HENNEPIN COUNTY GROUP RESIDENTIAL HOUSING (GRH) AGREEMENT

Family Adult Foster Care

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| Licensee's Name: |  |
| Address: |  |
| SSN or Tax ID Number: |  |
| GRH/Maxis Vendor Number: |  |
| License #: |  |

GRH Rate: $xxx base rate per month (effective July 1, 201x) plus Difficulty of Care Rate (DOC) as determined for each client by the client’s case manager not to exceed MSA maximum of $yyy.

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| GRH Beds: |  |
| Non-Profit?: |  |

* This Group Residential Housing agreement is subject to the provisions of Minnesota Statute 256I.01-256I.08 and any changes to that statute.
* Provider must obtain, retain and comply with all necessary licenses and/or registrations that are required by the Minnesota Department of Human Services under Rule 203 Adult Foster Care or Rule 245D-CRS Community Residential Services.
* Hennepin County may establish additional standards as a condition of provider receiving Group Residential Housing funds.
* Provider shall comply with all applicable statutes, regulations and licensing requirements including but not limited to State and Federal laws and local ordinances.
* Provider agrees to defend, indemnify, and hold harmless the County, its officials, officers, agents, volunteers and employees from any liability, claims, causes of action, judgments, damages, losses, costs, or expenses, including reasonable attorneys’ fees, resulting directly or indirectly from any act or omission of Provider, its subcontractors, anyone directly or indirectly employed by them and/or anyone for whose acts and/or omissions they may be liable in the performance of the services required by this Agreement, and against all loss by reason of the failure of Provider to perform fully, in any respect, all obligations under this Agreement.
* The Provider must produce any information requested by Hennepin County to verify compliance with State or County requirements. The County may make unannounced site visits to assure the requirements are being met.
* The Provider must notify the County within 10 working days of a resident leaving the facility.
* Hennepin County retains the right of first access to available GRH housing units.
* As a condition of this agreement the provider will present to the County verification that at least $zzz per GRH client per month is spent for the purchase of food for each client. Verification must be provided at the annual renewal of this agreement or at such time that the County requests verification. The following signature serves as this verification.
* As further condition of this agreement the provider must inform each GRH client upon leaving the GRH provider’s setting that the client is eligible for Food Support and that the client is to contact the County to continue to receive Food Support.
* If a GRH provider fails to comply with this additional condition of the Agreement, the County may cancel the agreement under provision of MN Statute 256I.04, Supd. 2b.
* In the event of an overpayment, the Provider must return the money within 30 days of notification.
* The County may at any time set a lower GRH rate in accordance with Minnesota Statute 256I.05 Subd.1(a)(3). GRH agreements can be terminated without cause, in writing, by either the County or the Provider with two months prior notice in accordance with Minnesota Statute 256I.04, Subd2b. This agreement may be terminated immediately if the health and welfare of clients is in jeopardy.

**Authorized GRH Provider’s Signature Date Telephone Number**

**Print Name**

**Title Email Address**

**\*If you are not the individual who manages vacancies, please provide their name and email below:**

**Name Email Address**

**Authorized Hennepin County Human Services Date**

**and Public Health Department (HSPHD)**

**Representative’s Signature**

Markus Klimenko Program Manager

**Print Name Title**

612-596-7036

**Contact Number**