

HIDALGO COUNTY HEALTH & HUMAN SERVICES DEPARTMENT
AND
PLANNED PARENTHOOD ASSOCIATION OF HIDALGO COUNTY, TEXAS, INC
SERVICE AGREEMENT

I. Linkage Organizations

The purpose of this agreement is to establish a referral system between the Hidalgo County Health & Human Services Department (HCHHSD) and Planned Parenthood Association of Hidalgo County, Texas, Inc. (PPAHC); and in compliance with the DSHS Policy & Procedure Manual for Titles V, X, & XX Family Planning Services. This system involves the referral of family planning clients from HCHHSD to PPAHC when their birth control method of choice is not provided at HCHHSD.

Currently, the birth control methods that are not provided at HCHHSD are; vaginal barriers (female condoms, diaphragms, sponges, cervical caps) vaginal hormonal contraceptive rings, contraceptive implants, intrauterine contraceptives, emergency contraceptive pills, and female and male sterilizations. As a result, the HCHHSD and PPAHC will agree to the following project activities.

II. Project Activities

Hidalgo County Health & Human Services Department will be responsible for the following tasks:

- The HCHHSD will screen clients for service eligibility with the department's established screening system.
- The HCHHSD will educate and counsel clients seeking family planning services on all birth control methods.
- The HCHHSD will determine if the client's method of choice is available within the department. If the client's method of choice is not available, the client will be referred to PPAHC.
- The HCHHSD will complete a referral form (TDH L-29); and if the client agrees to be referred to PPAHC, the referral form, lab reports & history will be faxed to PPAHC on the day of the referral.
- The HCHHSD will provide a resource list (which includes PPAHC clinics) to non-established (walk-in) clients that do not wish to enroll in the HCHHSD family planning services.

Planned Parenthood Association of Hidalgo County, Texas, Inc. agrees to provide the following tasks:

- PPAHC will accept referrals from the HCHHSD of clients seeking the methods listed above.

- PPAHC will screen clients for eligibility as per program requirements (Title V, X, XX, WHP, XIX). Clients will not be charged more than the assessed fee.
- PPAHC will provide the birth control method of choice to clients, following agency and program standards and guidelines.

III. Indemnification


To the extent applicable under the appropriate State Laws or constitutions, PPAHC and HCHHSD shall hold each other harmless from and shall indemnify each other for any and all claims, demands, and actions based upon or arising out of any services performed by either party or its employees or agents under this Agreement, and shall defend any and all claims or demands.

IV. Terms of Agreement

This service agreement will not expire unless either party wishes to make changes and/or terminate it. If termination should be the choice, then a month's notice is appreciated.

Signatures of Approval

HCHHSD Director's Signature



Patricio C. Gonzalez, MSSW-LMSW
CEO
Planned Parenthood Association
Of Hidalgo County, TX, Inc.

Date

05-13-11

Date