NONDISCRIMINATION**; revise **ARTICLE 15 AGENCY PROGRAMMATIC REQUIREMENTS**; revise **ARTICLE 16 ACCESS AND AUDITS**; and replace **EXHIBIT A2** with **EXHIBIT A3**; and replace **EXHIBIT B3** with **EXHIBIT B4**.

NOW THEREFORE, the COUNTY and the AGENCY mutually agree that the Contract entered into on October 19, 2021 is hereby amended as follows:

- I. The foregoing recitals are true and correct and incorporated herein by reference and made a part of the parties' Contract.
- II. The first paragraph in **ARTICLE 3 – SCHEDULE** shall be replaced in its entirety with the following:

The term of this Contract shall be for one year, starting October 1, 2021 (initial term), and will automatically renew for four (4) additional one (1) year term(s) (renewal term), unless either party

notifies the other prior to the expiration of the initial term or any renewal term of its intent not to renew in accordance with the time parameters stated herein. Quarterly billing, reports and other items shall be delivered or completed in accordance with the detailed schedule set forth in **EXHIBIT A3, EXHIBIT B4, and ARTICLE 15.**

- III. The first three paragraphs of **ARTICLE 4 – PAYMENTS TO AGENCY** shall be replaced in their entirety with the following:

The total amount to be paid by the COUNTY under this Contract for all services and materials shall not exceed a total Contract amount of **FIVE MILLION, FOUR HUNDRED THOUSAND DOLLARS AND ZERO CENTS (\$5,400,000.00)** over a five-year period of which **FIVE HUNDRED FIFTY THOUSAND DOLLARS AND ZERO CENTS (\$550,000.00)** was budgeted for Fiscal Year 2022, **ONE MILLION, TWO HUNDRED FIFTY THOUSAND DOLLARS AND ZERO CENTS (\$1,250,000.00)** was budgeted in Fiscal Years 2023, 2024 and 2025, with an anticipated annual allocation of **ONE MILLION DOLLARS, ONE HUNDRED THOUSAND DOLLARS AND ZERO CENTS (\$1,100,000.00)** to be budgeted in Fiscal Year 2026.

The AGENCY will bill the COUNTY on a quarterly basis, or as otherwise provided, at the amounts set forth in **EXHIBIT B4 - PAYMENT SCHEDULE** for services rendered toward the completion of the Scope of Work. Where incremental billings for partially completed items are permitted, the total billings shall not exceed the estimated percentage of completion as of the billing date.

The program and unit cost definitions for this Contract year are set forth in **EXHIBIT B4**. All requests for payments of this Contract shall include an original cover memo on AGENCY letterhead signed by the Chief Executive Officer, Chief Financial Officer or their designee.

- IV. Replace **ARTICLE 13 NONDISCRIMINATION** in its entirety with the following:

The COUNTY is committed to assuring equal opportunity in the award of contracts and complies with all laws prohibiting discrimination. Pursuant to Palm Beach County Resolution R2025-0748, as may be amended, the AGENCY warrants and represents that throughout the term of the Contract, including any renewals thereof, if applicable, all of its employees are treated equally during employment without regard to race, color, religion, disability, sex, age, national origin, ancestry, marital status, familial status, sexual orientation, or genetic information. Failure to meet this requirement shall be considered default of the Contract.

As a condition of entering into this Contract, the AGENCY represents and warrants that it will comply with the COUNTY'S Commercial Nondiscrimination Policy as described in Resolution R2025- 0748, as amended. As part of such compliance, the AGENCY shall not discriminate on the basis of race, color, national origin, religion, ancestry, sex, age, marital status, familial status, sexual orientation, disability, or genetic information in the solicitation, selection, hiring or commercial treatment of subcontractors, vendors, suppliers, or commercial customers, nor shall the AGENCY retaliate against any person for reporting instances of such discrimination. The AGENCY shall provide equal opportunity for subcontractors, vendors and suppliers to participate in all of its public sector and private sector subcontracting and supply opportunities, provided that nothing contained in this clause shall prohibit or limit otherwise lawful efforts to remedy the effects of marketplace discrimination that have occurred or are occurring in the COUNTY'S relevant marketplace in Palm Beach County.

The AGENCY understands and agrees that a material violation of this clause shall be considered a material breach of this Contract and may result in termination of this Contract, disqualification or debarment of the AGENCY from participating in COUNTY contracts, or other sanctions. This clause is not enforceable by or for the benefit of, and creates no obligation to, any third party. AGENCY shall include this language in its subcontracts.

- V. Update paragraph 20 to **ARTICLE 15 AGENCY'S PROGRAMMATIC REQUIREMENTS** to read as follows:
20. AGENCY may provide Key Personnel appropriate training according to their staff qualifications, in compliance with Section 760.10, Florida Statutes, as may be amended, including but not limited to:
- a. Trauma-Informed Care (TIC), Adverse Childhood Experiences (ACEs), Motivational Interviewing (MI) training;
 - b. AGENCY shall provide recovery capital indexing training (as applicable) in collaboration with COUNTY's designated vendor.
- VI. Update section **b** to **ARTICLE 16 ACCESS AND AUDIT** to read as follows:
- b. The annual financial audit report shall include a schedule of financial assistance specifically identifying all contracts and grant revenue by sponsoring agency and contract/grant number if required by the Single Audit Act.
- VII. A new **EXHIBIT A3- SCOPE OF WORK**, attached hereto and incorporated herein by reference, shall replace **EXHIBIT A2- SCOPE OF WORK**, in its entirety.
- VIII. A new **EXHIBIT B4 – PAYMENT SCHEDULE**, attached hereto and incorporated herein by reference, shall replace **EXHIBIT B3 – PAYMENT SCHEDULE**, in its entirety.
- IX. All other provisions of the Contract, the First Amendment, Second Amendment and Third Amendment not modified in this Fourth Amendment remain in full force and effect.

REMAINDER OF PAGE LEFT BLANK INTENTIONALLY

IN WITNESS WHEREOF, the Board of County Commissioners of Palm Beach County, Florida has made and executed this Fourth Amendment on behalf of the COUNTY and AGENCY has hereunto set his/her hand the day and year above written.

ATTEST:

Michael A. Caruso
Clerk of the Circuit Court and Comptroller
Palm Beach County

PALM BEACH COUNTY, FLORIDA,
a Political Subdivision of the State of Florida
BOARD OF COUNTY COMMISSIONERS

BY _____
Deputy Clerk

BY _____
Maria G. Marino, Mayor

AGENCY:

Palm Beach County Substance Abuse Coalition,
Inc., dba Palm Beach County Behavioral Health
Coalition

DocuSigned by:

CE50B7EACEE1140A...
AGENCY'S Signatory Name

Ryan Wertepny
AGENCY'S Signatory Name Typed

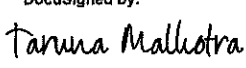
APPROVED AS TO FORM AND
LEGAL SUFFICIENCY


Initial

JBR

Assistant County Attorney

APPROVED AS TO TERMS
AND CONDITIONS

DocuSigned by:

1450E4404F7040C...
Taruna Malhotra, Assistant Director
Community Services Department

FY 2022-2026 AD VALOREM OPIOID RESPONSE
SCOPE OF WORK

Provider: Palm Beach County Substance Abuse Coalition, Inc. dba Palm Beach County Behavioral Health Coalition (PBCBHC)
Program: County Recovery Community Organization (RCO) and allied Recovery Community Center (RCC) Network
Location: Palm Beach County - Countywide
Service: Recovery Supports
Funding: Opioid Response

I. Scope of Work:

A. Project Description

Palm Beach County Substance Abuse Coalition, Inc., dba Palm Beach County Behavioral Health Coalition (PBCBHC) will serve as the fiscal agent to the Countywide RCO and community-based RCO and allied RCC Network (Network). As the fiscal agent, the PBCBHC administers program funds external to their own and may, upon request of the Network and a signed Memorandum of Understanding, offer technical assistance to assist in sustainability planning and fiscal independence. The Countywide RCO oversees three existing RCOs and allied RCCs in Lake Worth Beach, Delray Beach and Belle Glade. The Network has been working to open the last physical location in Riviera Beach, which is expected to open during the term of this Contract. The Countywide RCO will support the RCO/ RCCs’ implementation of recovery supports in these respective communities. The Substance Abuse and Mental Health Services Administration (SAMHSA) and the American Society of Addiction Medicine (ASAM) recognize recovery supports as integral on the spectrum of recovery. There is a direct correlation between the amount of time spent at an RCC and an individual’s sustained recovery (Kelly, J. 2015, “Characterization and Evaluation of Addiction Recovery Community Centers”).

The RCOs and allied RCCs in Lake Worth, Delray Beach and Belle Glade are peer-run, independently led organizations, governed by recovery representatives of local communities of recovery. They aim to provide recovery support services through certified peers and other non-clinical support services. When the Riviera Beach RC)/RCC opens, it will reflect the same principles as those already established and operational and become an integral part of the overall Network. Additionally, it will serve as the main Administrative Office for countywide RCO staff, such as the Executive Director, Fidelity Coordinator and Outreach Coordinator.

RCCs offer a safe space for individuals seeking recovery or who are in recovery to access resources, build positive relationships and a sense of community, and continue to work on their recovery journey. They facilitate a “one-stop-shop” modality to improve the recovery capital of individuals receiving support services, as well as providing a “no wrong door” approach to individuals seeking recovery supports. These services are expected to result in measurable enhancements in quality of life, overall life functioning, and well-being to achieve long-term recovery as measured and monitored by the Recovery Capital Index (RCI).

B. Priority Population: Individuals, families, and others directly impacted by opioid and substance use disorder (Participants).

No individual shall be denied full access to, participation in, and enjoyment of Network services or activities, available or offered to others, due to the use of legitimately prescribed medications.

C. Participants Served: 1,400 unduplicated participants throughout the Network annually.

D. Service Delivery

1. The Countywide RCO shall:

- a. Be responsible for administration and oversight of the RCO/RCC Network.
- b. Facilitate a development process for recovery community members who may desire to organize around shared interests that are aligned with established RCOs and consistent with RCO guiding principles and development processes.
- c. Facilitate an on-going Recovery Coach Academy that will train and certify individuals to become recovery coaches who promote others' recovery, as well as assist individuals in removing obstacles to recovery and serve as a mentor for people seeking or already in recovery from a substance use disorder.
- d. Facilitate a County-wide leadership team comprised of the CEOs and executive staff members from each of the County's RCO's to share best practices; build recovery leadership capacity; develop opportunities to collaborate on projects and/or initiatives and contribute to sustaining the Network and other RCOs within the County.
- e. Host, at a minimum, quarterly team meetings to conduct trainings and facilitate communication between the County's RCO / RCC Network.
- f. Review RCI reports monthly to assess personal, social and cultural capital on both an overall county and location specific level. Utilize and maintain documentation of the data analysis from these monthly meetings to increase the menus of opportunity on a countywide and location specific basis.
- f. Collaborate with the County, strategic partners and community members to plan for and develop affordable and supportive housing capacity for the target population.
- g. Maintain certification from the Association of Recovery Community Organizations (ARCO).
- h. Ensure all insurance policies are current with applicable additional parties insured noted on the Certificates of Insurance (COI).

2. Community-based RCOs/RCCs shall:

- a. Provide peer-to-peer recovery support services to promote sustained recovery and prevent recurrence of substance use disorder in a supportive substance-free environment.

- b. There shall be no clinical services provided at any RCO/RCC, nor shall any services that require a facility license be provided.
- c. A substance-free environment shall be defined as one in which all RCO/RCC staff, volunteers, and program participants agree to keep the Center free from prohibited substances at all times. Prohibited substances are defined to include alcohol in any form, as well as illicit and illegal drugs and related paraphernalia.
- d. Provide education, outreach services, information & referrals with warm handoffs, wellness and recovery activities, harm reduction, and recovery support services that are informed by Recovery Capital Index (RCI) survey responses and the monthly data analysis meetings.
- e. Ensure location-specific leadership team members are provided an opportunity to review RCI data and analysis conducted by Network to inform monthly calendar events planning.
- f. Ensure Participants have access to training, social, educational, and recreational opportunities, as well as information about substance use disorder treatment, recovery support services, recovery-friendly housing and information about other community resources, including but not limited to education and employment resources.
- e. Ensure that all services and activities are led and driven by the recovery community (i.e. individuals who have experienced addiction and recovery, either directly or indirectly as a family member or friend)..
- f. Provide services by appropriately trained, certified, and supervised individuals skilled in the constructs of recovery, peer support interventions, and recovery capital.
- g. Ensure all peers being hired as peer support specialists are certified or within 6 months of obtaining certification, prior to the first day of employment.
- h. Ensure Participants and staff are provided with the RCI survey, every 30 days, and encouraged to complete the survey.
- i. Ensure Participants seeking peer recovery support develop an Individualized Recovery/Resiliency Plan (IRP), informed by RCI results and the Participants' priorities. The IRP shall be reviewed at least once every 30 days provided the Participant returns for peer recovery supports within a 30-day time period. If a longer period of time elapses, then the plan shall be reviewed during the Participant's next visit to the RCO/RCC.
- j. Track and report to the COUNTY the number and types of activities (training, services) provided, referrals to services and/or providers with supporting documentation, on a monthly and quarterly basis. This information shall be included in the Network monthly narrative report and in the quarterly data reporting.
- k. Ensure calendar events and menus of opportunities are premised on each RCO/RCC location's RCI data and shared publicly at least 30 days in advance.

3. Other Requirements:

- a. The RCO/RCC Leadership Teams for each location shall be comprised of representatives from the local recovery community and meet regularly. Board Meeting Minutes and sign-in sheets (if meetings are in person) shall be provided with the quarterly reports.

- b. RCO/RCCs shall participate in research activities conducted by the County or its designated agent(s), including but not limited to providing access to data with appropriate permissions. The RCO/RCCs are to provide access to sites and facilitate access to participants who may volunteer for interviews.
- c. The Network services shall comport with SAMHSA’s working definition of Recovery and its ten guiding principles;¹ Guiding Principles and Elements of Recovery-Oriented Systems of Care;² Ethical Guidelines for the Delivery of Peer-based Recovery Support Services;³ and Recovery Capital Indexing⁴.
- d. The Countywide RCO shall attend the Palm Beach County Advisory Committee on Behavioral Health, Substance Use and Co-occurring Disorders meetings and ensure that all Network services and activities are aligned with the Palm Beach County Behavioral Health, Substance Use and Co-occurring Disorders Master Plan Update 2024.
- e. PBCBHC will serve solely as a fiscal agent to administer Network funds external to their own and may, upon request of the Network and a signed Memorandum of Understanding, offer technical assistance to assist the Network in sustainability planning and fiscal independence. The fiscal agent shall respect the Network’s role in assessing and responding to the evolving recovery support and recovery advocacy needs of the recovery community and shall not seek to influence the Network in its exercise of this role.

E. Required Outcomes

The Network will adhere to the following outcome requirements and report quarterly:

Outcome	Participants will be offered and encouraged to complete the Recovery Capital Index (RCI).
Indicator	80 % of Participants will complete the RCI to obtain a baseline overall wellness score.
Indicator	50% of Participants will complete a second RCI within 30 days after baseline survey.
Outcome	Participants will improve overall wellness.
Indicator	80% of Participants will improve overall wellness as evidenced by at least 1 point, in at least 1 domain on the RCI at assessment every 30 days.

Outcome	Participants will remain engaged with the Recovery Community Centers.
Indicator	50% of RCC participant will return for services within 30 days of last visit.

¹ <https://store.samhsa.gov/sites/default/files/d7/priv/pep12-recdef.pdf>
² https://www.viahope.org/wp-content/uploads/2018/01/SAMHSA_guiding_principles_Whitepaper.pdf
³ <https://dbhids.org/wp-content/uploads/2015/07/Philadelphia-Papers-Ethical-Guidelines-for-the-Delivery-of-Peer-Based-Recovery-Support-Services.pdf>
⁴ <https://recoverycapital.io/>

F. Required Deliverables

Deliverables	Date/Frequency
Monthly Report: Outcomes data and RCO/RCC Leadership Team Minutes. Activities from item j.	No later than 10 days after the end of each month.
Quarterly Report: Quarterly Outcomes data, Number and Types of Engagements; Number of Completed RCI surveys; Average Personal, Social, Cultural and Overall RCI scores per location for the Quarter, and provide the Calendar of Events for the Upcoming Quarter.	No later than 15 days after the end of each quarter (January 15, April 15, July 15, October 15)

FY 2022-2026 AD VALOREM OPIOID RESPONSE
PAYMENT SCHEDULE

Provider: Palm Beach County Substance Abuse Coalition, Inc. dba Palm Beach
County Behavioral Health Coalition (PBCBHC)
Program: County Recovery Community Organizations (RCO) and allied Recovery Community
Centers (RCC) Network
Service: Recovery Supports
Funding: Opioid Response
Funding Cycle: October 1, 2025 – September 30, 2026

The Scope of Work to be completed by AGENCY as defined in Exhibit – A3 consists of specific completion of the services as expressly indicated below. Compensation for the work tasks stated herein shall be in accordance with the following Schedule of Payments:

Service Deliverables	Total FY22	Total FY23	Total FY24	Total FY25	Total FY26	Total 5 Year Contract Amount
A report must be submitted along with the invoice that includes the following: Progress update on RCC/RCO developments; List of daily engagements to include peer services, events, training & classes, dates, time, number of participants, and the name of facilitators if applicable. Services may be provided face-to-face, virtually or hybrid of face-to-face and virtual.	\$550,000	\$1,250,000	\$1,250,000	\$1,250,000	\$1,100,000	\$5,400,000

Expenses will be reimbursed based on actual costs, as evidenced by AGENCY’S general ledgers or other proof of payments. Up to \$10% of actual expenses may be added for administrative costs.

Detail by FEI/EIN Number

Name & Address

Title Chairperson

Fiddis, Carol
2300 High Ridge Road
#365
Boynton Beach, FL 33426

Title Treasurer

Cairnes, Jan
2300 HIGH RIDGE RD
SUITE 365
BOYNTON BEACH, FL 33426

Title Secretary

Brown-Faust, Monique
2300 HIGH RIDGE RD
SUITE 365
BOYNTON BEACH, FL 33426

Title Executive Director

WERTEPNY, Ryan
2300 High Ridge Road
#365
Boynton Beach, FL 33426

Title VP

Hamilton, Anthony
2300 High Ridge Rd
Boynton Beach, FL 33426

Annual Reports

Report Year	Filed Date
2023	03/29/2023
2024	02/14/2024
2025	01/15/2025

Document Images

01/15/2025 -- ANNUAL REPORT	View image in PDF format
02/14/2024 -- ANNUAL REPORT	View image in PDF format
03/29/2023 -- ANNUAL REPORT	View image in PDF format
06/06/2022 -- AMENDED ANNUAL REPORT	View image in PDF format
02/09/2022 -- ANNUAL REPORT	View image in PDF format
06/09/2021 -- ANNUAL REPORT	View image in PDF format
11/09/2020 -- Reg. Agent Change	View image in PDF format
04/28/2020 -- ANNUAL REPORT	View image in PDF format

**NONGOVERNMENTAL ENTITY HUMAN
TRAFFICKING AFFIDAVIT (§ 787.06(13), Fla. Stat.)
THIS AFFIDAVIT MUST BE SIGNED AND NOTARIZED**

I, the undersigned, am an officer or representative of Palm Beach County Substance Abuse Coalition
(CONTRACTOR) and attest that CONTRACTOR does not use coercion for labor or services as
defined in section 787.06, Florida Statutes.

Under penalty of perjury, I hereby declare and affirm that the above stated facts are true
and correct.


(signature of officer or representative)


Ryan Wertepny, Executive Director
(printed name of officer or representative)

State of Florida, County of Palm Beach

Sworn to and subscribed before me by means of ☒ physical presence or ☐ online notarization
this, 2nd day of July, 2025, by Ryan Wertepny

Personally known ☐ OR produced identification ☒

Type of identification produced Florida Driver License


NOTARY PUBLIC
My Commission Expires: Aug 3rd 2026
State of Florida at large

(Notary Seal)



ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
6/10/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER CBIZ Insurance Services 44 Baltimore St Cumberland, MD 21502 301 777-1500		CONTACT NAME: Select Business Unit PHONE (A/C, No, Ext): 888-408-7500 FAX (A/C, No): E-MAIL ADDRESS: cbizselect@cbiz.com	
		INSURER(S) AFFORDING COVERAGE	
		INSURER A : Lloyds of London	
		INSURER B : Atlantic Specialty Insurance Company	
		INSURER C : Mount Vernon Fire Insurance Company	
		INSURER D :	
		INSURER E :	
		INSURER F :	

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. 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 POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			W261FD250701	02/13/2025	02/13/2026	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$25,000 PERSONAL & ADV INJURY \$0 GENERAL AGGREGATE \$3,000,000 PRODUCTS - COM/OP AGG \$3,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB EXCESS LIAB DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B	D&O/EPLI			MML0029080225	02/13/2025	02/13/2026	Limit/Ded: \$1M/\$10K
C	Inland Marine			C12554739F	04/18/2025	04/18/2026	Limit/Ded: \$15,000/\$1K
A	Professional Liab			W261FD250701	02/13/2025	02/13/2026	See Description

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Named Insured Continuation: DBA Palm Beach County Behavioral Health Coalition, Palm Beach County HUB.

Insurer: A; Professional Liability - Each Claim: \$1,000,000; Aggregate: \$3,000,000; Deductible: \$1,000.

Additional Insured in favor of Palm Beach County Board of County Commissioners, a Political Subdivision of (See Attached Descriptions)

CERTIFICATE HOLDER **CANCELLATION**

Palm Beach County Board of Commissioners c/o Community Service Department, 810 Datura Street West Palm Beach, FL 33401	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE CBIZ Insurance Services, Inc.
---	--

DESCRIPTIONS (Continued from Page 1)

the State of Florida, its officers, employees, and agents with respect to General Liability when required by written contract subject to the terms, conditions, and exclusions of the policy.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
08/18/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.	
IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).	
PRODUCER AUTOMATIC DATA PROCESSING INS AGCY 76250872 1 ADP BLVD M/S 625 ROSELAND NJ 07068	CONTACT NAME: PHONE (800) 524-7024 (A/C, No, Ext): FAX (800) 524-4013 (A/C, No): E-MAIL ADDRESS: INSURER(S) AFFORDING COVERAGE INSURER A : Hartford Fire and Its P&C Affiliates INSURER B : INSURER C : INSURER D : INSURER E : INSURER F : NAIC# 00914
INSURED PALM BEACH COUNTY SUBSTANCE ABUSE COALITION INC 2300 HIGH RIDGE RD BOYNTON BEACH FL 33426-8747	

COVERAGES		CERTIFICATE NUMBER:		REVISION NUMBER:			
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. 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 POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.							
INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	UMBRELLA LIAB EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE AGGREGATE
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N N/A			76 WEG AD9M50	09/09/2024	09/09/2025	X PER STATUTE OTHER E.L. EACH ACCIDENT \$100,000 E.L. DISEASE -EA EMPLOYEE \$100,000 E.L. DISEASE - POLICY LIMIT \$500,000
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Those usual to the Insured's Operations.							

CERTIFICATE HOLDER	CANCELLATION
Palm Beach County Board of Commissioner c/o Community Services Department 810 DATURA ST WEST PALM BEACH FL 33401	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE <i>Susan L. Castaneda</i>

© 1988-2015 ACORD CORPORATION. All rights reserved.