For-Profit CIE Inclusion Policy:

1. For-profit survey to be completed
2. If the for-profit consists of practitioners, licensing is required
3. If fees to the client exists, they must to be public and published on the CIE website for clients and providers to reference
4. For-profit agencies must have a description of their services posted to the CIE website for clients and providers’ reference to ensure that services received are consistent with service description
5. Violation of CIE policies may warrant removal from the CIE Partner Network and based on the severity of the violation, notification report to BBB, the CIE Partner Network, and appropriate licensing body
6. Electronic vote will be sent to the network for any for-profit requesting to join the network, if there are concerns from the network, the for-profit applicant will present at the following Partner Network meeting
7. If for-profit applicant presents at the Partner Network meeting, there must to be quorum for approval vote
8. The requested role-based user access can by reviewed by the Network and will be listed to the CIE website
9. Annual review

CIE For-Profit Inclusion Survey: [https://ciesandiego.org/cie-for-profit-participation-survey/](https://ciesandiego.org/cie-for-profit-participation-survey/)

- Business Name
- Why do you want to become a CIE Network Partner?
- Are you able to attend the next CIE Partner Network Meeting and answer potential questions from the CIE Partner Network about your services?
- Do you provide specialized services to specific populations?
- What area(s) of need do your services address?
- Does your business offer a sliding scale if there are fees to the client/patient?
- How does your business address grievances from clients/patients?
- What is the accrediting or licensing entity for your business’ services?
- Who does your agency contract with (e.g. county, cities, other)?
- Are any of your direct services provided by subcontracted providers?
- Please provide two community-based organizations that can serve as a reference on your behalf
- Please provide a brief description of your business relationship or partnership with this agency