

**SECOND AMENDMENT
TO AGREEMENT FOR SERVICES OF INDEPENDENT CONTRACTOR**

THIS SECOND AMENDMENT to the **AGREEMENT** for Services of Independent Contractor, referenced as BC 18-253, by and between the **County of Santa Barbara** (County) and **Casa Pacifica Centers for Children and Families**, a California nonprofit corporation (Contractor), wherein Contractor agrees to provide and County agrees to accept the services specified herein.

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 referenced herein;

WHEREAS, the County Board of Supervisors authorized the County to enter into a Board Contract for Services of Independent Contractor, referred to as BC 18-253, on June 19, 2018 for the provision of mental health services, for a total Maximum Contract Amount not to exceed \$3,866,400 for the period of July 1, 2018 through June 30, 2019;

WHEREAS, the County Board of Supervisors approved of a First Amendment to Contractor's Board Contract on June 4, 2019 to update language for compliance with state and federal regulations along with updates to the Exhibits for consistency with the approved budget and statement of works, to extend the contract term of the Agreement to June 30, 2020, and to increase the amount of the contract for a Maximum Contract Amount not to exceed \$7,732,800 for FY 18-20, inclusive of \$3,866,400 for FY 18-19 and \$3,866,400 for FY 19-20;

WHEREAS, this Second Amended Agreement shall add staffing positions to the In-Home Therapeutic Programs (Exhibit A-5) with no change to the total contract maximum not to exceed \$7,732,800 for the period of July 1, 2018 through June 30, 2020, inclusive of \$3,866,400 for FY 18-19 and \$3,866,400 for FY 19-20.

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

1. Delete Subdivision C of Section 10 (Staffing Requirements) of Exhibit A-5 Statement of Work: MHS In-Home Therapeutic Programs and replace with the following:

C. Up to 12.0 FTE TBS Specialists who shall be QMHWs as described above or licensed/waivered/registered mental health professionals as described in Title 9, CCR 1810.223 and 1810.254 to include only the following individuals:

- i. licensed physicians;
- ii. licensed psychologists;
- iii. licensed clinical social workers;
- iv. licensed marriage and family therapists; or

- v. An individual who 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.

Responsibilities of TBS Specialists shall include but not be limited to individual Targeted Case Management; implementation and execution of the client's Client Service Plan; one-to-one client interventions; daily reporting of developments regarding the client's case; and providing consultation to and coaching parents on behavior management.

2. Delete Exhibit B-1 MHS Schedule of Rates and Contracts Maximum and replace with the following:

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

CONTRACTOR NAME:

Casa Pacifica

FISCAL YEAR: 2019-2020

Contracted Services(1)	Service Type	Mode	Service Description	Unit of Service	Service Function Code	County Maximum Allowable Rate
Medi-Cal Billable Services	Outpatient Services	15	Targeted Case Management	Minutes	01	\$2.51
			Intensive Care Coordination	Minutes	07	\$2.51
			Collateral	Minutes	10	\$3.25
			*MHS- Assessment	Minutes	30	\$3.25
			MHS - Plan Development	Minutes	31	\$3.25
			*MHS- Therapy (Family, Individual)	Minutes	11, 40	\$3.25
			MHS - Rehab (Family, Individual, Group)	Minutes	12, 41, 51	\$3.25
			MHS - IRBS	Minutes	57	\$3.25
			MHS - TBS	Minutes	58	\$3.25
			Medication Support and Training	Minutes	62	\$5.99
Crisis Intervention	Minutes	70	\$4.82			

	PROGRAM				TOTAL
	Short Term Residential Therapeutic Program (STRTP)	Therapeutic Behavioral Services	Wraparound	SAFTY	
GROSS COST:	\$ 208,102	\$ 1,913,698	\$ 1,424,000	\$ 1,030,600	\$ 4,576,400
LESS REVENUES COLLECTED BY CONTRACTOR:					
PATIENT FEES					\$ -
CONTRIBUTIONS					\$ -
OTHER (LIST): DSS SB 163			\$ 710,000		\$ 710,000
OTHER (LIST):					\$ -
TOTAL CONTRACTOR REVENUES	\$ -	\$ -	\$ 710,000	\$ -	\$ 710,000
MAXIMUM CONTRACT AMOUNT PAYABLE:	\$ 208,102	\$ 1,913,698	\$ 714,000	\$ 1,030,600	\$ 3,866,400

SOURCES OF FUNDING FOR MAXIMUM ANNUAL CONTRACT AMOUNT (2)					
MEDI-CAL (3)	\$ 197,697	\$ 1,818,013	\$ 678,300	\$ 783,256	\$ 3,477,266
NON-MEDI-CAL					\$ -
SUBSIDY	\$ 10,405	\$ 95,685	\$ 35,700	\$ 247,344	\$ 389,134
OTHER (LIST):					\$ -
TOTAL (SOURCES OF FUNDING)	\$ 208,102	\$ 1,913,698	\$ 714,000	\$ 1,030,600	\$ 3,866,400

CONTRACTOR SIGNATURE:

Wayne Dawey Wayne Dawey Interim CFO 10-24-19

FISCAL SERVICES SIGNATURE:

(1) Additional services may be provided if authorized by Director or designee in writing.

(2) 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. The Director or designee also reserves the right to reallocate between funding sources in the year end cost settlement. Reallocation of funding sources does not alter the Maximum Contract Amount and does not require an amendment to the contract.

(3) Source of Medi-Cal match is State and Local Funds including but not limited to Realignment, MHSA, General Fund, Grants, Other Departmental and SB 163.

* MHS Assessment and MHS Therapy services may only be provided by licensed, registered or waived Mental Health clinicians, or graduate student interns under direct supervision of a licensed, registered or waived Mental Health clinician.

2. Delete Exhibit B-1 MHS Schedule of Rates and Contracts Maximum and replace with the following:

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

CONTRACTOR NAME: Casa Pacifica **FISCAL YEAR:** 2019-2020

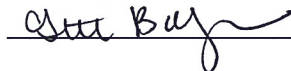
Contracted Services(1)	Service Type	Mode	Service Description	Unit of Service	Service Function Code	County Maximum Allowable Rate
Medi-Cal Billable Services	Outpatient Services	15	Targeted Case Management	Minutes	01	\$2.51
			Intensive Care Coordination	Minutes	07	\$2.51
			Collateral	Minutes	10	\$3.25
			*MHS- Assessment	Minutes	30	\$3.25
			MHS - Plan Development	Minutes	31	\$3.25
			*MHS- Therapy (Family, Individual)	Minutes	11, 40	\$3.25
			MHS - Rehab (Family, Individual, Group)	Minutes	12, 41, 51	\$3.25
			MHS - IHBS	Minutes	57	\$3.25
			MHS - TBS	Minutes	58	\$3.25
			Medication Support and Training	Minutes	62	\$5.99
Crisis Intervention	Minutes	70	\$4.82			

	PROGRAM				TOTAL
	Short Term Residential Therapeutic Program (STRTP)	Therapeutic Behavioral Services	Wraparound	SAFTY	
GROSS COST:	\$ 208,102	\$ 1,913,698	\$ 1,424,000	\$ 1,030,600	\$4,576,400
LESS REVENUES COLLECTED BY CONTRACTOR:					
PATIENT FEES					\$ -
CONTRIBUTIONS					\$ -
OTHER (LIST): DSS SB 163			\$ 710,000		\$ 710,000
OTHER (LIST):					\$ -
TOTAL CONTRACTOR REVENUES	\$ -	\$ -	\$ 710,000	\$ -	\$710,000
MAXIMUM CONTRACT AMOUNT PAYABLE:	\$ 208,102	\$ 1,913,698	\$ 714,000	\$ 1,030,600	\$ 3,866,400

SOURCES OF FUNDING FOR MAXIMUM ANNUAL CONTRACT AMOUNT (2)						
MEDI-CAL (3)	\$ 197,697	\$ 1,818,013	\$ 678,300	\$ 783,256	\$ 3,477,266	
NON-MEDI-CAL					\$ -	
SUBSIDY	\$ 10,405	\$ 95,685	\$ 35,700	\$ 247,344	\$ 389,134	
OTHER (LIST):					\$ -	
TOTAL (SOURCES OF FUNDING)	\$ 208,102	\$ 1,913,698	\$ 714,000	\$ 1,030,600	\$ 3,866,400	

CONTRACTOR SIGNATURE:

FISCAL SERVICES SIGNATURE:



(1) Additional services may be provided if authorized by Director or designee in writing.

(2) 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. The Director or designee also reserves the right to reallocate between funding sources in the year end cost settlement. Reallocation of funding sources does not alter the Maximum Contract Amount and does not require an amendment to the contract.

(3) Source of Medi-Cal match is State and Local Funds including but not limited to Realignment, MHSA, General Fund, Grants, Other Departmental and SB 163.

* MHS Assessment and MHS Therapy services may only be provided by licensed, registered or waived Mental Health clinicians, or graduate student interns under direct supervision of a licensed, registered or waived Mental Health clinician.

3. Delete Exhibit B-2 Entity Budget Program and replace with the following:

Santa Barbara County Alcohol, Drug and Mental Health Services Contract Financial Report By Program							
AGENCY NAME:		Casa Pacifica Centers for Children & Families					
COUNTY FISCAL YEAR:		2019-20 Amended					
COLUMN #	1	2	3	4	5	6	7
Gray Shaded cells contain formulas, do not overwrite							
I. REVENUE SOURCES:							
1	Contributions						
2	Foundations/Trusts						
3	Miscellaneous Revenue						
4	Behavioral Wellness Funding						
5	Other Government Funding						
6	Other (CWS SB 163)						
7	Other (specify)						
8	Other (specify)						
9	Other (specify)						
10	Total Other Revenue						
I.B. Client and Third Party Revenues:							
11	Client Fees						
12	SSI						
13	Other (specify)						
14	Total Client and Third Party Revenues (Sum of lines 19 through 23)						
15	GROSS PROGRAM REVENUE BUDGET						
III. DIRECT COSTS							
III.A. Salaries and Benefits Object Level							
16	Salaries (Complete Staffing Schedule)						
17	Employee Benefits						
18	Consultants						
19	Payroll Taxes						
20	Salaries and Benefits Subtotal						
		TOTAL AGENCY/ ORGANIZATION BUDGET	COUNTY BEHAVIORAL WELLNESS PROGRAMS TOTALS	Short Term Residential Therapeutic Program	Therapeutic Behavioral Services	Wraparound	SAFETY
			\$ -				
			\$ -				
			\$ -				
			\$ -				
			\$ 3,866,400	\$ 208,102	\$ 1,913,698	\$ 714,000	\$ 1,030,600
			\$ -				
			\$ 710,000			\$ 710,000	
			\$ -				
			\$ -				
			\$ -				
			\$ 4,576,400	\$ 208,102	\$ 1,913,698	\$ 1,424,000	\$ 1,030,600
			\$ -				
			\$ -				
			\$ -				
			\$ -				
			\$ -				
			\$ 4,576,400	\$ 208,102	\$ 1,913,698	\$ 1,424,000	\$ 1,030,600
			\$ 2,517,517	\$ 107,349	\$ 1,022,410	\$ 806,755	\$ 581,002
			\$ 515,871	\$ 15,435	\$ 257,676	\$ 144,767	\$ 97,993
			\$ -	\$ -	\$ -	\$ -	\$ -
			\$ 181,067	\$ 7,740	\$ 72,993	\$ 57,970	\$ 42,364
			\$ 3,214,455	\$ 130,524	\$ 1,353,079	\$ 1,009,492	\$ 721,360

III. B Services and Supplies Object Level											
21	Advertising and recruiting	\$	12,400	\$	660	\$	2,209	\$	2,989	\$	6,542
22	Auto expense	\$	105,795	\$	500	\$	61,711	\$	33,018	\$	10,566
23	Child related costs	\$	1,465	\$	1,465	\$	-	\$	-	\$	-
24	Computer expense	\$	180,750	\$	9,268	\$	66,575	\$	64,346	\$	40,560
25	Conferences and meetings	\$	7,307	\$	828	\$	3,470	\$	1,813	\$	1,196
26	Depreciation	\$	4,603	\$	2,722	\$	901	\$	613	\$	368
27	Dues and subscriptions	\$	106	\$	66	\$	32	\$	5	\$	4
28	Education and training	\$	30,198	\$	2,606	\$	10,525	\$	10,915	\$	6,152
29	Equipment maint. and rental	\$	759	\$	182	\$	294	\$	166	\$	117
30	Insurance	\$	45,955	\$	3,418	\$	19,095	\$	13,656	\$	9,787
31	Office expense	\$	8,625	\$	337	\$	2,600	\$	1,120	\$	4,568
32	Outside services	\$	34,913	\$	723	\$	9,025	\$	10,463	\$	14,702
33	Postage	\$	2	\$	2	\$	-	\$	-	\$	-
34	Printing	\$	3,033	\$	15	\$	67	\$	55	\$	2,896
35	Professional fees	\$	14,673	\$	13,125	\$	1,549	\$	-	\$	-
36	Rent	\$	204,593	\$	2,699	\$	88,443	\$	69,282	\$	44,169
37	Repairs and maintenance	\$	25,819	\$	9,465	\$	7,765	\$	5,105	\$	3,484
38	Supplies	\$	8,820	\$	1,344	\$	6,805	\$	291	\$	380
39	Taxes and licenses	\$	1,713	\$	190	\$	628	\$	-	\$	894
40	Telephone	\$	48,210	\$	343	\$	13,592	\$	10,390	\$	23,884
41	Transportation and travel	\$	17,187	\$	177	\$	12,037	\$	2,127	\$	2,846
42	Utilities	\$	8,097	\$	302	\$	3,682	\$	2,414	\$	1,699
43		\$	-	\$	-	\$	-	\$	-	\$	-
44	Services and Supplies Subtotal	\$	765,023	\$	50,435	\$	311,006	\$	228,768	\$	174,815
45	III. C. Client Expense Object Level Total (Not Medi-Cal or BWell Reimbursable)	\$	-	\$	-	\$	-	\$	-	\$	-
46	SUBTOTAL DIRECT COSTS	\$	3,979,479	\$	180,959	\$	1,664,085	\$	1,238,260	\$	896,175
IV. INDIRECT COSTS											
47	Administrative Indirect Costs (Reimbursement limited to 15%)	\$	596,922	\$	27,144	\$	249,613	\$	185,740	\$	134,425
48	GROSS DIRECT AND INDIRECT COSTS (Sum of lines 46+47)	\$	4,576,400	\$	208,102	\$	1,913,698	\$	1,424,000	\$	1,030,600

Signature Page

Second Amendment to Agreement for Services of Independent Contractor between the County of Santa Barbara and Casa Pacifica Centers for Children and Families.

IN WITNESS WHEREOF, the parties have executed this Second Amendment to be effective on the date executed by COUNTY.


COUNTY OF SANTA BARBARA:

By: _____
STEVE LAVAGNINO, CHAIR
BOARD OF SUPERVISORS
Date: _____

ATTEST:
MONA MIYASATO
COUNTY EXECUTIVE OFFICER
CLERK OF THE BOARD

By: _____
Deputy Clerk
Date: _____

CONTRACTOR:
**CASA PACIFICA CENTERS FOR CHILDREN
AND FAMILIES**

By:  _____
Authorized Representative
Name: Wayne Dawey
Title: Interim CFO
Date: 10/24/19

APPROVED AS TO FORM:
MICHAEL C. GHIZZONI
COUNTY COUNSEL

By: _____
Deputy County Counsel

APPROVED AS TO ACCOUNTING FORM:
BETSY M. SCHAFFER, CPA
AUDITOR-CONTROLLER

By: _____
Deputy

RECOMMENDED FOR APPROVAL:
ALICE GLEGHORN, PH.D., DIRECTOR
DEPARTMENT OF BEHAVIORAL
WELLNESS

By: _____
Director

APPROVED AS TO FORM:
RAY AROMATORIO
RISK MANAGEMENT

By: _____
Risk Management


11-5-19

Signature Page

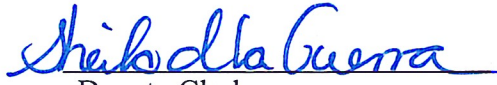
Second Amendment to Agreement for Services of Independent Contractor between the County of Santa Barbara and Casa Pacifica Centers for Children and Families.

IN WITNESS WHEREOF, the parties have executed this Second Amendment to be effective on the date executed by COUNTY.

COUNTY OF SANTA BARBARA:

By: 
STEVE LAVAGNINO, CHAIR
BOARD OF SUPERVISORS
Date: 11-5-19


ATTEST:
MONA MIYASATO
COUNTY EXECUTIVE OFFICER
CLERK OF THE BOARD

By: 
Deputy Clerk
Date: 11-5-19

CONTRACTOR:
CASA PACIFICA CENTERS FOR CHILDREN
AND FAMILIES

By: _____
Authorized Representative
Name: _____
Title: _____
Date: _____

APPROVED AS TO FORM:
MICHAEL C. GHIZZONI
COUNTY COUNSEL

By: 
Deputy County Counsel

APPROVED AS TO ACCOUNTING FORM:
BETSY M. SCHAFFER, CPA
AUDITOR-CONTROLLER

By: 
Deputy

RECOMMENDED FOR APPROVAL:
ALICE GLEGHORN, PH.D., DIRECTOR
DEPARTMENT OF BEHAVIORAL
WELLNESS

By: 
Director

APPROVED AS TO FORM:
RAY AROMATORIO
RISK MANAGEMENT

By: 
Risk Management