

**FIRST AMENDMENT TO THE AGREEMENT FOR
SERVICES OF
INDEPENDENT CONTRACTOR**

BETWEEN

COUNTY OF SANTA BARBARA
DEPARTMENT OF BEHAVIORIAL WELLNESS

AND

TRANSITIONS-MENTAL HEALTH ASSOCIATION

FOR

MENTAL HEALTH SERVICES

**FIRST AMENDMENT TO THE AGREEMENT
FOR SERVICES OF INDEPENDENT CONTRACTOR**

THIS FIRST AMENDMENT to the Agreement for Services of Independent Contractor, **BC No. 24-020**, is made by and between the County of Santa Barbara (hereafter, County or Department), a political subdivision of the State of California, and **Transitions - Mental Health Association** (hereafter, Contractor) with an address at P.O. Box 15408, San Luis Obispo, California 93406 for the continued provision of services specified herein (hereafter, First Amendment).

WHEREAS, Contractor represents that it is specially trained, skilled, experienced, and competent to perform the special services required by County, and County desires to retain the services of Contractor pursuant to the terms, covenants, and conditions herein set forth;

WHEREAS, County and Contractor (collectively, the parties) entered into an Agreement for Services of Independent Contractor, BC No. 24-020, for the provision of mental health and other supportive services to adults and Transition Age Youth for a maximum contract amount not to exceed \$5,429,170, inclusive of \$2,714,585 for FY 24-25 and \$2,714,585 for FY 25-26, for the period of July 1, 2024, through June 30, 2026(Agreement); and

WHEREAS, the parties wish to add Medi-Cal Patient Revenue funding to the Wellness Centers and Family Advocate programs, and adjust staffing slightly to better align with need, including the addition of Peer Specialists as appropriate; adjust staffing at the North County Full Service Partnership to better align with need, including the addition of clinicians and case workers with lived experience, including Peer Specialists as appropriate; update staffing requirements for Vocational Rehabilitation to align with California Department of Rehabilitation requirements; reduce staffing of the Growing Grounds program to better align with need; and add \$572,474 in behavioral health funding for FY 24-26 for a revised, total maximum contract amount not to exceed \$6,001,644, inclusive of \$3,000,822 in FY 24-25 and \$3,000,822 in FY 25-26, with no change to the contract term.

NOW, THEREFORE, in consideration of the mutual covenants and conditions contained herein, the parties agree as follows:

I. Delete Section 3. SERVICES of Exhibit A-3 (MHS WELLNESS CENTERS AND FAMILY ADVOCATE) and replace it with the following:

3. SERVICES.

Contractor shall provide a Program that is client-designed and client-led. Program staff shall assure a comfortable, supportive, culturally competent approach through which Participants will receive peer support and participate in learning opportunities, social activities, and meaningful interactions with others. In addition, Contractor shall collaborate with Behavioral Wellness and selected Participants in on-going development of the Program. Contractor shall provide the following mental health services, billed under the Healthcare Common Procedure Coding System (HCPCS) Codes listed in Exhibit B-3.;

- A.** Peer Support Services. Contractor shall provide services to validate clients' experiences and to guide and encourage clients to take responsibility for and to actively participate in their own recovery. Contractor shall also provide services to help clients identify, understand, and combat stigma and discrimination against mental illness and shall develop strategies to reduce clients' self-imposed stigma, through

 - 1.** Peer counseling and support; and
 - 2.** Introduction and referral of clients to consumer self-help programs and advocacy organizations that promote recovery;
- B.** Rehabilitation. A service activity which includes, but is not limited to assistance in improving, maintaining, or restoring a beneficiary's or group of beneficiaries' functional skills, daily living skills, social and leisure skills, grooming and personal hygiene skills, meal preparation skills, and support resources; and/or medication education, as defined in Title 9 CCR Section 1810.243.
- C.** Contractor shall provide mentoring, management, and leadership opportunities for peer recovery staff and other interested Participants that will enhance Program oversight. Program staff shall assist Participants in developing proposals for Program activities and reach out to clients involved in the planning process in a respectful, receptive environment;
- D.** Contractor shall provide activities designed to promote mental health recovery, social interaction, and independence. These include programs in interpersonal relationships, effective communication and conflict resolution, accessing community resources (therapeutic, health, vocational, educational), and strengthening bonds with family, friends, and significant others. Wellness Recovery Action Plan (WRAP) groups (or similar format) will be run on a regular basis by peer recovery staff. Contractor shall offer oversight for Participant-prepared presentations;
- E.** Program will function as a client-operated program with peer recovery staff and other Program staff providing positive and inspirational role models for others;
- F.** There shall be an emphasis on bilingual presentations using available bilingual staff or volunteers;
- G.** Contractor shall refer families to Family Advocates for services and support groups. The Program will have a resource list available to family members;
- H.** Contractor shall encourage Participants to share in the upkeep of the physical location, which serves as a "hub" for the overall Program, via the current system as designed by the members of the Wellness Centers;
- I.** Contractor shall work with the local community to obtain support for activities in the form of in-kind donations and financial support; and
- J.** Contractor shall assist in creating an informational resource hub for community resources and activities and will provide a resource list, in English and Spanish, that is available to Participants.

II. Delete Section 6. STAFFING of Exhibit A-3 (MHS WELLNESS CENTERS AND FAMILY ADVOCATE) and replace it with the following:

3. STAFFING.

Contractor shall adhere to the Program staffing requirements outlined below unless otherwise approved by the Director of the Department of Behavioral Wellness or designee in writing. Any changes to these requirements do not require a formal amendment to this Agreement and shall not alter the Maximum Contract Amount.

A. For FY 24-26, Contractor shall provide staff for the operation of the Program consisting of the following:

1. Helping Hands of Lompoc (aka Lompoc Wellness Center). Contractor shall staff Helping Hands of Lompoc with 4.87 full-time equivalent (FTE) positions for the operation of the Program consisting of the following staff:

- i. 0.07 FTE Clinical Director to provide clinical and administrative oversight of teams, services, outcomes, and reports.
- ii. 0.50 FTE Program Manager to provide administrative oversight and management of the Wellness Center program and operations.
- iii. 1.00 FTE Program Supervisor responsible for day to day operations, providing direct services, and developing programming.
- iv. 0.75 FTE Assistant Center Supervisor to provide direct services, oversee members and activities, and develop calendars.
- v. 1.00 FTE Family Support Specialist to provide individual/group family support, parenting classes, and mental health/justice system navigation.
- vi. 1.50 FTE Support Host with duties to include, but not limited to, member oversight, group facilitation, meal preparation/lunches, and providing transportation to community members to access Wellness Center services.
- vii. 0.05 FTE Executive Program Coordinator

Program Manager, Program Supervisor, Assistant Center Supervisor, Family Support Specialist, or Support Host may also be a Certified Peer Specialist.

2. Santa Maria Wellness Center. Contractor shall staff the Santa Maria Wellness Center with 4.74 FTE positions for the operation of the Program consisting of the following staff:

- i. 0.06 FTE Clinical Director to provide clinical and administrative oversight of teams, services, outcomes, and reports.
- ii. 0.50 FTE Program Manager to provide administrative oversight and management of the Wellness Center program and operations.
- iii. 1.00 FTE Program Supervisor responsible for day to day operations, providing direct services, and developing programming.
- iv. 0.75 FTE Assistant Center Supervisor to provide direct services, oversee members and activities, and develop calendars.

- v. 1.00 FTE Family Support Specialist to provide individual/group family support, parenting classes, and mental health/justice system navigation.
- vi. 1.38 FTE Support Host with duties to include, but not limited to, member oversight, group facilitation, meal preparation/lunches, and providing transportation to community members to access Wellness Center services.
- vii. 0.05 FTE Program Coordinator.

Program Manager, Program Supervisor, Assistant Center Supervisor, Family Support Specialist, or Support Host may also be a Certified Peer Specialist.

B. Program staff shall be licensed mental health professionals or waived/registered professionals as defined in Title 9 CCR Sections 1810.223 and 1810.254, respectively; licensed professional clinical counselors as defined in Business and Professions Code section 4999.12; or graduate student interns/trainees or interns/trainees, Peer Specialists, Mental Health Rehabilitation Specialists (MHRS), Qualified Mental Health Workers (QMHW), or Mental Health Workers (MHW) as specified below.

1. Licensed mental health professional under 9 CCR Section 1810.223 means:
 - i. Licensed physicians;
 - ii. Licensed psychologists;
 - iii. Licensed clinical social workers;
 - iv. Licensed marriage and family therapists;
 - v. Licensed psychiatric technicians;
 - vi. Registered Nurses; and
 - vii. Licensed Vocational Nurses.
2. Waivered/Registered Professional under 9 CCR section 1810.254 means an individual who:
 - i. Has a waiver of psychologist licensure issued by DHCS; or
 - ii. Has registered with the corresponding state licensing authority for psychologists, marriage and family therapists, or clinical social workers to obtain supervised clinical hours for psychologist, marriage and family therapist, or clinical social worker licensure.
3. Licensed Professional Clinical Counselor (LPCC) under Business and Professions Code section 4999.12 means a person licensed under chapter 16 of the Business and Professions Code to practice professional clinical counseling, as defined in Business and Professions Code section 4999.20.
4. Graduate Student Interns/Trainees and Interns/Trainees. Contractor may utilize interns or trainees as staff to provide services but only as is consistent with any and all applicable laws, regulations, and policies, as may be amended, and under direct supervision as specified in *Behavioral Wellness Policy and Procedure #8.400, Clinical Supervision of Pre-Licensed Providers*.

5. Peer Specialist. Peer Specialist is an individual who is or has been a recipient of mental health services for serious mental illness or a close family member of a person with a serious mental illness diagnosis. Peer Specialists provide essential expertise and consultation to the entire team to promote a culture in which each client's subjective experiences, points of view, and preferences are recognized, respected and integrated into all treatment, rehabilitation, and support services. Peer Specialists participate in all program planning processes and provide direct services in the community that promote client self-determination and decision-making. Peer Specialists may be individuals who do not meet the qualifications of QMHWs and may be classified as Mental Health Workers (MHWs) as defined in *Behavioral Wellness Policy and Procedure #4.015, Staff Credentialing and Re-Credentialing*, as may be amended.
 6. Mental Health Rehabilitation Specialist (MHRS) is defined in *Behavioral Wellness Policy and Procedure #4.015, Staff Credentialing and Re-Credentialing*, as may be amended.
 7. Qualified Mental Health Worker (QMHW) is defined in *Behavioral Wellness Policy and Procedure #4.015, Staff Credentialing and Re-Credentialing*, as may be amended.
 8. Mental Health Worker (MHW) is defined in *Behavioral Wellness Policy and Procedure #4.015, Staff Credentialing and Re-Credentialing*, as may be amended.
- C. During situations when the Support Host Program staff are absent, depending on availability, Contractor may choose to cover some of the Program hours with volunteers or relief workers paid via incentive cards or stipends in accordance with applicable law and all staffing requirements in this Agreement.
- D. All Program staff shall have experience in leading client activities and shall demonstrate responsiveness to Participant issues and concerns.

III. Delete Paragraph C. County Property of Section 7. EQUIPMENT AND SUPPLIES of Exhibit A-3 (MHS WELLNESS CENTERS AND FAMILY ADVOCATE) and replace it with the following:

C. County Property. County purchased ten (10) computers (including monitor, keyboard, mouse, and CPU) for the use in the Computer Lab in 2018. The computers shall be returned to County upon termination of this Agreement.

IV. Add Section 9 to Exhibit A-3 (MHS WELLNESS CENTERS AND FAMILY ADVOCATE) as follows:

9. DOCUMENTATION

A. Contractor shall enter individual client notes into Behavioral Wellness' Electronic Health Record (EHR) within 72 hours of each client contact.

V. Delete header of Exhibit A-5, STATEMENT OF WORK: MHS North County Full Service Partnership (FSP) and replace it with the following:

**EXHIBIT A-5
STATEMENT OF WORK: MHS
North Community Full Service Partnership (FSP)**

VI. Delete Section 1. NORTH COUNTY FULL SERVICE PARTHERSHIP (FSP) PROGRAM SUMMARY of Exhibit A-5 (MHS North County Full Service Partnership (FSP)) and replace it with the following:

1. NORTH COMMUNITY FULL SERVICE PARTNERSHIP (FSP) PROGRAM SUMMARY.

The Full Service Partnership (FSP) Program is comprised of comprehensive services for individuals with severe mental illness who are unhoused or at risk of becoming unhoused as well as who demonstrate the need for the most intensive level of nonresidential community service. These programs offer tailored support, empowerment, and tools for self-sufficiency, focusing on wellness and recovery. The Program is designed for adults, youth, and their families whose symptoms of mental illness cause, or create high risk for, the most substantial levels of disability and functional impairment. This program is a Level 1 FSP, with a 15:1 case ratio for staff, as opposed to a Level 2 FSP which would have a 10:1 case ratio. The Program will be headquartered at 1265 Furukawa Way, Santa Maria, CA 93458.

VII. Delete Section 6. STAFFING REQUIREMENTS of Exhibit A-5 (MHS North County Full Service Partnership (FSP)) and replace it with the following:

6. STAFFING REQUIREMENTS.

- A.** Contractor shall adhere to the Program staffing requirements outlined below, unless otherwise agreed to by the Director of the Department of Behavioral Wellness or designee in writing. Such amendments do not alter the Maximum Contract Amount and do not require an amendment to this Agreement.
 - 1.** The Program shall include qualified bilingual and bicultural clinicians and staff able to meet the diverse needs represented in the local community. Contractor shall work towards filling 40% of direct service positions with bilingual staff in County's second threshold language, Spanish. As needed, the Program shall have access to qualified translators and translator services, experienced in behavioral healthcare, appropriate to the needs of the clients served. Contractor shall maintain a list of qualified translators to be used in the event the Program must seek translation services outside of the FSP Team.
 - 2.** In hiring all positions for the FSP/AOT Team, Contractor shall give strong consideration to qualified individuals who are or have been recipients of mental health services.

- B.** Contractor shall employ 12.78 FTE, as described below (“Program staff”). The Program shall include Contractor staff, who shall assume responsibility for psychiatric treatment functions (functions performed by a psychiatrist, nurse, or psychiatric technician) as described below.
- 1.** The FSP Team shall consist of roles as follows:
 - i.** 0.35 FTE Clinical Director to provide clinical and administrative oversight of teams, services, outcomes and reporting.
 - ii.** 1.00 FTE Team Leader is the administrative supervisor of the Program and shall have at least two years of direct experience treating adults with serious mental illness, including at least one year of program management or supervisory experience in a mental health setting.
 - iii.** 1.00 FTE Master’s level Lead Clinician Mental Health Professional to provide clinical leadership during Client Service Planning meetings, conduct psychosocial assessments, assist with the provision of side-by-side supervision to staff, provide supportive counseling to individuals and families and work interchangeably with the Registered Nurses. The Lead Clinician will provide support and back-up to the Supportive Community Team Leader in his or her absence.
 - iv.** 1.00 FTE Clinician to provide clinical assessments and ANSAs, in addition to individual, family, and group therapy. Support and educate the team on clinical matters.
 - v.** 0.50 FTE Registered Nurses coordinate and implement medical treatment and services to clients in conjunction with medical provider. Oversee Psychiatric Technicians/Licensed Vocational Nurses within the program.
 - vi.** 2.00 FTE Psychiatric Technician or Licensed Vocational Nurse supports registered nurse, implements medical policies and procedures, conducts medical monitoring of clients.
 - vii.** 5.00 FTE Case Managers with direct experience working with adults with mental illness or related training or life experiences. The following are required to be included as part of the five (5) Case Managers
 - a.** 2.00 FTE Case Managers who shall be Qualified Mental Health Workers (QMHWs) and shall have primary responsibility for assuring that supported employment services are integrated into the Program’s service delivery. These Case Managers shall have experience providing individualized job development and supported employment on behalf of persons with physical or mental disabilities or a related field.
 - b.** 1.00 FTE Case Manager who shall be a Qualified Mental Health Worker (QMHW) or a Mental Health Worker (MHW) and shall have responsibility for strengthening the Program’s capacity to respond to the needs of clients with addictions disorders. This Case Manager shall help to support the Program’s implementation of Integrated Treatment

of Co-Occurring Disorders. This Rehabilitation Specialist shall have supervisory experience in providing substance abuse treatment interventions to persons with co-occurring psychiatric and addictions disorders.

- c. 2.00 FTE Case Managers who shall be Mental Health Workers (MHWs) or Peer Specialists comprised of two full-time or one full-time and several part-time staff or several part-time staff who are or have been recipients of mental health services for serious mental illness. These Case Managers shall provide essential expertise and consultation to the entire team to promote a culture in which each client's subjective experiences, points of view and preferences are recognized, respected and integrated into all treatment, rehabilitation and support services. These Case Managers shall participate in all program planning processes and provide direct services in the community that promote client self-determination and decision-making.
 - viii. 0.58 FTE Quality Assurance Specialists (Coordinator and Manager) who are responsible for reviewing and training staff on County and Contractor policies and procedures, and who will conduct periodic chart reviews, including Medi-Cal documentation, assessments, and client treatment plans and attend the monthly County QIC meetings.
 - ix. 1.00 FTE Office Coordinator who is responsible for coordinating, organizing, and monitoring all non-clinical operations of the Program, and providing receptionist activities including triaging calls and coordinating communication between the Supportive Community Team and clients.
 - x. 0.35 FTE Program Coordinator
- C. Program staff shall be licensed mental health professionals or waived/registered professionals as defined in Title 9 CCR Sections 1810.223 and 1810.254, respectively; licensed professional clinical counselors as defined in Business and Professions Code section 4999.12; or graduate student interns/trainees or interns/trainees, Mental Health Rehabilitation Specialists (MHRS), Qualified Mental Health Workers (QMHW), or Mental Health Workers (MHW) as specified below.
- 1. Licensed mental health professional under 9 CCR Section 1810.223 means:
 - i. Licensed physicians;
 - ii. Licensed psychologists;
 - iii. Licensed clinical social workers;
 - iv. Licensed marriage and family therapists;
 - v. Licensed psychiatric technicians;
 - vi. Registered Nurses; and
 - vii. Licensed Vocational Nurses.

2. Waivered/Registered Professional under 9 CCR section 1810.254 means an individual who:
 - i. Has a waiver of psychologist licensure issued by DHCS; or
 - ii. Has registered with the corresponding state licensing authority for psychologists, marriage and family therapists, or clinical social workers to obtain supervised clinical hours for psychologist, marriage and family therapist, or clinical social worker licensure.
3. Licensed Professional Clinical Counselor (LPCC) under Business and Professions Code section 4999.12 means a person licensed under chapter 16 of the Business and Professions Code to practice professional clinical counseling, as defined in Business and Professions Code section 4999.20.
4. Graduate Student Interns/Trainees and Interns/Trainees. Contractor may utilize interns or trainees as staff to provide services but only as is consistent with any and all applicable laws, regulations, and policies, as may be amended, and under direct supervision as specified in *Behavioral Wellness Policy and Procedure #8.400, Clinical Supervision of Pre-Licensed Providers*.
5. Peer Specialists may be individuals who do not meet the qualifications of QMHW and may be classified as Mental Health Workers (MHW). MHWs shall have at minimum one year of experience working with individuals with serious mental illness and experience working in a community setting. MHWs may only provide services under this Agreement with prior approval of the Behavioral Wellness QCM Division and Contractor shall ensure the Peer Specialist(s) comply with all standards/requirements established by the Behavioral Wellness QCM Division.
6. Mental Health Rehabilitation Specialist (MHRS) is defined in *Behavioral Wellness Policy and Procedure #4.015, Staff Credentialing and Re-Credentialing*, as may be amended.
7. Qualified Mental Health Worker (QMHW) is defined in *Behavioral Wellness Policy and Procedure #4.015, Staff Credentialing and Re-Credentialing*, as may be amended.
8. Mental Health Worker (MHW) is defined in *Behavioral Wellness Policy and Procedure #4.015, Staff Credentialing and Re-Credentialing*, as may be amended.

VIII. Delete Section 3. SERVICES of Exhibit A-6 (MHS VOCATIONAL REHABILITATION) and replace it with the following:

1. SERVICES.

Contractor shall provide the following services, primarily funded through the California Department of Rehabilitation:

- A. Job Supports. Support activities that are client employment-related and needed to promote job adjustment, retention, and advancement. These services shall be

based on the individual needs of the client with a focus on long-term retention of the client in the job after the initial training period;

- B. A Vocational Specialist shall be available to conduct routine follow-up with both the client and the employer if client has disclosed to the employer that he or she is working with a Vocational Specialist;
- C. Schedule an appointment with each client within two weeks of initial contact or referral;
- D. Provide support and education to each client's employer and other personnel regarding mental illness and working with people who have a mental illness; and
- E. Operate a telephone answering service at the Contractor's primary place of business Monday through Friday, 8:00 A.M. to 5:00 P.M.
- F. Services and supports may be provided on- or off- site depending upon the needs of the client.

IX. Delete Section 4. STAFFING of Exhibit A-6 (MHS VOCATIONAL REHABILITATION) and replace it with the following:

4. STAFFING.

Contractor shall adhere to program staffing requirements as required by the Department of Rehabilitation.

X. Delete Section 8. STAFFING REQUIREMENTS of Exhibit A-8 (MHS GROWING GROUNDS) and replace it with the following:

8. STAFFING REQUIREMENTS.

Contractor shall adhere to the Program staffing requirements outlined below unless otherwise approved by the Director of the Department of Behavioral Wellness or designee in writing. Any changes to these requirements do not require a formal amendment to this Agreement and shall not alter the Maximum Contract Amount.

- A. Program staff shall be Mental Health Workers (MHW) as defined in *Behavioral Wellness Policy and Procedure #4.01 5, Staff Credentialing and Re-Credentialing*, as may be amended.
 - 1. 0.65 Full Time Equivalent (FTE) Program Manager shall provide direct supervision of the program and staff to ensure effective and therapeutic operations. The Program Manager shall also be responsible for leading mindfulness exercises, collaborating with client employees to create recovery goals, and promotion of events and informational materials on mental health, and providing linkages to County mental health services.
 - 2. 0.5 FTE Participant Services Support Staff shall assist with staffing needs and onboarding new farm workers;

3. 1.00 FTE Farm Production Supervisor shall be responsible for supporting the Assistant Manager with farm production, grounds maintenance, irrigation management, and supporting client employees in the performance of their tasks and duties;
4. 0.13 FTE Division Director shall provide direct oversight of the Program Manager, act as liaison with County staff, and provide administrative oversight and support to the program and staff;
5. 1.00 FTE Assistant Manager shall oversee the farm production, provide support and training to client employees, provide direct oversight and supervision of the Farm Production Supervisor, and provide administrative support to the Program Manager; and
6. 3.30 FTE client employees (Farmworkers) are involved in all phases of the farm, including planting, maintaining plants, selecting plants, loading the delivery truck, assisting with deliveries, and quality control. Clients also assist in office support such as bookkeeping, processing invoices, customer service, and answering phones.

XI. Delete Section II. MAXIMUM CONTRACT AMOUNT of Exhibit B (GENERAL FINANCIAL PROVISIONS: MHS) and replace it with the following:

II. MAXIMUM CONTRACT AMOUNT.

The Maximum Contract Amount of this Agreement shall not exceed **\$6,001,644** inclusive of \$3,000,822 for Fiscal Year FY 24-25, and \$3,000,822 for Fiscal Year FY 25-26, in Mental Health funding, and shall consist of County, State, and/or Federal funds as shown in Exhibit B-1-MHS and subject to the provisions in Section I (Payment for Services). Notwithstanding any other provision of this Agreement, in no event shall County pay Contractor more than this Maximum Contract Amount for Contractor's performance hereunder without a properly executed amendment.

XII. Delete Exhibit B-1-MHS SCHEDULE OF RATES AND CONTRACT MAXIMUM in its entirety and replace it with the following:

**EXHIBIT B-1- MHS
SCHEDULE OF RATES AND CONTRACT MAXIMUM
(Applicable to program(s) described in Exhibit(s) A-2-A-8)**

THIS SECTION INTENTIONALLY LEFT BLANK
SCHEDULE OF RATES AND CONTRACT MAXIMUM PAGES FOLLOW

**EXHIBIT B-1 MH
DEPARTMENT OF BEHAVIORAL WELLNESS
SCHEDULE OF RATES AND CONTRACT MAXIMUM**

CONTRACTOR NAME: Transitions Mental Health Association FISCAL YEAR: 2024-2025

Contracted Service	Service Type	Provider Group	Practitioner Type (6)	Full Time Equivalent Staffing	Hourly Rate (Avg. Direct Bill rate)	Medi-Cal Target Hours	Medi-Cal Contract Allocation
Medi-Cal Billable Services	Outpatient Services Fee-For-Service	Non-Prescriber	Registered Nurse	0.25	\$399.18	198	\$ 79,038
			Licensed Vocational Nurse	0.00	\$209.70	0	\$ -
			Licensed Psychiatric Technician	2.00	\$179.77	1,588	\$ 285,473
		Behavioral Health Provider	Psychologist/ Pre-licensed Psychologist	0.00	\$395.23	0	\$ -
			LPHA / Assoc. LPHA	1.25	\$255.76	992	\$ 253,719
			Specialist	1.16	\$202.06	400	\$ 80,823
			Rehabilitation Specialists & Other Qualified Providers	5.00	\$192.44	3,969	\$ 763,785
			9.66		7,147	\$1,462,848	

Contracted Service	Service Type	Program	Reimbursement Method	Non-Medi-Cal Contract Allocation
Non-Medi-Cal Billable Services	Outpatient Non-Medi-Cal Services (1)	North Community FSP	Fee-For-Service	\$ 27,640
	Quality Assurance & Utilization Management (2)	North Community FSP	Incentive	\$ 55,281
	Full Service Partnership Incentive (2)	North Community FSP	Incentive	\$ 82,921
	Peer Services	Wellness Centers	Cost Reimbursement	\$ 712,149
	Vocational Services	Vocational Rehabilitation	Cost Reimbursement	\$ 2,500
	Prevention Services	Growing Grounds	Cost Reimbursement	\$ 385,000
		LEAD	Cost Reimbursement	\$ 229,982
Client Flexible Funds (3)	North Community FSP	Cost Reimbursement	\$ 42,500	
				\$1,537,974

Total Contract Maximum **\$3,000,822**

Contract Maximum by Program & Estimated Funding Sources								Total
Funding Sources (4)	PROGRAM(S)							
	North Community FSP	Wellness Center Lompoc	Wellness Center Santa Maria	Vocational Rehabilitation	Growing Grounds	LEAD		
Medi-Cal Patient Revenue (5)	\$ 1,382,025	\$ 40,412	\$ 40,412	\$ -	\$ -	\$ -	\$ 1,462,848	
MHSA QA / UM Incentive	\$ 138,202	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 138,202	
MHSA Non-Medi-Cal Services	\$ 27,640	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 27,640	
MHSA Non-Medi-Cal Program	\$ -	\$ 354,869	\$ 357,281	\$ 2,500	\$ 385,000	\$ 229,982	\$ 1,329,631	
MHSA Client Flexible Support	\$ 42,500	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 42,500	
TOTAL CONTRACT PAYABLE FY 24-25:	\$ 1,590,368	\$ 395,280	\$ 397,692	\$ 2,500	\$ 385,000	\$ 229,982	\$ 3,000,822	

CONTRACTOR SIGNATURE: _____
 FISCAL SERVICES SIGNATURE: _____
 DocuSigned by: *Christie Boyer*
 96D40AB0C0AD408...

- (1) Outpatient Non-Medi-Cal service allocation is intended to cover services provided to Non-Medi-Cal client services at the same Fee-For-Service rates as noted for Medi-Cal clients.
- (2) Quality Assurance, Utilization Management, and Full Service Partnership incentive payments require the implementation of specific deliverables. If deliverables are not met then contractor is not eligible for incentive payment. Refer to Exhibit B of the agreement for required deliverables.
- (3) Client flexible support costs must comply with Behavioral Wellness policy guidelines. Supporting documentation is to be maintained by the contractor with costs tracked separately and monthly financial statements submitted.
- (4) The Director or designee may reallocate between funding sources at his/her discretion during the term of the contract, including to utilize and maximize any additional funding or FFP provided by local, State, or Federal law, regulation, policy, procedure, or program. Reallocation of funding sources does not alter the Maximum Contract Amount and does not require an amendment to the contract.
- (5) Source of Medi-Cal match is State and Local Funds including but not limited to Realignment, MHSA, General Fund, Grants, Other Departmental Funds and SB 163.
- (6) Refer to taxonomy codes in Exhibit B-3 for billable practitioner types within each provider group.

**EXHIBIT B-1 MH
DEPARTMENT OF BEHAVIORAL WELLNESS
SCHEDULE OF RATES AND CONTRACT MAXIMUM**

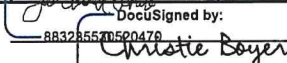
CONTRACTOR NAME: Transitions Mental Health Association FISCAL YEAR: 2025-2026

Contracted Service	Service Type	Provider Group	Practitioner Type (6)	Full Time Equivalent Staffing	Hourly Rate (Avg. Direct Bill rate)	Medi-Cal Target Hours	Medi-Cal Contract Allocation
Medi-Cal Billable Services	Outpatient Services Fee-For-Service	Non-Prescriber	Registered Nurse	0.25	\$399.18	198	\$ 79,038
			Licensed Vocational Nurse	0.00	\$209.70	0	\$ -
			Licensed Psychiatric Technician	2.00	\$179.77	1,588	\$ 285,473
		Behavioral Health Provider	Psychologist/ Pre-licensed Psychologist	0.00	\$395.23	0	\$ -
			LPHA / Assoc. LPHA	1.25	\$255.76	992	\$ 253,719
			Specialist	1.16	\$202.06	960	\$ 193,975
			Rehabilitation Specialists & Other Qualified Providers	5.00	\$192.44	3,969	\$ 763,795
			9.66		7,707	\$1,576,000	

Contracted Service	Service Type	Program	Reimbursement Method	Non-Medi-Cal Contract Allocation
Non-Medi-Cal Billable Services	Outpatient Non-Medi-Cal Services (1)	North Community FSP	Fee-For-Service	\$ 27,640
	Quality Assurance & Utilization Management (2)	North Community FSP	Incentive	\$ 55,281
	Full Service Partnership Incentive (2)	North Community FSP	Incentive	\$ 82,921
	Peer Services	Wellness Centers	Cost Reimbursement	\$ 598,997
	Vocational Services	Vocational Rehabilitation	Cost Reimbursement	\$ 2,500
	Prevention Services	Growing Grounds	Cost Reimbursement	\$ 385,000
		LEAD	Cost Reimbursement	\$ 229,982
	Client Flexible Funds (3)	North Community FSP	Cost Reimbursement	\$ 42,500
				\$1,424,822

Total Contract Maximum **\$3,000,822**

Contract Maximum by Program & Estimated Funding Sources								Total
Funding Sources (4)	PROGRAM(S)							
	North Community FSP	Wellness Center Lompoc	Wellness Center Santa Maria	Vocational Rehabilitation	Growing Grounds	LEAD		
Medi-Cal Patient Revenue (5)	\$ 1,382,025	\$ 96,988	\$ 96,988	\$ -	\$ -	\$ -		\$ 1,576,000
MHSA QA/UM & FSP Incentives	\$ 138,202	\$ -	\$ -	\$ -	\$ -	\$ -		\$ 138,202
MHSA Non-Medi-Cal Services	\$ 27,640	\$ -	\$ -	\$ -	\$ -	\$ -		\$ 27,640
MHSA Non-Medi-Cal Program	\$ -	\$ 298,292	\$ 300,704	\$ 2,500	\$ 385,000	\$ 229,982		\$ 1,216,479
MHSA Client Flexible Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ 42,500
TOTAL CONTRACT PAYABLE FY 25-26:	\$ 1,548,867	\$ 395,280	\$ 397,692	\$ 2,500	\$ 385,000	\$ 229,982	\$ -	\$ 3,000,822

CONTRACTOR SIGNATURE: 
 FISCAL SERVICES SIGNATURE: DocuSigned by: Charlotte Boyer
 88328550590478
 96D40AB0C0AD408...

- (1) Outpatient Non-Medi-Cal service allocation is intended to cover services provided to Non-Medi-Cal client services at the same Fee-For-Service rates as noted for Medi-Cal clients.
- (2) Quality Assurance, Utilization Management, and Full Service Partnership incentive payments require the implementation of specific deliverables. If deliverables are not met then contractor is not eligible for incentive payment. Refer to Exhibit B of the agreement for required deliverables.
- (3) Client flexible support costs must comply with Behavioral Wellness policy guidelines. Supporting documentation is to be maintained by the contractor with costs tracked separately and monthly financial statements submitted.
- (4) The Director or designee may reallocate between funding sources at his/her discretion during the term of the contract, including to utilize and maximize any additional funding or FFP provided by local, State, or Federal law, regulation, policy, procedure, or program. Reallocation of funding sources does not alter the Maximum Contract Amount and does not require an amendment to the contract.
- (5) Source of Medi-Cal match is State and Local Funds including but not limited to Realignment, MHSA, General Fund, Grants, Other Departmental Funds and SB 163.
- (6) Refer to taxonomy codes in Exhibit B-3 for billable practitioner types within each provider group.

XIII. Delete Exhibit B-2 Contractor Budget in its entirety and replace it with the following:

**EXHIBIT B- 2
Contractor Budget**

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CONTRACTOR BUDGET PAGE FOLLOWS

**Santa Barbara County Department of Behavioral Wellness
Entity Budget By Program**

AGENCY NAME: Transitions-Mental Health Association

COUNTY FISCAL YEAR: FY 2024-26

I. REVENUE SOURCES:		COUNTY BEHAVIORAL WELLNESS PROGRAMS TOTALS	Santa Maria Wellness Center	Lompoc Wellenss Center	Vocational Rehab	LEAD	Grow ing Grounds Farm
1	Contributions	\$ 66,731	\$ 19,000	\$ 25,000			\$ 22,731
2	Behavioral Wellness Funding	\$ 1,410,454	\$ 395,280	\$ 397,692	\$ 2,500	\$ 229,982	\$ 385,000
3	Other Contract and Grant Revenue	\$ 156,824			\$ 156,824		
4	Other: Sales	\$ 130,000					\$ 130,000
5	Other: Rents	\$ -					
6	Other Revenues	\$ -					
7	Total Other Revenue	\$ 1,764,009	\$ 414,280	\$ 422,692	\$ 159,324	\$ 229,982	\$ 537,731
II. Client and Third Party Revenues:							
8	Client Fees	\$ -	\$ -				
9	SSI	\$ -	\$ -				
10	Other (specify)	\$ -	\$ -				
11	Total Client and Third Party Revenues	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12	GROSS PROGRAM REVENUE BUDGET	\$ 1,764,009	\$ 414,280	\$ 422,692	\$ 159,324	\$ 229,982	\$ 537,731

III. DIRECT COSTS		COUNTY BEHAVIORAL WELLNESS PROGRAMS TOTALS	Santa Maria Wellness Center	Lompoc Wellenss Center	Vocational Rehab	LEAD	Grow ing Grounds Farm
III.A. Salaries and Benefits Object Level							
13	Salaries (Complete Staffing Schedule)	\$ 949,358	\$ 232,091	\$ 222,133	\$ 98,060	\$ 121,063	\$ 276,011
14	Employee Benefits	\$ 209,364	\$ 47,265	\$ 48,075	\$ 27,747	\$ 26,244	\$ 60,033
15	Payroll Taxes	\$ 79,189	\$ 18,883	\$ 18,868	\$ 8,335	\$ 9,108	\$ 23,994
16	Salaries and Benefits Subtotal	\$ 1,237,911	\$ 298,239	\$ 289,076	\$ 134,142	\$ 156,416	\$ 360,038
III.B Services and Supplies Object Level							
17	Cost of Goods Sold	\$ 65,000	\$ -	\$ -	\$ -	\$ -	\$ 65,000
18	Office Rent	\$ 29,771	\$ -	\$ 13,746	\$ -	\$ 16,025	
19	Occupancy Fee	\$ 2,144	\$ -	\$ -	\$ -	\$ -	\$ 2,144
20	Professional Fees	\$ 7,292	\$ 1,000	\$ 1,000	\$ -	\$ 4,932	\$ 360
21	Taxes, Licenses & Fees	\$ 260	\$ -	\$ -	\$ -	\$ -	\$ 260
22	Staff Training	\$ 12,540	\$ 1,560	\$ 1,560	\$ 260	\$ 4,160	\$ 5,000
23	Credit Card Fees	\$ 2,400	\$ -	\$ -	\$ -	\$ -	\$ 2,400
24	Dues & Subscriptions	\$ 15,994	\$ 6,000	\$ 6,000	\$ 1,290	\$ 2,080	\$ 624
25	Furniture & Equipment/Computers	\$ 1,020	\$ -	\$ -	\$ -	\$ 520	\$ 500
26	Technology	\$ 3,072	\$ -	\$ -	\$ -	\$ 1,872	\$ 1,200
27	Insurance	\$ 13,933	\$ 3,600	\$ 3,600	\$ 1,071	\$ 1,200	\$ 4,462
28	Office & Program Expenses	\$ 17,150	\$ 4,800	\$ 4,800	\$ 520	\$ 5,200	\$ 1,830
29	Other Expenses	\$ 2,080	\$ 500	\$ 800	\$ -	\$ 104	\$ 676
30	Marketing/Public Relations	\$ 3,110	\$ 208	\$ 208	\$ 104	\$ 1,040	\$ 1,550
31	Printed Material & Postage	\$ 2,298	\$ 500	\$ 500	\$ 208	\$ 1,040	\$ 50
32	Repairs & Maintenance	\$ 21,524	\$ 7,500	\$ 8,400	\$ -	\$ 624	\$ 5,000
33	Telecommunication	\$ 20,240	\$ 6,900	\$ 6,000	\$ 1,040	\$ 2,100	\$ 4,200
34	Transportation	\$ 28,732	\$ 7,500	\$ 10,000	\$ 1,560	\$ 172	\$ 9,500
35	Utilities	\$ 14,800	\$ 3,000	\$ 2,400	\$ -	\$ 2,500	\$ 6,900
36	Services and Supplies Subtotal	\$ 263,359	\$ 43,068	\$ 59,014	\$ 6,053	\$ 43,568	\$ 111,656
III.C. Client Expense Object Level Total (Not Medi-Cal Reimbursable)							
37	Client Expenses	\$ 8,000	\$ 4,000	\$ 4,000	\$ -	\$ -	\$ -
38	Groceries	\$ 20,000	\$ 10,000	\$ 10,000	\$ -	\$ -	\$ -
39	Recreation	\$ 8,000	\$ 4,000	\$ 4,000	\$ -	\$ -	\$ -
40	SUBTOTAL DIRECT COSTS	\$ 1,537,271	\$ 359,307	\$ 366,090	\$ 140,195	\$ 199,984	\$ 471,694
IV. INDIRECT COSTS							
41	Administrative Indirect Costs (Reimbursement limited to 15%)	\$ 226,739	\$ 54,973	\$ 56,602	\$ 19,129	\$ 29,998	\$ 66,037
42	GROSS DIRECT AND INDIRECT COSTS	\$ 1,764,009	\$ 414,280	\$ 422,692	\$ 159,324	\$ 229,982	\$ 537,731

XIV. Effectiveness. The terms and provisions set forth in this First Amendment shall modify and supersede all inconsistent terms and provisions set forth in the Agreement. The terms and provisions of the Agreement, except as expressly modified and superseded by this First Amendment, are ratified and confirmed and shall continue in full force and effect and shall continue to be legal, valid, binding, and enforceable obligations of the parties.

XV. Execution of Counterparts. This First Amendment may be executed in any number of counterparts, and each of such counterparts shall for all purposes be deemed to be an original, and all such counterparts, or as many of them as the parties shall preserve undestroyed, shall together constitute one and the same instrument.

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SIGNATURE PAGE

First Amendment to the Agreement for Services of Independent Contractor between the **County of Santa Barbara and Transitions – Mental Health Association.**

IN WITNESS WHEREOF, the parties have executed this First Amendment to be effective as of the date executed by COUNTY.

COUNTY OF SANTA BARBARA:

By: 
LAURA CAPPS, CHAIR
BOARD OF SUPERVISORS

Date: 2-25-25

ATTEST:

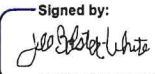
MONA MIYASATO
COUNTY EXECUTIVE OFFICER
CLERK OF THE BOARD

By: 
Deputy Clerk

Date: 2-25-25

CONTRACTOR:

TRANSITIONS – MENTAL HEALTH
ASSOCIATION

Signed by:

By: 883235530520470


Name: Authorized Representative
Jill Bolster-White

Title: Executive Director

Date: 2/13/2025

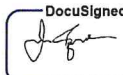
APPROVED AS TO FORM:

RACHEL VAN MULLEM
COUNTY COUNSEL

Signed by:
By: 
48A252DEFFD9466...
Deputy County Counsel

APPROVED AS TO ACCOUNTING FORM:

BETSY M. SCHAFFER, CPA
AUDITOR-CONTROLLER

DocuSigned by:
By: 
6BAAEA16994043F...
Deputy

RECOMMENDED FOR APPROVAL:

ANTONETTE NAVARRO, LMFT
DIRECTOR, DEPARTMENT OF
BEHAVIORAL WELLNESS

DocuSigned by:
By: Antonette Navarro
2095C5A16FE1474
Director

APPROVED AS TO FORM:

GREG MILLIGAN, ARM, RISK MANAGER
DEPARTMENT OF RISK MANAGEMENT

DocuSigned by:
By: 
05E555E00269466
Risk Manager