



MARGIE R IBARRA  
COUNTY CLERK  
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WEBB COUNTY, TEXAS

## SERVICES OPERATIONS CONTRACT

### WEBB COUNTY, FOR THE WEBB COUNTY VETERANS TREATMENT PROGRAM SAMHSA GRANT 6H79TI081929-04

BY *All* DEPUTY

#### Global Positioning System Monitoring Continuous Alcohol Monitoring Breath-Alcohol Testing Drug Patch

This Operations Agreement (the "AGREEMENT") is made and entered into by and between **Recovery Monitoring Solutions Corporation dba Recovery Healthcare Corporation ("Recovery")** and

Webb County for the Webb County Veteran's Treatment Program ("DEPARTMENT")  
4101 Juarez Street  
Laredo, TX 78040  
Phone: (956) 523-4654

Appointment of Recovery. In accordance with the terms and conditions set forth herein, and in consideration of the payments hereinafter provided, **Recovery** is hereby appointed to provide to **Department**, and **Recovery** hereby agrees to furnish to **Department**, the Services provided for herein.

Term. This AGREEMENT shall become effective for a one (1) year period beginning on September 1, 2022 and ending on August 31, 2023 (unless terminated herein under the provisions below). The agreement shall automatically renew for another one (1) year term for a period not to exceed three (3) total years, unless either party provides notice to the other of its intent to terminate the agreement not less than thirty (30) days before the end of the then current term.

### ARTICLE I RATES, MINIMUM REQUIREMENTS, AND STATEMENT OF SERVICES

1.1 **Recovery** and the **Department** agree to the following rates for **Department** funded services:

FULL SERVICE ELECTRONIC MONITORING PROGRAM	DEPARTMENT FUNDED	
	DAILY RATE	SET-UP FEE
GPS Monitoring Active	\$8.50	No Additional Charge
GPS Monitoring Passive	\$7.00	No Additional Charge



FULL SERVICE ELECTRONIC MONITORING PROGRAM	DEPARTMENT FUNDED	
	DAILY RATE	SET-UP FEE
SCRAM CAM	\$10.00	No Additional Charge
SCRAM CAM Ethernet	No Additional Charge	
Breath-Alcohol Testing	\$6.00	No Additional Charge

DRUG PATCH	
EQUIPMENT ONLY	DEPARTMENT FUNDED
Drug Patch	\$80.00 (Per Patch)

1.2 Certified Provider. **Recovery** has been duly certified as a provider for GPS, SCRAM CAM Continuous Alcohol Monitoring System, and the SCRAM Remote Breath Alcohol Testing Device in the State of Texas.

1.3 Services. **Recovery** shall, in accordance with the terms of this AGREEMENT, provide all necessary personnel, equipment, materials, supplies, and services (except as may be furnished by the **Department** as specified in writing as part of this agreement) and do all things necessary for, or incidental to, the provision of the services.

1.4 Court Testimony. **Recovery** agrees to provide testimony in court, if required, at no additional cost to the **Department** with fourteen (14) calendar days' advance notice.

1.5 Other: (Specific Requirements for Department Funded Program)

I. General Duties of **Recovery**:

- (a) **Recovery** may offer, with fourteen (14) day advanced notice and for no additional cost, on-site program training and assistance for the **Department's** staff to explain the procedures for installation, monitoring, maintenance, de-installation and utilization of the monitoring software systems;
- (b) **Recovery** (844) 909-8555 provides live technical support to assist **Department** staff with questions or issues that may arise with the Continuous Alcohol Monitoring (CAM) and Breath-Alcohol Testing (BAT) programs from 7:00 a.m. to 9:00 p.m., Monday through Saturday including holidays;
- (c) **Recovery** provides live technical support to assist **Department** staff with questions or issues that may arise with the GPS program 24 hours, seven days per week including holidays. **Department** staff should contact **Recovery** at (844) 909-8555 for issues pertaining to individual Participants or equipment repair needs;
- (d) **Recovery** will configure and establish automated notification programs, as applicable per technology, for alcohol and GPS monitoring technologies that include the system-generated automated text and electronic mail notifications to Department designees;



- (e) **Recovery**, for an additional fee as noted in Section 1.1, offers Enhanced GPS Monitoring consisting of:
- Violation alert management 24/7/365 including holidays;
  - After hours text message and/or e-mail notification to **Department** staff, if desired;
  - After hours telephonic contact with the participant to investigate specific alerts per Department protocol;
  - After hours e-mail reports from Central Monitoring Center staff to **Department** representatives of specified violations per Department Protocol;
  - Recovery will provide a template for the development of the Department Notification Protocol for Enhanced GPS Monitoring.
- (f) **Recovery** will require the participant to complete a Program Participant Agreement;
- (g) **Recovery** will abide sole responsibility for participant enrollment; program orientation; alcohol sobriety verification; violation reporting; and equipment installation, troubleshooting, fit adjustments, maintenance, replacement, removal, and recovery;
- (h) **Recovery** will provide a program orientation consisting of an explanation of program rules and the proper maintenance, care, and operational features of the monitoring equipment;
- (i) **Recovery**, with the participant's cooperation, will make a good faith effort to schedule installation of monitoring equipment in accordance with the manufacturer's recommended guidelines and begin monitoring within forty-eight (48) business hours of referral for participants incarcerated within the State of Texas;
- (j) **Recovery** will monitor participants through the web-based, password protected information management system;
- (k) **Recovery** will provide written reports via e-mail of participant enrollment, non-compliance, termination, and any other information requested;
- (l) **Recovery** shall notify referring authorities of participant non-compliance (curfew violations, missed alcohol tests, alcohol detection or device manufacturer-confirmed consumption, equipment manipulation/obstructions/tampers, unauthorized device removal, etc.) and provide written reports as required by agreement with the referring agent, typically within twenty-four (24) hours of reporting the act of noncompliance;
- (m) **Recovery** will provide the **Department** with a monthly SCRAM CAM and Breath Alcohol Testing compliance report for each individual participating in the program;
- (n) **Recovery's** Dallas-based Division Managers will provide oversight to ensure prompt participant enrollment, secure monitoring, thorough documentation and timely dissemination of violation notifications;
- (o) **Recovery** will provide to the **Department** a monthly invoice identifying the participant's names and number of days monitored under the **Department** funding model;



(p) **Recovery** will initiate program termination proceedings in response to the following violations:

- **SCRAM CAM:** When the participant has committed certain program violations, including failure to return phone calls from **Recovery** staff in a timely manner, failure to download data from the SCRAM CAM device, and failure to report for equipment maintenance (deactivation requires **Department** approval – please see Exhibit B).
- **Breath-Alcohol Testing:** When the participant has committed certain program violations, including failure to perform a test for 24 consecutive hours without authorization or failure to report for equipment maintenance.

(q) **Recovery** will pay the shipping costs for all equipment distributed to **Webb County** via standard three (3) day delivery service;

(r) **Recovery** will collect a deposit fee equal to the replacement costs of all equipment assigned to participants who reside or travel out of state for extended periods of time;

(s) **Recovery** will terminate monitoring immediately upon written request from the **Department** and make a good faith effort to recover all equipment within twenty-four (24) hours of deactivation;

(t) **Recovery** will abide the sole responsibility for collecting, from the participant, 100% of the cost for repairing or replacing all lost, damaged or stolen equipment;

(u) **Recovery** will bill the participants for the replacement and repair costs of all lost, damaged and stolen equipment:

Attenti GPS Bracelet	\$1,000.00
Attenti GPS Charger	\$ 50.00
Attenti GPS Strap	\$ 20.00
Attenti GPS Beacon	\$ 400.00
SCRAM CAM Bracelet	\$1,300.00
SCRAM CAM Base Station	\$ 500.00
SCRAM CAM Strap	\$ 75.00
SCRAM CAM Power Cord	\$ 50.00
SCRAM CAM Phone Cord	\$ 10.00
Breath-Alcohol Device	\$ 800.00
Breath-Alcohol Charger	\$ 25.00
Breath-Alcohol Case	\$ 30.00

(v) **Recovery** reserves the right to initiate criminal or civil action against any participant who is responsible for lost, damaged or stolen equipment.

II. General Duties of the **Webb County Veteran’s Treatment Program:**

(a) The **Department** will provide reasonable workspace for equipment installer(s), if applicable;

(b) The **Department** will provide the name, job title, and contact information (e-mail address and phone number) for the person or persons designated to receive reports of non-compliance, notification of installation and de-installation, and other administrative and informational reports;



- (c) The **Department** will notify **Recovery** on or before the date that a different person(s) identified in paragraph (b) above has been designated to receive the reports or any revisions have been made to the existing individual's contact information;
- (d) The **Department** will provide initial and updated information for participants monitored on GPS/RF in a timely manner for required notification of law enforcement agencies or victim(s);
- (e) The **Department** will provide initial and updated information in a timely manner for the effective monitoring of participants on GPS/RF (curfew timeframes, inclusion zones, exclusion zones, etc.);
- (f) The **Department** will develop a **Department** Notification Protocol document that includes contact information for on-call personnel should GPS Enhanced Monitoring be included in any **Department** program. The **Department** must arrange for a staff member to be on call 24/7/365 to be eligible for the GPS Enhanced Monitoring Program;
- (g) The **Department** will compensate **Recovery** for **Department** funded Participants within thirty (30) days of the monthly invoice receipt;
- (h) The **Department** will assist **Recovery** regain possession of all equipment within twenty-four (24) hours of deactivation;
- (i) The **Department** will report all incidents of lost, damaged and stolen equipment to **Recovery** within one (1) calendar day of discovering the event.

### III. **Limitations and Liabilities**

- (a) **Recovery** expressly disclaims any warranty that its service or that its system is impervious to tampering. In no event shall **Recovery** be liable for any direct, indirect, special, consequential, or incidental damages in connection with or arising out of the performance or use of the products or services provided under this agreement or any orders hereunder. In no event shall **Recovery** assume or bear any responsibility or liability for acts that may be committed by a participant or persons subject to, using or monitoring the equipment;
- (b) **Recovery** shall not be liable for any failure or delay in performance of this agreement hereunder which is due in whole or in part to any cause beyond its control;
- (c) **Recovery** will maintain the right to conduct business development activities with other agencies, Courts, and service providers in **Webb County, Texas**.

## **ARTICLE II REPRESENTATIONS AND WARRANTIES**

**Recovery** represents and warrants to and for the benefit of **DEPARTMENT** with the intent that **DEPARTMENT** rely thereon for the purposes hereof, the following:

2.1 **Legal Status.** **Recovery** (1) is a validly organized and constituted sole proprietorship or partnership in the jurisdiction in which it is formed and in good standing therein; or, is a corporation duly incorporated and validly existing under the laws of the jurisdiction in which it is incorporated and in good standing therein; (2) is duly qualified to conduct business in the State of Texas; and (3) has legal power and authority to own or lease its properties and conduct its business as presently conducted.



2.2 **Authorization.** The making and performance of this AGREEMENT has been duly authorized by all necessary action and will not violate any provision of current law or **Recovery's** charter or by-laws. The AGREEMENT has been duly executed and delivered by **Recovery** and, assuming due execution and delivery by **DEPARTMENT**, constitutes a legal, valid, and binding AGREEMENT enforceable against **Recovery** in accordance with its terms.

2.3 **Taxes.** **Recovery** has filed all necessary federal, state, and foreign income and franchise tax returns and has paid all taxes as shown to be due thereon, including penalties and interest, or provided adequate reserves for payment thereof, except to the extent that same have become due and payable but are not yet delinquent, and except for any taxes and assessments of which the amount applicability or validity is currently being contested in good faith by appropriate proceedings.

2.4 **No Child Support Owning.** In accordance with 231.006 of the Texas Family Code, no person who is the sole proprietor, a partner, a shareholder, or an owner of twenty-five percent (25%) or more of **Recovery** and who is now more than thirty (30) days delinquent in paying court ordered approved child support may receive payment from state funds under a contract. Under 231.006, Family Code, **Recovery** certifies that it is not ineligible to receive the Payments and acknowledges that this AGREEMENT may be terminated, and Payments may be withheld if this certification is inaccurate.

2.5 **Use of Payments.** No part of the Payments made to **Recovery** will be expended for any consultant fees, honorariums, or any other compensation to any employee of **DEPARTMENT** or for unallowable costs as defined by the **DEPARTMENT**. **Recovery** shall expend Payments made hereunder solely for providing direct services and for reasonable and allowable expenses directly related to the provision of Services.

2.6 **Non-Discrimination.** In the performance hereof, **Recovery** warrants that it shall not discriminate against any employee, subcontractor, or participant on account of race, color, disability, religion, sex, national origin, age, or those who have or are perceived to have a disability because of AIDS or HIV infection, antibodies to HIV, or infection with any other probable causative agent of AIDS. **Recovery** shall include the provisions of this paragraph regarding non-discrimination in each of its contracts with subcontractors so that such provisions will be binding upon each subcontractor.

2.7 **Non-Collusion.** **Recovery** warrants that no Person, other than a bona fide employee, has been employed to solicit or secure this AGREEMENT with **DEPARTMENT**, and **Recovery** has not paid or agreed to pay any Person, other than a bona fide employee, any fee, commission, percentage, or brokerage fee, gift, or any other consideration, contingent upon or resulting from the execution hereof. For breach or violation of this provision, **DEPARTMENT** shall have the right to terminate this AGREEMENT without liability, or at its discretion to deduct from Payments, or otherwise recover, the full amount of such fee, commission, brokerage fee, gift, or contingency fee.

### ARTICLE III GENERAL CONDITIONS

3.1 **Duties and Obligations.** **Recovery** shall provide the Services in compliance with applicable federal and state law, including all constitutional, legal and court ordered requirements, whether now in effect or hereafter affected or implemented.

3.2 **Visitation by State Employees.** **Recovery** shall at all times allow employees/agents of the Governor, members of the Legislature and all other members of the Executive and Judicial branches of the State of Texas, the Contract Monitor, and any other persons designated by the **DEPARTMENT** to monitor the delivery of Services and contract compliance of the **Recovery**.

3.3 **No Subcontractors.** No subcontractor may be utilized by **Recovery** unless **DEPARTMENT** has furnished prior written approval.



3.4 **Confidentiality.** When applicable, records of identity, diagnosis, prognosis, or treatment of any participant through this AGREEMENT shall be confidential and may be disclosed only in accordance with applicable laws. No information may be released without the participant's written consent as documented by a signed information release form. **Recovery** shall notify **DEPARTMENT** in writing if any legal process requires disclosure of a participant's record and shall obtain written acknowledgement of same from **DEPARTMENT'S** Authorized Representative.

3.5 **Termination at Will.** Either party may terminate this AGREEMENT for any reason whatsoever, without cause and at any time, by furnishing to the other party thirty (30) days prior written notice. **DEPARTMENT'S** only obligation for terminating the AGREEMENT pursuant to this section shall be the payment to **Recovery** of Payments earned hereunder up to the date of termination. **Recovery's** only obligation for terminating this AGREEMENT pursuant to this section shall be to provide Services until the date of termination. Neither **Recovery** nor **DEPARTMENT** shall thereafter be entitled to any other compensation.

3.6 **Record Retention.** All records shall be the property of **DEPARTMENT**. All records (electronic or paper) pertinent to the provisions of Services hereunder shall be retained by the **Recovery** for a period of five years with the following qualification: If any audit, litigation or claim is started before the expiration of the five-year period, the records shall be retained until all audits, litigation, claims, or other findings involving the records have been resolved. The retention period for all records begins after **DEPARTMENT** has made the final Payment in accordance with this AGREEMENT. At the end of the five-year period, **Recovery** will request disposition instructions from **DEPARTMENT**.

#### **ARTICLE IV ADMINISTRATION AND FISCAL SYSTEM**

4.1 **Administrative Controls.** **Recovery** shall establish, document and maintain adequate administrative, financial, and internal controls to ensure that only allowable and reasonable costs are expended under this AGREEMENT.

4.2 **Governing Board Responsibility.** The appropriate governing board or entity of **Recovery** shall bear full responsibility for the integrity of the services provided, including compliance with applicable federal and state laws and regulations. Ignorance of any AGREEMENT provisions or other requirements contained herein shall not constitute a defense or basis for waiving or appealing such provisions or requirements.

4.3 **Conflict of Interest.** **Recovery** shall not refer Participants for additional services without prior written approval of the **DEPARTMENT**. **Recovery** shall develop and implement written internal policies that may be reviewed by the **DEPARTMENT** to ensure that members of the governing board, contractual personnel, consultants, volunteers, and employees do not use their positions with **Recovery** for a purpose that is, or gives the appearance of being, motivated by a desire for personal gain or gain by a family member.

4.4 **Remuneration.** Staff of **Recovery** shall not pay or receive any commission, consideration, or benefit of any kind related to the referral of a participant for treatment or engage in fee-splitting with other professionals.

4.5 **Audits.** **Recovery** agrees to furnish **DEPARTMENT** with such information as may be required relating to the Services rendered hereunder. **Recovery** shall permit **DEPARTMENT** to audit and inspect records and reports and to evaluate the performance of Services at any time. **Recovery** shall provide reasonable access to all records, books, reports, and other necessary data and information needed to accomplish review of program activities, services, and expenditures, including cooperation with **DEPARTMENT** in its performance of random or routine audits to determine the accuracy of **Recovery** reports.



4.6 Disclosure. **Recovery** is required to immediately or timely, as the case may be, disclose to **DEPARTMENT** the following:

- (a) If any Person who is an employee or director of **Recovery** is required to register as a lobbyist under Texas Government Code Chapter 305, at any time during the term hereof, **Recovery** shall provide to **DEPARTMENT** timely copies of all reports filed with the Texas Ethics Commission as required by Chapter 305;
- (b) If any Person who is an employee, subcontractor, or director of **Recovery** is or becomes an elected official (i.e., an elected or appointed state official or member of the judiciary, or a United States congressman or senator), during the term hereof;
- (c) Report any actions or citations by federal, state, or local governmental agencies that may affect **Recovery's** licensure status or its ability to provide Services hereunder.

4.7 Withhold Payments. The **DEPARTMENT** may withhold payments for any ineligible claims including inadequate or untimely monthly invoices until such time as the ineligible, inadequate or untimely claim is resubmitted and/or corrected by **Recovery**. **Recovery** agrees to return any unearned amounts paid by the **DEPARTMENT** within (30) days following the final date of the contract period, or at the **DEPARTMENT'S** option, within thirty (30) days following the **DEPARTMENT'S** delivery to **Recovery** a notice that amounts paid are to be returned to the **DEPARTMENT**.

4.8 Accounting Records. **Recovery** agrees to maintain a separate accounting or bookkeeping system specifically isolating the revenue and expenditures associated with this AGREEMENT in accordance with fund accounting principles.

4.9 Payments to Recovery. **Recovery** shall submit Monthly Invoices (in writing or electronically) as required herein and shall receive payments from **DEPARTMENT** based thereon, subject to the provisions in this AGREEMENT. **Recovery** will provide an itemized list of Services performed during the invoice period, including the names of all participants served, the service provided, and the amount of time rendered with each. **DEPARTMENT** agrees to pay **Recovery** within thirty (30) days after receipt of the Monthly Invoice.

4.10 Specific Measures. All terms of this AGREEMENT are subject to monitoring and verification; however, **Recovery** must have available for the **DEPARTMENT'S** inspection records to support performance of those measures outlined in Article I herein.

4.11 Misspent Funds. **Recovery** will refund expenditures of **Recovery** that are contrary to this AGREEMENT and deemed inappropriate by the **DEPARTMENT** or designee.

## ARTICLE V DEFAULT AND TERMINATION

5.1 Default by Recovery Monitoring Solutions Corporation. Each of the following shall constitute an Event of Default on the part of the **Recovery**:

- a. A material failure to keep, observe, perform, meet, or comply with any covenant, term, or provision hereof, which failure continues for a period of twenty (20) days after receipt of **Recovery** of written notification thereof;





- b. (1) Admit in writing its inability to pay its debts;  
(2) make a general assignment for the benefit of creditors;  
(3) suffer a decree or order appointing a receiver or trustee for it or substantially all of its property, and, if entered without its consent, same is not stayed or discharged within sixty (60) days of such decree or order,  
(4) suffer filing under any law relating to bankruptcy, insolvency, or the reorganization for relief of debtors by or against it and, if contested by it, not to be dismissed or stayed within sixty (60) days of such filing; or  
(5) suffer any judgment, writ of attachment or execution, or any similar process issued or levied against a substantial part of its property that is not released, stayed, bonded, or vacated with sixty (60) days after such issuance or levy, and
- c. The discovery by **DEPARTMENT** that any statement, representation of warranty in this AGREEMENT is false, misleading, or erroneous in any material respect.

5.2 **Remedy of DEPARTMENT.** Upon the occurrence of an Event of Default by **Recovery**, **DEPARTMENT** shall notify **Recovery** of such Event of Default, and subject to the time provisions of Section 5.1 hereof, **DEPARTMENT** shall have the right to pursue any remedy it may have at law or in equity, including, but not limited to, (a) suspend referral of participant; (b) suspend payment; (c) taking action to cure the Event of Default, in which case **DEPARTMENT** may offset against any Payments owed to **Recovery** all reasonable costs incurred by **DEPARTMENT** in connection with its efforts to cure such Event of Default; and (d) termination and removal of **Recovery** as provider of Services. In the event of **Recovery's** removal due to an Event of Default, **DEPARTMENT** shall have no further obligations to **Recovery** after such removal and in such event, **Recovery** agrees to cooperate with **DEPARTMENT** regarding a transition to new provider of Services.

5.3 **Default by DEPARTMENT.** The following shall constitute an Event of Default on the part of **DEPARTMENT**: failure by **DEPARTMENT** to pay within thirty (30) days after Payment is due any Payment required to be paid pursuant to the terms hereof.

5.4 **Remedy of Recovery.** Upon an Event of Default by **DEPARTMENT**, **Recovery's** sole remedy shall be to terminate this AGREEMENT. Upon such termination, **Recovery** shall be entitled to receive Payment from **DEPARTMENT** for all Services satisfactorily furnished hereunder up to and including the date of termination.

5.5 **AGREEMENT Subject to Availability of Funds.** This AGREEMENT will be subject to the availability of funds. If such funds become reduced or unavailable, this AGREEMENT shall be subject to immediate modification, reduction or termination.

## ARTICLE VI INDEPENDENT CONTRACTOR

**Recovery** is associated with **DEPARTMENT** only for the purposes and to the extent set forth herein, and with respect to the performance of Services hereunder, **Recovery** is and shall be an independent contractor and shall have the sole right to supervise, manage, operate, control, and direct the performance of the details incident to its duties hereunder. Nothing contained herein shall be deemed or construed to create a partnership or joint venture, to create the relationships of an employer-employee or principle-agent, or to otherwise create any liability for **DEPARTMENT**, the State of Texas and its offices, agents, and employees (hereafter, collectively referred to as the "State") whatsoever with respect to the indebtedness, liabilities, and obligations of **Recovery** or any other party. **Recovery** shall be solely responsible for (and **DEPARTMENT** shall have no obligation with respect to) payment of all Federal Income, F.I.C.A., and other taxes owed or claimed to be owed by **Recovery**, arising out of **Recovery's** association with **DEPARTMENT** pursuant hereto, and **Recovery** shall indemnify and hold **DEPARTMENT** harmless from and against any and all liability from all losses, damages, claims, costs, penalties, liabilities, and expenses howsoever arising or incurred because of, incident to, or otherwise with respect to any such taxes.



## ARTICLE VII MISCELLANEOUS PROVISIONS

7.1 **Force Majeure.** **Recovery** and **Department** agree that **Recovery** shall not be liable for any delay or inability to perform this agreement, directly or indirectly caused by, or resulting from, strikes, labor troubles, accidents, fire, flood, breakdowns, war, riot, civil commotion, lack of material, delays of transportation, pandemics, acts of God or other cause beyond reasonable control of **Recovery** and the **Department**.

7.2 **Inconsistencies.** Where there exists any inconsistency between this AGREEMENT and other provisions of collateral contractual Agreements that are made a part hereof by reference or otherwise, the provisions of this Agreement shall control.

7.3 **Severability.** Each paragraph and provision hereof is severable from the entire AGREEMENT and if any provision is declared invalid, the remaining provisions shall nevertheless remain in effect.

7.4 **Prohibition Against Assignment.** There shall be no assignment or transfer of this AGREEMENT without the prior written consent of both parties.

7.5 **Law of Texas.** This AGREEMENT shall be governed by and construed in accordance with the laws of the State of Texas and shall be enforced in the county of the applicable judicial district in which this agreement was entered.

7.6 **Notices.** All notices called for or contemplated hereunder shall be in writing and shall be deemed to have been duly given when personally delivered or forty-eight (48) hours after mailed to each party by certified mail, return receipt requested, postage paid.

7.7 **Entire.** This AGREEMENT incorporates all the agreements, covenants, and understandings between the parties hereto concerning the subject matter hereof, and all such covenants, agreements, and understandings have been merged into this written AGREEMENT. No other prior agreement or understandings, verbal or otherwise, of the parties or their agents shall be valid or enforceable unless attached hereto and/or embodied herein.

7.8 **Amendment.** No changes to this AGREEMENT shall be made except upon written agreement of both parties.

7.9 **Headings.** The headings used herein are for convenience of reference only and shall not constitute a part hereof or affect the construction or interpretation hereof.

7.10 **Counterparts.** This AGREEMENT may be executed in any number of and by the different parties hereto on separate counterparts, each of which when so executed shall be deemed to be an original, and such counterparts shall together constitute but one and the same instrument.

7.11 **Terminology and Definitions.** All personal pronouns used herein, whether used in the masculine, feminine, or neutral, shall include all other genders; the singular shall include the plural and the plural shall include the singular.



IN WITNESS WHEREOF, the parties hereto have caused this AGREEMENT including the Exhibits attached hereto and incorporated herein by reference to be executed as of the date first above written.

A handwritten signature in blue ink, appearing to read "Terry Fain", written over a horizontal line.

Terry Fain  
President/General Manager  
Recovery


Date: September 12, 2022

A handwritten signature in blue ink, appearing to read "Tano E. Tijerina", written over a horizontal line.

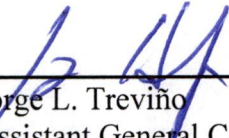
Honorable Tano E. Tijerina  
Webb County Judge

Date: \_\_\_\_\_

**ATTESTED:**

A circular seal for the Webb County Commissioners. The outer ring contains the text "COMMISSIONERS" at the top and "WEBB COUNTY, TEXAS" at the bottom. In the center is a five-pointed star.  
*Margie Ramirez Ibarra*  
\_\_\_\_\_  
Margie Ramirez-Ibarra  
Webb County Clerk

**APPROVED AS TO FORM:**

A handwritten signature in blue ink, appearing to read "Jorge L. Treviño".  
\_\_\_\_\_  
Jorge L. Treviño  
Assistant General Counsel  
Civil Legal Division

\*The General Counsel, Civil Legal Division's Office may only advise or approve contracts or legal documents on behalf of its clients. It may not advise or approve a contract or legal document on behalf of other parties. Our review of this document was conducted solely from the legal perspective of our client. Our approval of this document was offered solely for the benefit of our client. Other parties should not rely on this approval, and should seek review and approval of their own respective attorney(s).\*

*Passed and approved by the Webb County Commissioners Court  
On October 11, 2022; item 6.a.*



**Recovery  
Monitoring  
Solutions**

**EXHIBIT A**

Recovery also offers the Following Additional Services:

<b>FULL SERVICE ELECTRONIC MONITORING PROGRAM</b>	<b>DEPARTMENT FUNDED</b>	
	<b>DAILY RATE</b>	<b>SET-UP FEE</b>
<b>GPS Beacon</b>	Additional \$1.00	
<b>GPS Enhanced Monitoring</b>	Additional \$1.00	
<b>Radio Frequency (RF) Landline</b>	Dependent on Program Structure	Dependent on Program Structure
<b>Radio Frequency (RF) Cell</b>	Dependent on Program Structure	Dependent on Program Structure
<b>SCRAM CAM Ethernet</b>	Dependent on Program Structure	



**Recovery  
Monitoring  
Solutions**

<b>FULL SERVICE DRUG/ALCOHOL URINALYSIS PROGRAM</b>	<b>DEPARTMENT FUNDED &amp; PARTICIPANT FUNDED</b>
<ul style="list-style-type: none"> <li>• 10 Panel EZ Split Key Cup (COC/THC/OPI2000/AMP/MAMP/BZO/PCP/BAR/MDMA/MT D)</li> <li>• EZ Split Key Cup Confirmation (Participant has the option of signing an admission of use form in lieu of paying confirmation fee)</li> <li>• 6 Panel Oral Swab (COC/THC/AMPH/M-AMP/OPI/PCP)</li> <li>• Oral Swab Confirmation</li> <li>• ETG (Laboratory Tested Only)</li> <li>• ETG Confirmation</li> <li>• K2 DIP</li> <li>• K2 Confirmation</li> <li>• Bath Salts Lab 3 Compound Lab Only</li> </ul>	Dependent on Program Structure

<b>DRUG PATCH</b>		
<b>FULL SERVICE PROGRAM</b>	<b>DEPARTMENT FUNDED</b>	<b>PARTICIPANT FUNDED</b>
Drug Patch	\$80.00 (Per Application)	\$85.00 (Per Application)
Drug Patch Overlay With Application of New Patch	No Charge	No Charge
Drug Patch Overlay Replacement Overlay for Same Patch	\$2.00 Each	\$2.00 Each



## EXHIBIT B

### DEACTIVATION PROCEDURES FOR ALCOHOL MONITORING NON-COMPLIANCE

Recovery shall adhere to the following procedure to obtain authorization from the referring authority prior to deactivating a participant for program non-compliance.

A. Day 1 (Initial Day of Alert Receipt).

1. The participant will be called at all available phone numbers;
2. Instructions necessary to effect alert resolution will be provided;
3. If the individual fails to answer, instructions will be left for him/her to return the call (voicemail or message with person taking the call); and
4. The contact/attempted contact will be documented in the web-based monitoring system's Case Management Notes.

B. Day 2:

1. If the participant has failed to respond, he/she will be called again with a reminder that his/her failure to resolve the alert will result in notification of the supervising officer on Day 3;
2. If the individual fails to answer, instructions will be left for him/her to return the call (voicemail or message with person taking the call); and
3. The contact/attempted contact will be documented in the web-based monitoring system's Case Management Notes.

C. Day 3:

1. If the participant continues to ignore **Recovery's** instructions, a third call will be placed to relay the same instructions delivered on Day 2;
2. If the individual fails to answer, instructions will be left for him/her to return the call (voicemail or message with person taking the call);
3. A Non-Compliance Notice letter will be completed and e-mailed to the supervising officer;
4. The contact/attempted contact will be documented in the web-based monitoring system's Case Management Notes.

D. Day 6:

1. If the participant's non-compliance continues and authorization for deactivation has not been received from the referring authority, a second Non-Compliance Notice letter will be e-mailed to the supervising officer documenting all efforts employed to regain compliance;
2. This action will be documented in the web-based monitoring system's Case Management Notes.



E. Day 9:

1. If non-compliance persists, the procedures outlined in Day 3 will be repeated;
2. All actions will be documented in the web-based monitoring system's Case Management Notes.

F. Post Day 9:

1. If compliance is not regained and authorization for deactivation has not been obtained after delivery of the third Non-Compliance Notice letter, the participant's file will be transferred to the Weekly Notification List;
2. **Recovery** will continue to accept phone calls and visits from the participant but will suspend all attempts to initiate contact with him/her;
3. One (1) Non-Compliance Notice letter will be e-mailed to the supervising officer each week until the alert(s) is resolved or deactivation is endorsed by the referring authority.





## EXHIBIT C

### MONITORING EQUIPMENT RECOVERY

- I. Participant Financial Responsibility for Lost, Damaged or Stolen Monitoring Equipment
  - A. Participants are issued equipment in new or like new condition and are expected to return each piece in good working order with only a reasonable amount of wear and tear.
  - B. Participants who lose, steal, damage, or otherwise fail to return equipment will be instructed to reimburse Recovery in a lump sum payment or in accordance with the terms of the Equipment Restitution Schedule. This includes those articles lost – even as a result of the participant’s incarceration – or destroyed due to theft, fire, accidents, or any other event beyond the participant’s control.
  - C. Lost/Stolen Equipment: A significant, pre-determined portion of the value of the device and its key components (base station, multi-connect, beacon, etc.) shall be collected prior to issuance of another piece. Restitution for the remaining amount is due in three or fewer payments of equal sums. Before obtaining ancillary items such as straps, chargers, carrying cases, and power cords, participants shall render the entire cost in full.
  - D. Damaged Equipment: Participants shall pay a minimum \$75.00 non-refundable fee (or more if the manufacturer’s repair costs exceed that amount) prior to receipt of a replacement device for one that has been damaged. NOTE: This charge may be waived at the discretion of Recovery.
  - E. Malfunctioning Equipment: If returned within the first 30 days, participants will not be charged for replacement of malfunctioning equipment that bears no evidence of damage.
- II. Participant Legal Liability for Lost, Damaged or Stolen Monitoring Equipment
  - A. If any equipment remains unaccounted-for that was last known to be under the participant’s control, Recovery reserves the right to initiate the process of having criminal charges filed, in the county where installation took place, against participants who fail to reimburse the company for lost, damaged or unreturned equipment.
  - B. Attempt will be made to contact the participant at all phone numbers and e-mail addresses provided in the Program Participant Contract.
  - C. Thirty (30) days following issuance of an-unreturned equipment invoice to the participant, a First Letter will be mailed to his/hers last known address to warn that criminal charges may be filed if the equipment is not returned or reimbursement rendered within a reasonable period of time. The value of each missing piece shall be identified in the letter.
  - D. If the account is not reconciled within thirty (30) additional days, a certified Demand Letter will be delivered stating that criminal charges for Theft of Service will be filed if the equipment is not returned or reimbursement rendered within ten (10) days. The value of each missing piece shall be identified in the letter.
  - E. If the account is not reconciled within thirty (30) additional days or any returned equipment bears evidence of damage, the certified Demand Letter, Affidavit of Fact (Complaint), and a signed copy of the Program Participant Contract will be presented to the proper authorities and request the filing of criminal charges.



III. Participant Civil Liability for Lost, Damaged or Stolen Monitoring Equipment

- A. If returned equipment is not operating within the manufacturer's specifications or exhibits a degree of wear and tear that is deemed to be excessive, Recovery reserves the right to pursue civil action as follows:
1. Obtain written documentation of the manufacturer's estimated cost for equipment repair or replacement;
  2. Obtain photographs from the manufacturer, if applicable, showing the damaged parts;
  3. Invoice the participant for the actual cost of repair or replacement as determined by the manufacturer; and
  4. Request imposition of a special condition requiring restitution for equipment repair or replacement costs during the term of the participant's period of supervised probation.