

**Contractual Services Agreement
Between The Next Step Counseling Services, LLC
& Marion County Board of Education**

This agreement is entered into between the Marion County Board of Education and The Next Step Counseling Services, LLC for the 2015-2016 school year relating to professional mental health services provided by The Next Step Counseling Services, LLC. These services will be provided for students within the Marion County School District in conjunction with the Family Resource and Youth Services Centers.

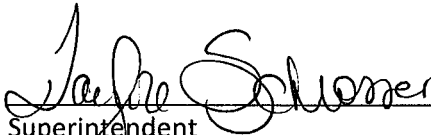
The Next Step Counseling Services, LLC Agrees To:

1. Provide mental health counseling to specified students which may include the following modalities: individual, family, group, and collateral services.
2. Ensure that all services under this agreement will be provided by a Mental Health Professional with a master's degree (or above) in psychology, social work or a related field.
3. Provide professional liability insurance coverage for all professionals providing services under this agreement.
4. Establish and maintain a treatment record for each child receiving counseling services under this agreement in accordance with the Department of Licensure, Department of Mental Health, Medicaid, and other applicable standards.
5. Maintain confidentiality for persons receiving services under this agreement in accordance with applicable professional standards, laws and regulations. It is recognized that The Next Step Counseling Services, LLC and Marion County personnel shall be in communication with one another concerning treatment of students.
6. Provide educational consultation services to staff.
7. The Next Step Counseling Services, LLC agrees to bill Medicaid and/or other private insurance for all students covered by such. The Marion County Board of Education will not be billed any amount if Medicaid and/or private insurance cover a service.
8. Service Provider agrees to provide the above described services as an independent contractor. Withholding of FICA, Federal, State, and Local taxes will not be the responsibility of Marion County Board of Education.

Marion County Board of Education Agrees To:

1. Provide suitable space for the delivery of mental health counseling in order to provide confidentiality.
2. Maintain confidentiality related to the treatment of services provided under this agreement in accordance with applicable professional standards and applicable laws and regulations.
3. Marion County Schools and The Family Resource/Youth Services Center will not be billed for any services covered by Medicaid and/or private insurance when requested services are consistent with Medical Necessity as defined by the Center of Medicare and Medicaid and as allowable regarding the credentials of the providers involved, for all students covered by such.

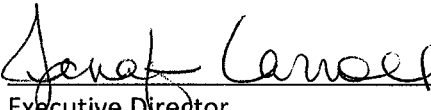
This agreement becomes effective in the later date signed below. Either Party may terminate this agreement upon thirty (30) days written notice to the other party.



Superintendent
Marion County Board of Education

3/10/14

Date



Executive Director
The Next Step Counseling Services, LLC

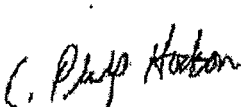
3/2/16

Date

RECEIVED
MAR 02 2016
MCPS

Certificate of Insurance (Proof of Coverage) 11/30/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER.
THIS CERTIFICATE DOES NOT AMEND, EXTEND, OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

Insured Name and Mailing Address*		Program Administrator
The Next Step Counseling Services Jenafier Carroll 1106 Tunnel Hill Rd, ste 100 Elizabethtown, KY 42701		Administered By: CPH and Associates 711 S. Dearborn, Suite 205 Chicago, IL 60605 P. 312-987-9823 F. 312-987-0902 info@cphins.com Underwritten By: Philadelphia Indemnity Insurance Company
*Additional insured locations are often requested by individual business owners who have more than one office. Your coverage is portable, meaning that you are covered at any location for practice under the occupation(s) listed on your policy.		
Coverage		
Policy #: E30911	Effective Date: 12/21/2015	Expiration Date: 12/21/2016
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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.		
Limits of Liability		Coverage Part
EACH OCCURRENCE (Per individual claim)	AGGREGATE (Total amount per policy year)	
\$1,000,000	\$3,000,000	Professional Liability
N/A	N/A	Commercial General Liability (Includes: General Liability, Fire & Water Legal Liability, and Personal Liability)
N/A	N/A	Property Coverage
\$1,000,000	\$3,000,000	Supplemental Liability
Unlimited	Unlimited	Defense Expense Coverage
\$35,000	\$35,000	State Licensing Board Investigation Defense Coverage
\$15,000	\$15,000	Assault Coverage
\$10,000	\$35,000	Deposition Expense Benefit
\$5,000/person	\$50,000	Medical Expense Coverage
\$15,000	\$15,000	First Aid Coverage
Description/Special Provisions:		
Certificate Holder	Cancellation	
PROOF OF COVERAGE Holder has also been added to the policy as an additional insured:** Yes <input checked="" type="checkbox"/> No	Should any of the above described policy be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives.	
**If the certificate holder is an ADDITIONAL INSURED, the policy (ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement (s).	 Authorized Representative C. Philip Hodson	

DISCLAIMER: The Certificate of Insurance does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend, or alter the coverage afforded by the policies listed thereon.