



**License Agreement Between
Missouri Department of Health and Human Senior Services and
Self-Management Resource Center
for Chronic Disease Self-Management Programs
Multiple Site License**

This Agreement between the SELF-MANAGEMENT RESOURCE CENTER ("SMRC"), having powers under the laws of the State of California, and the Missouri Department of Health and Human Senior Services ("Licensee"), a state agency, is effective on the 1st day of June, 2017 ("Effective Date").

Background:

SMRC has training programs for Leaders and Trainers for self-management of chronic conditions ("Programs") developed over 30 years of research. The Programs include methodologies, strategies, and structure for successful self-management that has been validated and shown efficacy. The "Chronic Disease Self-Management Programs," were invented in the laboratory of Dr. Kate Lorig at Stanford University.

SMRC would like to grant permission to Licensee to use the Programs under the terms and conditions below.

The Parties agree as follows:

1. SMRC grants (**Licensee**) permission to use (Please circle Programs you would like to license from the list below):

- (A) "Chronic Disease Self-Management Program;" and,
- (B) "Tomando Control de Su Salud, Spanish Chronic Disease Self Management Program (Spanish CDSMP);" and,
- (C) "Curso de Manejo Personal de la Artritis (Spanish Arthritis Self-Management Programs);" and,
- (D) "Positive Self-Management Program" a workshop for people with HIV; and,
- (E) "Pain Self-Management Program" developed in conjunction with Dr. Sandra LeForte; and,
- (F) "Programa de Manejo Personal de la Diabetes" a Spanish Diabetes Self-Management workshop; and,
- (G) "Small Group Diabetes Self-Management Workshop;" and,
- (H) "Small Group Arthritis Self-Management Workshop, "and,
- (I) "Cancer Thriving and Surviving small group"

2. **Licensee** agrees to use the Program(s) for its internally. Internal educational purposes are limited to:

- a. Workshops given by Licensee's employees and volunteers at the agencies referenced in Appendix A. Volunteer is defined as an individual who is not compensated by any organization for the time to give, administer or facilitate the Program(s). If additional agencies are added or deleted, please notify us as outlined at the bottom of Appendix A.
- b. Leader's training given by Licensee's employees and volunteers. If Licensee trains leaders outside of Licensee's organization, Licensee must contact the SMRC to obtain a Third Party Training License.
- c. For Master Training information, please go to <http://patienteducation.stanford.edu/licensing/>

Licensee may not use the Program(s) except as expressly described in this Agreement.

3. The term of this permission will be for three years from the Effective Date of the Agreement.
4. Licensee agrees to make written reports yearly on the anniversary of the Effective Date of this Agreement to SMRC detailing Licensee's dissemination of the Programs. Specifically Licensee will report:
 - a. The number of workshops given by Program(s), the dates of the workshops, the number of attendees for each workshop, and identify the leaders of each workshop.
 - b. If Licensee has trained any Leaders, Licensee will also submit the number by leader trainings they have held by Program(s), the dates of the trainings, the numbers of leaders trained in each workshop, how many of the trained leaders are active (teaching workshops) and the names of organizations represented in the training.
5. In consideration of the permission granted above, Licensee agrees to pay \$8,000 for up to 600 workshops and 15 trainings during the term of this Agreement. If Licensee exceeds this number of workshops or trainings, Licensee agrees to discuss with SMRC and may need to pay an additional royalty.
6. Licensee can only reproduce and distribute the Program for the sole purpose of administering the Program for internal educational purposes. All training materials and manuals that are produced must include the following notice on the inside cover: "Self-Management Resource Center 1980-2015. All rights reserved. All or portions of this material include copyrighted materials belonging to Self-Management Resource Center. To obtain a license please contact the Self-Management Resource Center." All Program materials must display the following subtitle "An Evidence-Based Self-Management Resource Center Program originally developed at Stanford University." Any other use of the Program(s) in whole or part is prohibited.

7. **Licensee** may not create derivatives of the Program(s) without the express written permission of SMRC. **Licensee** may not otherwise commercially exploit the Program(s) or any material derived from or based upon the Program(s).
8. **Licensee** agrees to contact SMRC for permission to reproduce or distribute the Program(s) or any material derived or adapted from the Program(s) for any use not specifically granted in this Agreement.
9. If **Licensee** wants to collaborate with another organization to offer training, Program materials, or any other use of the Program(s), **Licensee** should contact SMRC to ensure that the intended use is permitted and the organization has been licensed.
10. When working with any other organizations, **Licensee** will use these questions to help determine if the other organizations need a license:
 - a. Was the training for the leaders of this workshop supplied by the **Licensee**?
 - b. Is (are) the T-Trainer, Master Trainer or Leaders Employees or Volunteers of the **Licensee**?
 - c. Is **Licensee's** name and/or logo on all advertising and materials?
 - d. Are the names of all participants sent to **Licensee**?
 - e. Is **Licensee** responsible for quality control and liability for this workshop?

If **Licensee** has answered "No" to any of these questions, the other organization needs to obtain a license to this Program. To obtain a license contact Self-Management Resource Center, 711 Colorado Avenue, Palo Alto, CA www.selfmanagementresource.com.

11. The permission granted in this License Agreement extends only to the current version of the Program(s) available as of the Effective Date of this Agreement and not to any subsequent versions of the Program(s).
12. **Licensee** agrees that any prior License Agreements or Permissions to use, distribute, reproduce and perform any portions of the Program(s) or any previous versions of the Program(s) are hereby terminated and superseded in the entirety by this License Agreement. Both parties agree that no further rights or obligations survive from such superseded License Agreements or Permissions.
13. SMRC may terminate this Agreement immediately upon written notice to **Licensee** in the event **Licensee** or any **Licensee** personnel uses, discloses or reproduces the Program materials in any manner not permitted by this Agreement. SMRC may also terminate this Agreement if **Licensee** is in breach of any clause or fails to submit reports.
14. **Licensee** will use the Program(s) at its own risk, and SMRC does not represent that the Program(s) is accurate or up-to-date. SMRC will have no liability to **Licensee** or to any third party as a result of its use of the Program.

15. Licensee agrees that SMRC may publish the name of Licensee, state, and Appendix A agencies that Licensee has a license to Programs on the SMRC website and related materials.
16. The parties to this document agree that a copy of the original signature (including an electronic copy) may be used for any and all purposes for which the original signature may have been used. The parties further waive any right to challenge the admissibility or authenticity of this document in a court of law based solely on the absence of an original signature.
17. This Agreement is the entire agreement between the parties relating to the subject matter hereof and supersedes any prior representations, communications, undertakings, or discussions related to its subject matter. No terms in any purchase order or other forms shall apply, even if such purchase order or other forms are accepted by either party. This Agreement may be modified in writing signed by both parties.
18. The terms of this Agreement supersede the terms of any other agreement and represent the complete understanding of both parties.
19. **All Notices.** All notices under this Agreement are deemed fully given when written, addressed, and sent as follows:

All general notices to Licensee are mailed or emailed to:

Name: Jim Pruitt
Address: 920 Wildwood Drive
Jefferson City, MO 65109
Email: jim.pruitt@health.mo.gov

Procurement address for invoices:

Name: Jim Pruitt
Address: 920 Wildwood Drive
Jefferson City, MO 65109
Email: jim.pruitt@health.mo.gov

To expedite delivery of invoice, please provide e-mail address for SMRC to send a PDF.

E-mail address for Program Delivery:
jim.pruitt@health.mo.gov

All annual report invoices to Licensee (i.e., contact) are e-mailed to:

Name: Jim Pruitt
Email: jim.pruitt@health.mo.gov

All general notices to SMRC are e-mailed or mailed to:

SELF-MANAGEMENT RESOURCE CENTER
711 Colorado Avenue
Palo Alto, CA 94303
EMAIL ADDRESS

All payments to SMRC via check are mailed to:

SELF-MANAGEMENT RESOURCE CENTER
711 Colorado Avenue
Palo Alto, CA 9430

All payments to SMRC via wire transfer or ACH:

Account Number:
Routing Number:
Swift Number:

All progress reports to SMRC are e-mailed or mailed to:

SELF-MANAGEMENT RESOURCE CENTER
711 Colorado Avenue
Palo Alto, CA 9430
EMAIL:

Appendix A modifications are e-mailed or mailed to:

SELF-MANAGEMENT RESOURCE CENTER
711 Colorado Avenue
Palo Alto, CA 9430
EMAIL: licensing@selfmanagementresource.com

SIGNED:

Licensee



By:

Name: Bret Fischer

Self-Management Resource Center



By:

Name: Imelda Oropeza
Director, Licensing

Title: Director Division of Administration

5/25/17

Date:

Title:

Date:

Appendix A

Current Agencies to Operate Under Missouri Department of Health and Senior Services Statewide License

Central Missouri Regional Arthritis Center
University of Missouri-School of Health Professions
Contact: **Beth Richards**
Phone: (573) 882-8097
E-Mail: richardsjo@missouri.edu
Website: www.moarthritis.org

KC Area Regional Arthritis Center
Saint Luke's Hospital
Contact: **Orvie Prewitt**
Phone: (816) 932-2351
Email: oprewitt@saint-lukes.org
Website: www.moarthritis.org

Eastern Missouri Regional Arthritis Center
Washington University School of Medicine
Program of Occupational Therapy
Contact: **Duana Russeil-Thomas**
Phone: (314) 286-1625
E-Mail: duanacrussell@wustl.edu
Website: www.moarthritis.org

Northeast Missouri Regional Arthritis Center
A.T. Still University
Contact: **DeEtta Jones**
Phone: (660) 626-2049 or
1-866-626-2878 ext. 2049
E-Mail: dajones01@atsu.edu
Website: www.moarthritis.org

Southwest Missouri Regional Arthritis Center
Mercy Clinic – SCG
Arthritis Center
Contact: **Heather Scott**
Phone: (417) 888-6787
E-Mail: Heather.Scott2@Mercy.Net
Website: www.moarthritis.org

Southeast Missouri Regional Arthritis Center
Saint Francis Medical Center
Contact: **Olawunmi Obisesan**
Phone: (573) 331-5880 or 888-216-3293
E-Mail: oobisesan@sfmc.net
Website: www.moarthritis.org

Northwest Missouri Regional Arthritis Center
(Arthritis Community Services)
Mosaic Life Care – Plaza I
Contact: **Debbie Braby**
Phone: (816) 271-7057 or 1-800-443-8858
E-Mail: Debbie.braby@mymlc.com
Website: www.moarthritis.org

Name: AAA District III - Care Connections Area Agency on
Level: Statewide
Addresses: Not Available
Contact Name: Whitsitt, Vickie
Contact Address: Not Available
Contact Phone: (660)-747-3107
Contact Email: vwhitsitt@goaging.com

Name: AAA NW Area Agency on Aging
Level: Statewide
Addresses: Not Available
Contact Name: Becky, Flaherty
Contact Address: Not Available
Contact Phone: (660)-726-3800
Contact Email: nwmoaaa@nwmoaaa.org

Name: AAA St. Louis Area Agency on Aging
Level: Statewide
Addresses: Not Available
Contact Name: Sykora, David
Contact Address: Not Available
Contact Phone: (314)-612-5900
Contact Email: sykorad@stlouiscity.com

Name: AAA SW Area Agency on Aging
Level: Statewide

Addresses: 1735 S. Fort. Ave. Springfield Christian Southwest RAC

Contact Name: Star
Contact Address: Not Available
Contact Phone: (417)-862-0762
Contact Email: dkk@swoa.com

Name: Access Family Care
Level: Statewide
Addresses: Not Available
Contact Name: Heather, Scott
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Not Available

Name: Callaway County Health Department
Level: Statewide
Addresses: Not Available
Contact Name: Tammy, Wise
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Not Available

Name: Capital Regional Medical Center
Level: Statewide
Addresses: Not Available
Contact Name: Amber, Phelps
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Not Available

Name: Cerner Corp
Level: Statewide
Addresses: Not Available
Contact Name: Jeannine, Midgett
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: jeannine.midgett@cerner.com

Name: Cox Health
Level: Statewide
Addresses: Not Available
Contact Name: Glenda, Miller
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Not Available

Name: Department of Health and Senior Services
Level: Statewide
Addresses: Not Available
Contact Name: Amber, Phelps
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Not Available

Name: Fairway Management
Level: Statewide
Addresses: Not Available
Contact Name: Debbie, Braby
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Not Available

Name: Housing Authority of Kansas City
Level: Statewide
Addresses: Not Available
Contact Name: Orvie, Prewitt
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Not Available

Name: Independent Living Center - Southeast Missouri
Level: Statewide
Addresses: Not Available
Contact Name: Suzann, McKnight
Contact Address: Not Available

Contact Phone: Not Available
Contact Email: Not Available

Name: Jackson County Health Department
Level: Statewide
Addresses: Not Available
Contact Name: Grodie, Amanda
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: amanda.grodie@tmcmed.org

Name: John J Pershing VA Medical Center
Level: Statewide
Addresses: Not Available
Contact Name: Olawunmi, Obisesan
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Not Available

Name: Jordan Valley
Level: Statewide
Addresses: Not Available
Contact Name: Heather, Scott
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Not Available

Name: Kansas City VA Medical Center
Level: Statewide
Addresses: Not Available
Contact Name: Jackson, Kim
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Kimberly.Jackson@va.gov

Name: Mark Twain Behavioral Health
Level: Statewide
Addresses: Not Available
Contact Name: DeEtta, Jones

Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Not Available

Name: Mississippi County Health Department
Level: Statewide
Addresses: Not Available
Contact Name: Rachelle, Johnson
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: johnsr1@lpha.mopublic.org

Name: Missouri Highlands
Level: Statewide
Addresses: Not Available
Contact Name: Courtney, Sanders
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Not Available

Name: Nevada Regional Medical Center
Level: Statewide
Addresses: Not Available
Contact Name: Heather, Scott
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Not Available

Name: Ozarks Medical Center
Level: Statewide
Addresses: Not Available
Contact Name: Heather, Scott
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Not Available

Name: Phelps County Regional Medical Center
Level: Statewide
Addresses: Not Available
Contact Name: Amber, Phelps

Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Not Available

Name: Preferred Family Healthcare
Level: Statewide
Addresses: Not Available
Contact Name: Kathy, Rogers
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Not Available

Name: Samaritan Regional Health Clinic
Level: Statewide
Addresses: Not Available
Contact Name: Gwen, Maloney
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Not Available

Name: Samuel U. Rodgers Health Center
Level: Statewide
Addresses: Not Available
Contact Name: Tretbar, Perry
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: atretbar@rodgershealth.org

Name: St. Louis County LPHA
Level: Statewide
Addresses: Not Available
Contact Name: Linda, Hiette
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Not Available

Name: Stone County Health Department
Level: Statewide
Addresses: Not Available
Contact Name: Heather, Scott

Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Not Available

Name: Taney County Health Department
Level: Statewide
Addresses: Not Available
Contact Name: Heather, Scott
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Not Available

Name: Truman Medical Center
Level: Statewide
Addresses: Not Available
Contact Name: Garcia, Raquel
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: raquel.garcia@tmcmcd.org

Name: Wesley United Methodist Church
Level: Statewide
Addresses: Not Available
Contact Name: Margaret, Lindsey
Contact Address: Not Available
Contact Phone: Not Available
Contact Email: Not Available

* The agencies listed above will be listed on the Self-Management Resource Center, LLC that indicates which organizations are licensed to use the Chronic Disease Self-Management Program. In order to keep the list current, please notify us of any additions or deletions at licensing@selfmanagementresource.com. Please indicate in your e-mail that you hold a statewide/group license and that you are updating Appendix A.