

CITED GRANT SERVICES AGREEMENT

THIS AGREEMENT (hereafter Agreement) is made by and between the County of Santa Barbara, a political subdivision of the State of California (hereafter COUNTY) and Cottage Health with an address at 400 W Pueblo St, Santa Barbara, CA 93105 (hereafter GRANTOR) wherein COUNTY agrees to provide and GRANTOR agrees to accept the services specified herein. COUNTY and GRANTOR are collectively referred to as "Parties" and individually as "Party".

RECITALS

WHEREAS, GRANTOR is a nonprofit corporation organized and operated for charitable purposes within the meaning of section 501(c)(3) of the Internal Revenue Code and desires to administer the Capacity and Infrastructure, Transition, Expansion, and Development (CITED) grant and provide funds to COUNTY to conduct grant activities;

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

NOW, THEREFORE, in consideration of the above-mentioned Recitals and the mutual covenants and conditions contained herein, the Parties agree as follows:

1. DESIGNATED REPRESENTATIVE

Paola Hurtado at phone number (805) 698-2418 is the representative of COUNTY and will administer this Agreement for and on behalf of COUNTY. Kathryn Bazylewicz at phone number (805) 879-8989 is the authorized representative for GRANTOR. Changes in designated representatives shall be made only after advance written notice to the other Party.

2. NOTICES

Any notice or consent required or permitted to be given under this Agreement shall be given to the respective parties in writing, by personal delivery or facsimile, or with postage prepaid by first class mail, registered or certified mail, or express courier service, as follows:

To COUNTY: Paola Hurtado, 300 N. San Antonio Road, Santa Barbara, CA, 93110
To GRANTOR: Kathryn Bazylewicz, 400 W Pueblo St, Santa Barbara, CA 93105

or at such other address or to such other person that the parties may from time to time designate in accordance with this Notices section. If sent by first class mail, notices and consents under this section shall be deemed to be received five (5) days following their deposit in the U.S. mail. This Notices section shall not be construed as meaning that either Party agrees to service of process except as required by applicable law.

3. SCOPE OF SERVICES

COUNTY agrees to provide services to GRANTOR in accordance with EXHIBIT A and EXHIBIT A-1 attached hereto and incorporated herein by reference.

4. TERM

COUNTY shall commence performance on September 1, 2024 and end performance upon completion, but no later than August 31, 2026 unless otherwise directed by GRANTOR or unless earlier terminated.

5. DISTRIBUTION OF FUNDS TO COUNTY

For the period of 09/1/2024 to 08/31/2026, the total GRANTEE grant will be \$1,294,245.95 to support the activities as described in the Scope of Work (Exhibit A) and Grant CITED Application (Exhibit A-1), CITED Terms and Conditions Round 3(Exhibit B), and CITED Round 3 Approved Budget (Exhibit C). Funds provided for this grant must be used within the specified time period.

6. INDEPENDENT CONTRACTOR

It is mutually understood and agreed that each Party (including any and all of its officers, agents, and employees), under this Agreement is an independent contractor as to the other Party. Furthermore, neither Party shall have no right to control, supervise, or direct the manner or method by which the other Party shall perform its work or function under this Agreement. Each Party understands and acknowledges that it shall not be entitled to any of the benefits of the other Party employee, including but not limited to vacation, sick leave, administrative leave, health insurance, disability insurance, retirement, unemployment insurance, workers' compensation and protection of tenure. Each Party shall be solely liable and responsible for providing to, or on behalf of, its employees all legally-required employee benefits.

7. DEBARMENT AND SUSPENSION

Each Party certifies to the other Party that it and its employees and principals are not debarred, suspended, or otherwise excluded from or ineligible for, participation in federal, state, or county government contracts. COUNTY certifies that it shall not contract with a subcontractor that is so debarred or suspended.

8. TAXES

Each Party shall pay all taxes, levies, duties, and assessments of every nature due in connection with any work under this Agreement and shall make any and all payroll deductions required by law. Neither Party will be responsible for paying any taxes on the other Party's behalf. These taxes shall include, but not be limited to, the following: FICA (Social Security), unemployment insurance contributions, income tax, disability insurance, and workers' compensation insurance.

9. CONFLICT OF INTEREST

Each Party covenants that it presently has no employment or interest and shall not acquire any employment or interest, direct or indirect, including any interest in any business, property, or source of income, which would conflict in any manner or degree with the performance of services required to be performed under this Agreement. Each Party further covenants that in the performance of this Agreement, no person having any such interest shall be employed by the Party. Each Party must promptly disclose to the other Party, in writing, any potential conflict of interest. Each Party retains the right to waive a conflict of interest disclosed if it determines it to be immaterial, and such waiver is only effective if provided in writing.

10. OWNERSHIP OF DOCUMENTS AND INTELLECTUAL PROPERTY

Each Party shall be the owner of the following items incidental to this Agreement upon production, whether or not completed: all data collected, all documents of any type whatsoever, all photos, designs, sound or audiovisual recordings, software code, inventions, technologies, and other materials, and any material necessary for the practical use of such items, from the time of collection and/or production whether or not performance under this Agreement is completed or terminated prior to completion. Neither Party shall release any of such items to other parties except after prior written approval.

11. NO PUBLICITY OR ENDORSEMENT

GRANTOR shall not use COUNTY'S name or logo or any variation of such name or logo in any publicity, advertising, or promotional materials. GRANTOR shall not use COUNTY'S name or logo in any manner that would give the appearance that the COUNTY is endorsing GRANTOR. GRANTOR shall not in any way contract on behalf of or in the name of COUNTY. GRANTOR shall not release any informational

pamphlets, notices, press releases, research reports, or similar public notices concerning the COUNTY or its projects, without obtaining the prior written approval of COUNTY.

12. COUNTY PROPERTY AND INFORMATION

All of each Party's property, documents, and information provided use in connection with the services shall remain that Party's property. Neither Party shall disseminate any of the other Party's property, documents, or information without prior written consent.

13. RECORDS, AUDIT, AND REVIEW

Each Party shall keep such business records pursuant to this Agreement as would be kept by a reasonably prudent practitioner of the Party's profession and shall maintain such records for at least four (4) years following the termination of this Agreement. All accounting records shall be kept in accordance with generally accepted accounting principles. Each Party shall have the right to audit and review all such documents and records at any time during the other Party's regular business hours or upon reasonable notice. In addition, if this Agreement exceeds ten thousand dollars (\$10,000.00), each Party shall be subject to the examination and audit of the California State Auditor, at the request of the other Party or as part of any audit, for a period of four (4) years after final payment under the Agreement (Cal. Govt. Code Section 8546.7). Each Party shall participate in any audits and reviews, whether by a Party or the State, at no charge.

14. INDEMNIFICATION AND INSURANCE

A. In lieu of and notwithstanding the pro rata risk allocation which might otherwise be imposed between the parties pursuant to California Government Code Section 895.6, the parties agree that all losses or liabilities incurred by a party shall not be shared pro rata but instead all parties agree that pursuant to California Government Code Section 895.4, each of the parties hereto shall fully indemnify and hold each of the other parties, their officers, board members, employees and agents, harmless from any claim, expense or cost, damage or liability imposed for injury (as defined by California Government Code Section 810.8) occurring by reason of the negligent acts or omissions or willful misconduct of the indemnifying party, its officers, board members, employees or agents, under or in connection with or arising out of any work, authority or jurisdiction delegated to such party under this Agreement. No party, nor any officer, board member, employee or agent thereof shall be responsible for any damage or liability occurring by reason of the negligent acts or omissions or willful misconduct of other parties hereto, their officers, board members, employees or agents, under or in connection with or arising out of any work, authority or jurisdiction delegated to such other parties under this Agreement.

B. Each Party shall maintain its own insurance coverage, through commercial insurance, self-insurance or a combination thereof, against any claim, expense, cost, damage, or liability arising out of the performance of its responsibilities pursuant to this Agreement.

15. NONDISCRIMINATION

Each Party hereby agrees that COUNTY's Unlawful Discrimination Ordinance (Article XIII of Chapter 2 of the Santa Barbara County Code) applies to this Agreement and is incorporated herein by this reference with the same force and effect as if the ordinance were specifically set out herein and each Party agrees to comply with said ordinance.

16. NONEXCLUSIVE AGREEMENT

Each Party understands that this is not an exclusive Agreement and that each Party shall have the right to negotiate with and enter into contracts with others providing the same or similar services.

17. NON-ASSIGNMENT

Neither Party shall assign, transfer or subcontract this Agreement or any of its rights or obligations under this Agreement without the prior written consent of the other Party and any attempt to so assign,

subcontract or transfer without such consent shall be void and without legal effect and shall constitute grounds for termination.

18. TERMINATION

A. Each Party may, by written notice to the other Party, terminate this Agreement in whole or in part at any time, whether for convenience, for nonappropriation of funds, or because of the failure of the other Party to fulfill the obligations herein.

1. **For Convenience.** Each Party may terminate this Agreement in whole or in part upon thirty (30) days written notice. During the thirty (30) day period, each Party shall wind down and cease its services as quickly and efficiently as reasonably possible, without performing unnecessary services or activities and by minimizing negative effects from such winding down and cessation of services.
2. **For Nonappropriation of Funds.** Notwithstanding any other provision of this Agreement, in the event that no funds or insufficient funds are appropriated or budgeted by federal, state, COUNTY, or GRANTOR, or funds are not otherwise available for payments in the fiscal year(s) covered by the term of this Agreement, then the Party will notify the other Party of such occurrence and may terminate or suspend this Agreement in whole or in part, with or without a prior notice period. Subsequent to termination of this Agreement under this provision, COUNTY shall have no obligation to make payments with regard to the remainder of the term.
3. **For Cause.** Should either Party default in the performance of this Agreement or materially breach any of its provisions, the non-breaching Party in its sole option, terminate or suspend this Agreement in whole or in part by written notice. The date of termination shall be the date the notice is received, unless the notice directs otherwise.

19. SECTION HEADINGS

The headings of the several sections, and any Table of Contents appended hereto, shall be solely for convenience of reference and shall not affect the meaning, construction or effect hereof.

20. SEVERABILITY

If any one or more of the provisions contained herein shall for any reason be held to be invalid, illegal or unenforceable in any respect, then such provision or provisions shall be deemed severable from the remaining provisions hereof, and such invalidity, illegality or unenforceability shall not affect any other provision hereof, and this Agreement shall be construed as if such invalid, illegal or unenforceable provision had never been contained herein.

21. REMEDIES NOT EXCLUSIVE

No remedy herein conferred upon or reserved is intended to be exclusive of any other remedy or remedies, and each and every such remedy, to the extent permitted by law, shall be cumulative and in addition to any other remedy given hereunder or now or hereafter existing at law or in equity or otherwise.

22. TIME IS OF THE ESSENCE

Time is of the essence in this Agreement and each covenant and term is a condition herein.

23. NO WAIVER OF DEFAULT

No delay or omission of either Party to exercise any right or power arising upon the occurrence of any event of default shall impair any such right or power or shall be construed to be a waiver of any such

default or an acquiescence therein; and every power and remedy given by this Agreement may be exercised from time to time and as often as may be deemed expedient.

24. ENTIRE AGREEMENT AND AMENDMENT

In conjunction with the matters considered herein, this Agreement contains the entire understanding and agreement of the parties and there have been no promises, representations, agreements, warranties or undertakings by any of the parties, either oral or written, of any character or nature hereafter binding except as set forth herein. This Agreement may be altered, amended or modified only by an instrument in writing, executed by the parties to this Agreement and by no other means. Each party waives their future right to claim, contest or assert that this Agreement was modified, canceled, superseded, or changed by any oral agreements, course of conduct, waiver or estoppel.

25. SUCCESSORS AND ASSIGNS

All representations, covenants and warranties set forth in this Agreement, by or on behalf of, or for the benefit of any or all of the parties hereto, shall be binding upon and inure to the benefit of such party, its successors and assigns.

26. COMPLIANCE WITH LAW

Each Party shall, at its sole cost and expense, comply with all County, State and Federal ordinances and statutes now in force or which may hereafter be in force with regard to this Agreement.

27. CALIFORNIA LAW AND JURISDICTION

This Agreement shall be governed by the laws of the State of California. Any litigation regarding this Agreement or its contents shall be filed in the County of Santa Barbara, if in state court, or in the federal district court nearest to Santa Barbara County, if in federal court.

28. EXECUTION OF COUNTERPARTS

This Agreement 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.

29. AUTHORITY

All signatories and parties to this Agreement warrant and represent that they have the power and authority to enter into this Agreement in the names, titles and capacities herein stated and on behalf of any entities, persons, or firms represented or purported to be represented by such entity(ies), person(s), or firm(s) and that all formal requirements necessary or required by any state and/or federal law in order to enter into this Agreement have been fully complied with. Furthermore, by entering into this Agreement, each Party hereby warrants that it shall not have breached the terms or conditions of any other contract or agreement to which it is obligated, which breach would have a material effect hereon.

30. SURVIVAL

All provisions of this Agreement which by their nature are intended to survive the termination or expiration of this Agreement shall survive such termination or expiration.

31. PRECEDENCE

In the event of conflict between the provisions contained in the numbered sections of this Agreement and the provisions contained in the Exhibits, the provisions of the Exhibits shall prevail over those in the numbered sections.

Agreement for Grant Services between the **County of Santa Barbara** and **Cottage Health**.

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

RECOMMENDED FOR APPROVAL:

Mouhanad Hammami, Director
Public Health Department

By: _____
Department Head

GRANTOR:

Kathryn Bazylewicz, Chief Marketing
Officer and VP Population Health

By: _____
Name: _____
Title: _____

APPROVED AS TO FORM:

Rachel Van Mullem
County Counsel

By: _____
Deputy County Counsel

APPROVED AS TO ACCOUNTING FORM:

Betsy M. Schaffer, CPA
Auditor-Controller

By: _____
Deputy

APPROVED AS TO FORM:

Risk Management

By: _____
Risk Management

EXHIBIT A STATEMENT OF WORK

1. Purpose:

A. Goal 1:

Further the partnership begun through PeRC to build healthier families and communities by promoting trauma-informed medical care, fortifying family resilience, and confronting the lingering shadow of ACEs. With CITED funding, COUNTY will initiate ECM services for children/youth (experiencing homelessness, at risk for avoidable hospital or emergency department utilization, and with Serious Mental Illness and/or Substance Use Disorder Needs). COUNTY already delivers a wide range of healthcare and other services to the underserved. Based on a caseload estimate of 40 per Lead Care Managers, an estimated 360 ECM clients will be served annually.

B. Goal 2:

Establishment of ECM services for justice involved. COUNTY has already partnered with other county departments in their design of pre-release, behavioral health linkages, and warm handoff services in anticipation of adding ECM. This will make connections with the extant system and create a model for subsequent local providers serving this population of focus. Beyond the 360 in goal one, an estimated 240 individuals will be served annually

C. Goal 3:

Establish the necessary teams, workflows, data analytics, reporting and infrastructure for local providers. By engaging with the larger Children's System of Care, including Child Welfare Services, Behavioral Wellness, Probation, and CBOs currently serving children and families, best practices will be identified to make ECM available to eligible children throughout the community and support others in becoming ECM providers by sharing tools and methods we design. As administrative hub, CH will lead these activities, using data to inform recommendations.

2. Duties of COUNTY

In collaboration with Cottage Health provide the following grant activities:

- A. Initiate Enhanced Care Management (ECM) services for children and youth who are experiencing homelessness, at risk for avoidable hospital or emergency department utilization, and with Serious Mental Illness and/or Substance Use Disorder Needs. PHD already provides a wide range of healthcare and other services to underserved populations, including tribal communities. Based on a caseload estimate of 40 per Lead Care Manager, an estimated 360 ECM clients will be served
- B. Establish ECM services for individuals involved in the justice system. SBCPHD has already collaborated with other county departments to design pre-release, behavioral health linkages, and warm handoff services in anticipation of adding ECM. This will facilitate connections with the existing system and create a model for other local providers serving this population. In addition to the 360 individuals in goal one, an estimated 240 individuals will be served annually.
- C. Establish the necessary teams, workflows, data analytics, reporting, and infrastructure for local providers. By engaging with the larger Children's System of Care, including Child Welfare Services, Behavioral Wellness, Probation, and CBOs currently serving children and families, best practices will be identified to make ECM available to eligible children throughout the community and support others in becoming ECM providers by sharing tools and methods we design.

3. Duties of GRANTOR:

- A. CH will use accepted accounting principles and timekeeping practices to allocate and monitor CITED fund usage.
- B. CH will regularly assess administrative expenditures, conduct audits, and maintain fiscal transparency to remain in strict adherence to grant guidance.
- C. As administrative hub, CH will lead the goal related activities referenced in this Exhibit A, using data to inform recommendations.

CITED GRANT APPLICATION

APPLICANT INFORMATION

The purpose of this section is to collect general information about the Applicant organization. Please complete all the information requested below.

1. Organization Name:

Cottage Health

2. Organization Type

Hospital or Hospital-based Physician Group
Hub Organization

3. Does the organization meet the definition of a clinic?

Qualified clinics include all Federally Qualified Health Centers (FQHCs) (including Tribal FQHCs and FQHC look-alikes), community clinics and free clinics licensed under Section 1204(a) of the Health and Safety Code, Indian health clinics, intermittent clinics, and rural health clinics (RHCs) located in California. Also included are health center or primary care clinic led consortia and associations, including: regional associations, health center-controlled networks, tribal and urban Indian consortia, and statewide associations.

No

4. Enter Employer Identification Number (EIN)

77-0431902

5. Organization Website

Not-for-Profit

Add: Entity Type

Not For Profit

6. Street Address:

400 W. Pueblo Street

7. State

CA

8. Zip code

93105

Primary Contact

9. First Name

Kristin

10. Last name

Tufvesson

11. Title:

Sr Vice President & CFO

12. Phone number

805-879-8941

13. Is the Primary Contact's address the same as the Organization's address?

Yes

- 14. Is the primary contact a third party entity completing the application on behalf of the organization? Is the primary contact a third party entity completing the application on behalf of the organization? option filter**
No

About This Organization

- 15. How long has this organization been in operation in California?**
11 or more years
- 16. What is this organization's average annual operating budget?**
\$10M or more (~\$800 million)

CITED ELIGIBILITY

- 1. How many MCPs does your organization currently contract or have an MOU with (or have an MOU if applicant is a Tribe, Indian Health Organization, or Urban Indian Organization) for ECM and/or one or more Community Supports?**
1
- 2. For each identified ECM Population of Focus or Community Support that would be supported through your requested CITED funding, select all the MCPs you contract with or have a letter of intent to contract with (or MOU/ other documentation for Tribes, Indian Health Programs, or Urban Indian Organizations). If the plan that you subcontract with operates in multiple counties, please ensure you provide the contract that represents all the counties in which you plan to utilize CITED funds.**
CenCal
- 3. Please upload the appropriate documentation to demonstrate current contracted status. All documentation provided should include, at minimum:**
- completed signature page including Applicant and MCP names (must be signed by both parties);
 - identification of populations of focus receiving ECM and / or which Community Supports will be supported with CITED funds;
 - identification of the counties where the service(s) will be offered
 - a date demonstrating the contract is current.
- 4. For each identified ECM Population of Focus or Community Support that would be supported through your requested CITED funding, select all the MCPs you contract with or have a letter of intent to contract with (or MOU/ other documentation for Tribes, Indian Health Programs, or Urban Indian Organizations). If the plan that you subcontract with operates in multiple counties, please ensure you provide the contract that represents all the counties in which you plan to utilize CITED funds.**
CenCal

DOCUMENT UPLOAD

- 5. Please upload the appropriate documentation to demonstrate current contracted status. All documentation provided should include, at minimum:**
- completed signature page including Applicant and MCP names (must be signed by both parties);
 - identification of populations of focus receiving ECM and / or which Community Supports will be supported with CITED funds;

- **identification of the counties where the service(s) will be offered**
- **a date demonstrating the contract is current.**

ADDITIONAL FUNDING CONSIDERATIONS

6. Please indicate if this organization participated in the following programs and the amounts awarded if applicable.

- Incentive Payment Program (IPP)
- PATH Cited Round 1
- PATH Cited Round 2
- Whole Person Care (WPC) pilot
- Data Exchange Framework (DxF) Grant Program
- PATH Technical Assistance (TA) Marketplace
- Other funding source
- No award has been received from any of these programs.

Please describe how you will ensure there is no duplication or supplanting of funding between this request and any other funding source, including those sources listed above or any other local, state, or federal funding source. (250 words max) (Currently at 248 words)

CITED grant partners Cottage Health (CH, Administrative Hub), the Santa Barbara County Public Health Department (SBCPHD), and American Indian Health and Services (AIH&S) are committed to ensuring there is no duplication or supplanting of funding between the requested CITED grant funds and any other funding source, including those sources listed above or any other local, state, or federal funding source.

As a county department operating FQHCs, SBCPHD functions under strict regulations and extensive oversight to comply with government funding restrictions, including preventing duplication and supplantation. Budget preparation and status are reviewed throughout the year at the departmental level and by the Auditor Controller and CEO's office. Each program is assigned unique tracking within the county's financial system, and all revenues and expenditures are reconciled by program. Federal audits provide additional oversight. SBCPHD was awarded \$950,499 in IPP funding to provide ECM to adults experiencing homelessness and adults at risk for avoidable hospitalization or emergency department care. CITED funding will allow SBCPHD to serve children and youth and justice involved adults.

Similarly, AIH&S, as an FQHC, operates on a zero-balance budget, ensuring the efficient and effective use of resources. In adherence to regulatory guidelines and organizational principles, AIH&S diligently avoids duplication or supplanting of funding between any request and other funding sources, including those at the local, state, or federal levels.

CH is subject to an annual external audit including payroll and expense systems. CH has a dedicated department and staff responsible for tracking grant expenditures against approved budgets.

ORGANIZATIONS APPLYING AS AN ADMINISTRATIVE HUB

7. Is this organization applying for CITED funds as an administrative hub on behalf of providers or CBOs? Is this organization applying for CITED funds as an administrative hub on behalf of providers or CBOs? (This is a dropdown with only yes or no options)

Yes

8. Please describe your approach to sharing CITED funds with contracted providers. 250 words or less (Currently at 219 words)

CH, AIH&S, and SBCPHD are uniquely positioned to implement ECM for children and youth and justice involved adults. Building upon our ongoing Pediatric Resiliency Collaborative (PeRC), which includes screening 3,524 children for Adverse Childhood Experiences (ACEs) and connecting 669 families to resources since 2019, CITED creates an opportunity to expand services through ECM.

CH will serve as administrative hub, leveraging expertise in managing substantial grants, subcontracting partners, and supporting providers to improve service delivery. With a proposed budget allocation of \$381,112.35, CH will expand the capacity of our Program and Evaluation Manager and PeRC Coordinator roles to facilitate CITED grant activities, including reporting, data analytics, further identification of service gaps, convening partners to facilitate shared learning, and using newly gained expertise to support subsequent ECM expansion in Santa Barbara County. 84% of funds will support direct service partners:

- AIH&S, a tribal health entity, will initiate ECM services to children, targeting emergency department care, homelessness, and mental health/substance use disorders. AIH&S's \$811,933.29 budget includes IT, office supplies, and salaries, aiming to serve 120 ECM clients annually.
- SBCPHD, operating five FQHC healthcare centers and two homeless shelter clinics, will extend ECM services to both children and justice-involved adults. Budgeting \$1,294,245.95, inclusive of provisions for training, IT equipment, renovations, and salaries, SBCPHD endeavors to expand its reach by 480 ECM clients annually.

9. Please describe how you will ensure that providers are not receiving duplicative funding. 250 words or less (currently at 209 words)

CH has experience with the Administrative Hub approach to grant participation, including through the ACEs Aware and PRACTICE grants, and has a Finance team who supports each grant. CH will use a standard invoicing methodology building upon the extensive, rigid, formal fiscal systems and controls already in place for CH, SBCPHD and AIH&S. Additionally, CH rigorously monitors and reviews all grant-related expenses, including our own expenditures, which are tracked in a specific cost center. Automated controls are in place that do not allow the same invoice to be paid twice. CH's Program Evaluation Manager and PeRC Coordinator expenses are extracted directly from the payroll system.

All three organizations are federally funded and subject to strict regulations and participate in external audits, which have revealed no findings of duplicative funding.

CH is committed to the responsible allocation of resources to our CITED grant partners, AIH&S and SBCPHD. To guarantee that these partners do not receive duplicative funding and foster a collaborative and trustworthy relationship, we prioritize transparency and proactive communication. In our dedication to transparency, we have established clear lines of communication with our grant partners. Specifically, we are fully aware of funding sources, such as the SBCPHD's IPP grant. CH remains in constant dialogue with our grant partners through regular partner meetings, ensuring that we are informed about all funding streams available to them and the intended purpose of

each. By maintaining an open and cooperative environment, we work together to prevent any potential overlap or duplication of funding.

10. Please describe how you will ensure your organization is not retaining funds for administrative activities beyond what is permissible as described in the PATH CITED Guidance. 250 words or less (Currently at 233 words)

CITED Grant budget does not include any of the items under "Unallowable Uses of Funding" and as experienced users of government funding, all three entities will use the funds for uses as stated in the budget. CH is committed to ensuring that we do not retain funds for non-permissible administrative activities. CH has served in a lead, facilitative role since the inception of PeRC, as the backbone organization. We are well-practiced at conducting maximal pass-through of funding to direct service providers. Through securing philanthropic donations, inclusion in CH's operating budget, and seeking grant funds, PeRC has successfully sustained the Program and Evaluation Manager and PeRC Coordinator roles for over five years. Their ongoing work in established activities is well-funded; the CITED grant will support only their ECM-related activities. Additionally, PeRC is actively implementing efforts to sustain its work, exploring additional reimbursement opportunities through CalAIM.

CH will use generally accepted accounting principles and timekeeping practices to allocate and monitor CITED fund usage. CH will regularly assess our administrative expenditures, conduct audits, and maintain fiscal transparency to remain in strict adherence to grant guidance. We are dedicated to responsible financial stewardship, enabling us to prioritize our resources for the benefit of our patients and community while complying with all applicable regulations and guidelines.

For the contracted providers, staff positions and their functions in delivering ECM are clearly delineated, with an emphasis on direct service provision.

11. Organizations applying as an Administrative Hub must submit at least two (2) letters of support from contracting providers in addition to a current MCP contract demonstrating the organization's authority to subcontract with providers of ECM and/or Community Supports. Hub organizations are encouraged to submit any other relevant documentation to support the CITED funding request.

Letter from AIH&S and SBCPHD

ECM

12. What percent of your budget will be allocated to ECM services?

100%

13. What percent of your budget will be allocated to Community Support services?

0%

14. ECM and Community Support Total Percentage (Total must equal 100%)

15. Do you provide, or plan to provide, ECM to any adult populations of focus using your CITED funds? Do you provide, or plan to provide, ECM to any adult populations of focus using your CITED funds? option filter

Yes

16. Please only select the ECM populations of focus which are currently served or will be served by this organization using CITED funds. Adult populations of focus:

- Adult individuals and families experiencing homelessness
- Adults at risk for avoidable hospital or emergency department (ED) utilization (formerly high utilizers)
- Adults with Serious Mental Illness (SMI) and/or Substance Use Disorder (SUD) Needs
- **Adult individuals transitioning from incarceration**
- Adults living in the community and at risk for long-term care (LTC) institutionalization
- Adult nursing facility residents transitioning to the community
- Adult Birth Equity Population of Focus

17. Do you provide, or plan to provide, ECM to any children/youth populations of focus using your CITED funds? Do you provide, or plan to provide, ECM to any children/youth populations of focus using your CITED funds? option filter

Yes

18. Please only select the ECM populations of focus which are currently served or will be served by this organization using CITED funds

- **Children/Youth experiencing homelessness**
- **Children/Youth at risk for avoidable hospital or emergency department (ED) utilization (formerly high utilizers)**
- **Children/Youth with Serious Mental Illness (SMI) and/or Substance Use Disorder (SUD) Needs**
- Children/Youth enrolled in California Children’s Services (CCS) / CCS Whole Child Model (WCM) with additional needs beyond the CCS qualifying condition
- Children/Youth involved in, or with a history of involvement in, child welfare (including foster care up to age 26)
- Children/Youth transitioning from incarceration
- Youth Birth Equity Population of Focus

19. Please enter the estimated percentage of the funding request that will be allocated to each ECM Population of Focus (POF). If you are requesting funding for one ECM, enter 100% in the corresponding field. If you are requesting funding for multiple ECM POFs, enter the percentage dedicated to each. The total percentage across all POFs must equal 100%.

2/3 for kids and 1/3 for justice involved

20. For each ECM POF, please enter the number of Medi-Cal Members your organization serves per year, and the number of additional Medi-Cal Members your organization intends to serve per year with CITED funding.

- Number of current members—0
- Number of additional members – 120 from AIH&S and 480 from SBCPHD = 600

COMMUNITY SUPPORTS

21. Community Supports are services provided by Medi-Cal managed care plans (MCPs) to address Medi-Cal Members’ health-related social needs, help them live healthier lives, and avoid costlier levels of care.

22. Do you provide, or plan to provide Community Supports using your CITED funds? Do you provide, or plan to provide Community Supports using your CITED funds? option filter No

23. For each Community Support, please enter the number of Medi-Cal Members your organization serves per year, and the number of additional Medi-Cal Members your organization intends to serve per year with CITED funding.

- **Number of current members - NA**
- **Number of additional members - NA**

PROJECT DESCRIPTION AND JUSTIFICATION

24. Please select all counties where funding will be spent:

Santa Barbara

25. Please enter the estimated percentage of the funding request that will be used in each county in California. If you are requesting funding for one county, enter 100% in the corresponding field. If you are requesting funding for multiple counties, enter the percentage dedicated to each. The total percentage across all counties must equal 100%

26. Please briefly describe the overall goals of your project should you receive CITED funding. *

250 words or less (Currently at 244 words)

Goal 1: Further the partnership begun through PeRC to build healthier families and communities by promoting trauma-informed medical care, fortifying family resilience, and confronting the lingering shadow of ACEs. With CITED funding, SBCPHD and AIH&S will initiate ECM services for children/youth (experiencing homelessness, at risk for avoidable hospital or emergency department utilization, and with Serious Mental Illness and/or Substance Use Disorder Needs). Both provider organizations already deliver a wide range of healthcare and other services to the underserved, including tribal populations. Based on a caseload estimate of 40 per Lead Care Managers, an estimated **360** ECM clients will be served annually.

Goal 2: Establishment of ECM services for justice involved. SBCPHD has already partnered with other county departments in their design of pre-release, behavioral health linkages, and warm handoff services in anticipation of adding ECM. This will make connections with the extant system and create a model for subsequent local providers serving this population of focus. Beyond the **360** in goal one, an estimated **240** individuals will be served annually.

Goal 3: Establish the necessary teams, workflows, data analytics, reporting and infrastructure for local providers. By engaging with the larger Children's System of Care, including Child Welfare Services, Behavioral Wellness, Probation, and CBOs currently serving children and families, best practices will be identified to make ECM available to eligible children throughout the community and support others in becoming ECM providers by sharing tools and methods we design. As administrative hub, CH will lead these activities, using data to inform recommendations.

27. Please describe how CITED funding will help your organization to: close gaps in the delivery of Enhanced Care Management (ECM) and expand capacity and impact of the organization's delivery of ECM. Please enter n/a if your organization does not provide ECM. *250 words or less (Currently at 245 words)

AIH&S will bolster its workforce to provide ECM to children, requiring a total of 4.5 full-time equivalents (FTEs), including the addition of 2.25 new FTEs and repurposing 2.25 existing FTEs. Essential hires consist of 1 FTE Licensed Clinical Social Worker (LCSW) Behavioral Health Professional, designated as the Project Manager for ECM implementation. A new 1 FTE ECM Administrator will provide administrative support, while a Psychiatrist at 0.25 FTE will offer specialized expertise. The organization will utilize its 2 existing FTE Case Managers for ECM activities, focusing on comprehensive care management. An existing Registered Dietician at 0.25 FTE will contribute to the ECM Team. Information Technology and office supplies are requisite for the new positions. Based on a caseload estimate of 40 per Lead Care Manager, an estimated **120** ECM clients will be served annually.

SBCPHD will deliver ECM services to an estimated **480** children and justice involved by hiring essential staff and reassigning one position. Plan includes:

- 3 new Health Services Aides: function as LCMs.
- 2 new Staff Nurses: carry half LCM caseload and clinically guide HSAs.
- 1 new Departmental Business Specialist II: revise electronic health record ECM module, provide ECM user support, address billing with MCP.
- 1 existing Administrative Office Professional II: temporarily reassigned to provide essential administrative, training, and onboarding support.

CenCal estimates **705** ECM currently eligible children/youth already assigned to AIH&S and SBCPHD and **500** ECM-eligible members released monthly from County Jails. We will reach nearly half of those eligible and expand in the future.

28. Please describe how CITED funding will help your organization to close gaps in the delivery of Community Supports and expand capacity and impact of the organization's delivery of Community Supports. Please enter n/a if your organization does not provide Community Supports. *250 words or less

NA

29. Please describe, in detail, your approach to sustaining approved activities after CITED funding ends. *250 words or less (249 words currently)

Using CenCal ECM fee rates, AIH&S and SBCPHD ran caseload calculations considering local engagement and turnover rates to ensure that revenue streams for ECM outreach and service delivery will cover costs, including inflation. In program design and fiscal analyses, we consulted the largest ECM provider in our county, Good Samaritan Shelter, regarding caseloads, key lessons learned in their first year, and fiscal modeling. Additionally, adding county positions requires demonstration of sustainability through conservative fiscal analysis. The Board of Supervisors requires that county agencies run scenarios to identify likely outcomes, assess risks, and demonstrate long-term sustainability of all new programs, especially those commencing with grant funding. Given these calculations, AIH&S and SBCPHD are confident they can sustain the positions added through CITED funding. CH already has over five years of sustaining PeRC and commits to doing so beyond ECM-specific funding, using our successful, sustainable funding streams of philanthropic donations, CH Community Benefit support, and public grants to continue convening partners and facilitate learning, utilizing data to inform systemic improvements. PeRC's noteworthy sustainability accomplishments include securing over \$4.5 million through ACEs Aware, California Department of Health Care Services, and Office of the Surgeon General.

Partners will also leverage technology for data gathering, in part by using FindHelp, a closed loop referral platform, which will give insight into areas for improvement. Responsibility for identification and timely resolution of billing issues is built into the staffing model, along with data gathering and analysis encompassing staff adherence to protocols, clinical outcomes, and fiscal performance.

30. Please describe your organization's history working in the communities you intend to serve through this CITED funding request. (Currently at 244 words)

Serving over 16,000 Medi-Cal beneficiaries, SBCPHD operates two homeless shelter clinics and five FQHC health care centers (HCCs), SBCPHD is caring for underserved in all three distinct county regions. Over two-thirds of patients identify as Hispanic/Latinx. SBCPHD offers additional services, such as the Comprehensive Perinatal Services Program, California Health and Disability Prevention Program, California Children's Services, and Every Woman

Counts. HCCs in all regions include women’s health and pediatrics clinics, serving incarcerated youth. The SBCPHD participates with county partners in PATH Justice Involved activities, anticipating our addition of ECM to this population. SBCPHD provides quality oversight of jail medical services.

AIH&S operates as a Patient Centered Medical Home, offering comprehensive services to all members of the Santa Barbara community. They serve over 7,875 individuals, 91% of whom live at or below the federal poverty level. A significant portion, 82%, are enrolled in Medicaid, and 8% are uninsured. AIH&S provides a range of services, including family practice, pediatrics, optometry, dental care, behavioral health counseling, substance use services, case management, and cultural support.

PeRC is a community partnership convened by CH, focused on expanding pediatric clinic ACEs screening and referral interventions to build resilience across the county. Additionally, CH is a safety net provider with 25% of patients insured by MediCal and over 50% of the 13,000 patients Cottage Children’s Medical Center serves each year insured by MediCal.

31. Please describe how CITED funding would enable your organization to address needs identified through PATH Collaborative Planning groups, Technical Assistance (TA) Marketplace, or other stakeholder engagement efforts related to the delivery of ECM/Community Supports. *250 words or less

This funding will address CenCal Gap Filling Plan Measure 1.2.5 for ECM workforce recruitment, hiring, and training, especially to engage hard to reach POFs. SBCPHD participation results, in part, from CenCal’s attention to measure 1.2.6 to assess the landscape of providers, foster relationships, and close identified health disparities. Their response specifically notes the role of the SBCPHD. Measure 1.2.7, Tribal Engagement, similarly identifies AIH&S as a key partner, given their operation of the sole formal tribal clinic within the county.

Through participation with the Tri-Counties Collaborative Planning and Implementation Group led by BluePath Health, we identified the following goals as priorities in our ECM planning:

- Increasing Uptake and Availability of ECM; Expanding the Provider Network. Addition of this hub and two ECM providers will do so.
- Strengthening Market Awareness—per agency descriptions above, PeRC and this collaborative are strongly positioned to increase awareness of ECM.
- Standardizing Referrals and Streamlining Authorizations—our systemic approach will support CenCal in doing so, consistent with DHCS updates.

CH plans to use vendors from the TA marketplace to bolster technology capacity for ACEs and trauma-informed care work. This includes assistance in developing infrastructure and data sharing capabilities, along with expanding data sharing and referral capacities with MCPs. Within PeRC, organizations will use FindHelp for ACEs and ECM work. While the group aims for widespread adoption of FindHelp, there is a need for more comprehensive understanding of its data sharing potential and integration capacities, for example, pushing data back into case management software or EHRs.

32. Please select all PATH-funded Collaborative Planning and Implementation (CPI) groups your organization currently participates in. If your organization is not participating in a CPI group, please select Not applicable. *

We participate in the Tri-Counties Collaborative Planning and Implementation Group led by BluePath Health.

CH and its clinic partners are aligned with the overarching goals articulated in the CalAIM statement and the strategic drivers outlined in the Tri-Counties CPI framework. The specific aim statement targets a 15% increase in eligible members authorized for ECM and Community Supports. Our collaborative efforts are strategically directed towards enhancing provider capacity and administration, addressing key drivers identified within the framework.

Through the utilization of the CITED grant, AIH&S and SBCPHD will augment their staffing and resource augmenting to effectively deliver the pediatric ECM benefit to children/youth (experiencing homelessness, at risk for avoidable hospital or emergency department utilization, and with Serious Mental Illness and/or Substance Use Disorder Needs) and justice involved adults . Furthermore, leveraging the capabilities of FindHelp, a closed-loop referral platform, we aim to tackle additional strategic drivers, including the expansion of communication channels for providers and members, as well as enhancing coordination of ECM.

33. Please indicate if the services your organization will be providing with the support of CITED funding are aligned with the DHCS Bold Goals below.

- Not applicable
- Close racial/ethnic disparities in well-child visits and immunizations
- Close maternity care disparity for Black & Native American persons
- Improve maternal & adolescent depression screening
- Improve follow up for mental health and substance use disorder
- Ensure all health plans exceed the 50th percentile for all children's preventative care measures

34. If CITED funding will not be used by your organization to provide services that are closely related to Bold Goals, please select Not applicable. For each Bold Goal selected, please describe how CITED funding will help address the goal. **(250 word max)**

- PerC has successfully implemented its model in seven pediatric clinics countywide, screening 3,524 children and their parents and referring more than 600 to community-based services. These clinics include 4 public health care centers, a private pediatric practice, a large multi-specialty clinic, and a tribal health FQHC and represent diverse practices in size, setting, and patient populations. PerC partners prioritize health equity in their strategic plan, utilizing approaches to break down barriers to access and increase service availability for the entire community. Culturally and linguistically competent services are provided by multicultural staff, with many being bilingual or trilingual (Spanish/English/Mixteco).
- AIH&S plans to serve children with behavioral health needs. The presence of a psychiatrist and a focus on comprehensive care management within the grant activities underscore a dedication to improving follow-up care for mental health and substance use disorders. By integrating mental health professionals into care teams and expanding staffing capacity, AIH&S aims to provide timely and effective follow-up services to individuals with mental health and substance use needs, reducing disparities in access to mental healthcare.
- Through the implementation of ECM and the expansion of staffing capacity, both AIH&S and SBCPHD seek to exceed the 50th percentile for children's preventative care measures. By increasing access to healthcare professionals and enhancing care management, the organizations aim to improve the delivery of preventative care services, ensuring that all children receive the necessary screenings, immunizations, and well-child visits for optimal health outcomes.

35. Please select all populations served by the organization: *

- LGBTQ+ individuals and families
- Seniors participating in Supplemental Social Security Program
- Persons with intellectual and developmental disabilities
- People with physical disabilities
- Survivors of domestic violence
- Tribal Populations
- Veterans
- Persons with low educational status

- Persons whose primary language is not English / Non-English speaking individuals
- People who are geographically hard to reach
- Other
- NA



Application Detail

Application ID	1100260
Submitted	Feb 15, 2024
Status	In progress
Applicant(s)	Ama Atiedu (aatiedu@sbch.org)
Program and cycle	CITED Application Round 3 CITED Application Round 3
Tags	No tags
Forms	CITED Terms and Conditions Round 3

CITED Terms and Conditions Round 3 (undefined)

Submitted on Sep 16, 2024

Ama Atiedu
aatiedu@sbch.org

Terms and Conditions

**California Providing Access and Transforming Health
Capacity and Infrastructure, Transition, Expansion and Development
Program**

Acknowledgement of Grant Terms and Conditions

As an express condition of receiving grant funds from the California Department of Health Care Services (“DHCS”) under the Capacity and Infrastructure, Transition, Expansion and Development (CITED) Program, which is part of the California Providing Access and Transforming Health (“PATH”) Initiative, the applicant named below hereby warrants and guarantees that it will comply with all applicable federal, state, and local laws and regulations, as well as with as the following terms and conditions:

Organization Name	Street address	State
Cottage Health	400 W Pueblo St	California
EIN	City	Zip code
77-0431902	Santa Barbara	93105

I. Role of Third-Party Administrator. DHCS has designated Public Consulting Group LLC as the Third-Party Administrator (TPA), to administer the grant program and to communicate with Applicant with respect to grant administration in connection with the CITED Program. Applicant understands that the TPA is acting solely as a third-party administrator on behalf of DHCS and is not liable or responsible for DHCS decisions or actions. Applicant hereby releases and holds harmless the TPA and its officers, agents, employees, representatives, and/or designees from and against any and all liability, actions, claims, demands, or suits, and all related costs, attorney fees, and expenses arising out of, or relating to the receipt of grant funds. DHCS shall not be liable to Applicant for any incidental, indirect, special, punitive, or consequential damages, including, but not limited to, such damages arising from any type or manner of commercial, business, or financial loss, even if PCG or DHCS had actual or constructive knowledge of the possibility of such damages and regardless of whether such damages were foreseeable. Applicant hereby releases and holds harmless DHCS and its officers, agents, employees, representatives, and/or designees from and against any and all liability, actions, claims, demands, or suits, and all related costs, attorney fees, and expenses arising out of, or relating to receipt of grant funds and associated activities in connection with CITED.

II. Eligibility.

In order to receive grant funds under this program, Applicants must be actively contracted with a Medi-Cal Managed Care Plan (MCP) or an MCP’s authorized subcontractor or other entity authorized to contract with for the provision of Enhanced Care Management (ECM) and/or Community Supports, or have a signed attestation letter from an MCP or an MCP’s authorized subcontractor or other entity authorized to contract with that they strongly intend to contract with the Applicant to provide ECM and/or Community Supports within the timeframe of these Terms and Conditions. If the intent

or ability to contract with an MCP has changed, ended, or been altered, Applicant must contact the TPA within twenty-four (24) hours to advise of this change. If there is no longer a contract as enumerated above or documented intent to contract, the grant may be terminated pursuant to Section VI, below.

III. Use of Funding.

- a. Project Plan. Applicant shall use grant funds exclusively to implement the project plan as outlined in Applicant's submitted and approved grant application dated _____.

Date

Feb 15, 2024

- b. Program Guidance and Conditions. In using the funds to implement the project plan, Applicant must follow all terms, conditions, and guidelines provided in the CITED Program guidance, found at www.ca-path.com, and in these Terms and Conditions.

- c. Changes and Modifications. Changes and modifications made to the submitted and approved grant application or to the program guidelines may be proposed by Applicant in writing and are subject to the approval of DHCS. No change or modification will be valid without the approval of DHCS.

- d. Expiration of Funds. It is mandated that all awarded funds must be completely expended by the last available progress report. Failure to comply with this requirement will result in the rescission of available funds.

IV. Grant Amount and Method of Payment.

- a. Grant Amount. The total grant amount awarded to Applicant shall not exceed \$_____.

Award Amount *

\$2,487,291.61 USD

Applicant acknowledges that the grant amount has been determined by DHCS and will not be negotiated with the TPA.

- b. Method of Payment. The TPA, on behalf of DHCS, shall cause payment to be disbursed to Applicant via direct deposit into Applicant's account within forty-five (45) calendar days following receipt and approval of Applicant's CITED Progress Report, provided Applicant has submitted all required information, forms, and documentation, including Applicant's signature on this Acknowledgement, required to facilitate payment.

c. Reliance on Provided Information. DHCS and the TPA are entitled to rely on the accuracy and completeness of information provided by Applicant in the disbursement of grant funds.

V. Reporting Requirements.

- a. Quarterly Reports. Applicant is required to submit quarterly progress reports to the TPA through secured data portal specified by DHCS and PCG every three (3) months until the final project milestones described in the submitted and approved grant application are met. Each progress report must include a detailed description of completed milestones, status of activities for that quarter, and any deviations from the agreed-upon milestones. Applicant should expect to include documentation providing proof that expenditures were made for permissible items and activities as described in the approved application. An applicant has a period of two (2) years to submit quarterly reports on achieved project milestones to receive payment.
- b. Reporting Schedule. The reporting schedule is as follows:

Reporting Period	Due Date
September 2024 - November 2024	December 16, 2024, at 5 PM PST
December 2024 - February 2025	March 14, 2025, at 5PM PST
March 2025 - May 2025	June 16, 2025, at 5PM PST
June 2025 - August 2025	September 15, 2025, at 5 PM PST
September 2025 - November 2025	December 15, 2025, at 5 PM PST
December 2026 - February 2026	March 16, 2026, at 5PM PST
March 2026 - May 2026	June 15, 2026, at 5PM PST
June 2026 - August 2026	September 14, 2026, at 5 PM PST

c. Failure to Report. If Applicant fails to submit any quarterly report within five (5) calendar days of the report becoming due, DHCS may terminate the grant pursuant to Section VI, below.

VI. Additional DHCS Terms and Conditions.

- a. Funding received through the CITED Program will not duplicate or supplant¹ funds received through previous CITED funding rounds; other programs or initiatives; or by other federal, state, or local funding sources.
- b. DHCS may, in its reasonable discretion, modify payment dates or amounts and will notify Applicant of any such changes in writing.
- c. DHCS or the TPA may conduct outreach to any Applicant to request additional information, ask questions, or seek clarification on information provided in a CITED Application or CITED Progress Report. If outreach is conducted by DHCS or the TPA, the applicant must respond within three (3) business days, unless an alternative timeline is approved by DHCS or the TPA. Failure to respond within this time frame may result in delay or deferment fund disbursement.

d. Applicant may be subject to audit or inquiry with respect to the receipt and use of grant funds at any time. Applicant must respond to inquiries, communications, and reasonable requests for additional information or documentation from DHCS or the TPA within one (1) business day of receipt and must provide any requested information within three (3) business days, unless an alternative timeline is approved by DHCS or the TPA.

e. Applicant must alert DHCS and the TPA within twenty-four (24) hours of identifying any circumstances that prevent carrying out any of the activities described in the submitted and approved grant application. In such cases, Applicant may be required to return unused funds to DHCS if an alternative solution cannot be reached.

f. All inquiries and notices relating to this Agreement should be directed to the representatives listed below:

Department of Health Care Services, Managed Care Quality & Monitoring	Public Consulting Group, LLC Applicant Name *
Division	Cottage Health
Branch Chief, Value-Based Quality Programs Branch	CITED Grant Manager
Attention: Michel Huizar	Senior Vice President Finance & CFO Attention: Katherine Thomas Attention *
Email: 1115path@dhcsca.gov	Email: cited@ca-path.com

Kristin Tufvesson

Email *

ktufvess@sbch.org

g. DHCS and the TPA may rely on the authority of the above-named individual to speak and act on behalf of Applicant. Either party may make changes to the information above by giving written notices to the other party within twenty-four (24) hours. Said changes shall not require an amendment to this Agreement. Applicant will retain all records and documentation related to the receipt and use of PATH grant funds, including all documentation used to support and detail expenditures, for no less than three (3) years beyond the date of final payment and will make such records available for complete inspection by DHCS upon request.

h. DHCS reserves the right to receive, use, and reproduce all reports and data produced, delivered, or generated by or about Applicant and its activities pursuant to this grant and may authorize others to do so without limitation, except as restricted by applicable law.

i. Applicant will not unlawfully discriminate against any person because of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran status in the conduct of any activity funded by DHCS.

j. Applicant expressly agrees and acknowledges that DHCS is a direct beneficiary of the Terms and Conditions with respect to all obligations and functions undertaken pursuant to the Terms and Conditions, and DHCS may directly enforce any and all provisions of the Terms and Conditions.

k. Applicants are required to provide a signed contract with an MCP or an MCP's authorized subcontractor or other entity authorized to contract with to provide ECM and/or Community Supports services. Alternatively, the Applicant may submit a signed agreement indicating that the MCP or the MCP's authorized subcontractor or other entity authorized to contract with intends to contract with the applicant for the provision of ECM and/or Community Supports.

l. If the applicant's existing ECM/Community Supports contract with an MCP or an MCP's authorized subcontractor or other entity authorized to contract with is terminated and the applicant does not have an approved contract or intent-to-contract with another MCP or an MCP's authorized subcontractor or other entity authorized to contract with, the applicant is precluded from receiving additional CITED funding until they provide the TPA and/or DHCS proof of an existing ECM/Community Supports contract or intent to contract with an MCP or an MCP's authorized subcontractor or other entity authorized to contract with.

VII. Termination. Upon written notice to Applicant, DHCS may terminate the grant award in any of the following circumstances:

- a. If Applicant fails to perform any one or more of the requirements set forth in these Terms and Conditions;
- b. If any of the information provided by Applicant to DHCS or to the TPA is untruthful, incomplete, or inaccurate;
- c. Upon Applicant's debarment or suspension by competent authority, if such debarment or suspension precludes any activity funded by the grant;
- d. Upon Applicant's indictment in any criminal proceeding;
- e. If Applicant is reasonably suspected of fraud, forgery, embezzlement, theft, or any other misuse of public funds;
- f. If DHCS does not receive or maintain sufficient funds to administer the program;
- g. If any restriction, limitation, or condition is enacted by Congress or by any other governing body or agency that impedes the funding or administration of the grant; or
- h. For any other purpose deemed necessary or advisable by DHCS.

In the case of early termination, Applicant may be subject to audit, recoupment by DHCS of unused or misused funds, and/or preclusion from receiving additional funding, dependent upon the circumstances of the termination.

IN WITNESS THEREOF, APPLICANT has executed this Acknowledgment as of the date set forth below.

Name: *

Kristin Tufvesson

Title: *

Senior Vice President Finance & CFO

Date

Sep 16, 2024

1. Other Federal, state or local funding sources and programs that are complementary to or enhance PATH funds will not be considered supplanted by PATH funds or duplicate reimbursement. If applicable, applicants must describe how similar or related services and activities supported by other Federal, state or local funding sources are complemented or enhanced by efforts funded by PATH. For example, if other funding 1) does not fully reimburse activities, 2) may allow additional/different populations to be served or 3) may allow additional/different services to be provided beyond those funded by PATH. To the extent otherwise allowable PATH activities are reimbursed by other Federal, state or local programs, PATH funding must not duplicate such reimbursement.

Kristin Tufvesson

Signed by Ama Atiedu on Sep 16, 2024



Application Detail

Application ID	1100260
Submitted	Feb 15, 2024
Status	In progress
Applicant(s)	Ama Atiedu (aatiedu@sbch.org)
Program and cycle	CITED Application Round 3 CITED Application Round 3
Tags	No tags
Forms	CITED Round 3 Approved Budget

CITED Round 3 Approved Budget (undefined)

Submitted on Oct 7, 2024

Ama Atiedu
aatiedu@sbch.org

Page 1



Approved CITED Budget: Overview

Please see your organization’s approved budget items. Please note that some budget items may have been reduced or removed in line with CITED guidelines or reasonableness standards. Your organization must refer to the approved budget for all progress reporting.

Final Approved Funding Amount

\$2,487,291.61 USD

Budget Activity 1

Budget Activity 1 Name

"Santa Barbara County Public Health Department (SBCPHD) Training"

Activity Description 1

"Training for all staff on topics such as:
 -Trauma Informed Care
 -Time Management and Organizational Skills Development Training
 -Customer Service Training
 -Training to Diffuse Challenging client/patient Interactions
 -Cultural Humility Training
 -Team-Based Care Training provided by UCSF
 Estimated at \$400 for each training x 6 trainings, Total \$2,400"

Activity 1 Requested Funding

\$16,800.00 USD

Activity 1 Approved Funding

\$16,800.00 USD

Activity Justification 1

No changes to requested amount.

Budget Activity 2

Budget Activity 2 Name

SBCPHD IT Equipment

Activity Description 2

"For each of the 6 new staff hired through CITED, we will be purchasing the following equipment for them to provide ECM Services effectively.
 1 Laptop- \$1,500
 1 Headset - \$50
 1 Docking Station - \$150
 2 External Monitors - \$250 (x2 = \$500)
 1 Cell Phone (for use in field)- \$40
 Total= \$2,240"

Activity 2 Requested Funding

\$13,440.00 USD

Activity 2 Approved Funding

\$13,440.00 USD

Activity Justification 2

No changes to requested amount.

Budget Activity 3

Budget Activity 3 Name

"SBCPHD Renovations"

Activity Description 3

Renovate 3 locations Countywide (Santa Maria, Lompoc, and Santa Barbara) for new ECM staff to have dedicated office space and ECM-only meeting space to support the provision of ECM services. Includes cubicles, partitions, shelving, hardwire to power, installation, etc. See attached invoice from recent similar renovation. Assuming small cost increase due to inflation.

Activity 3 Requested Funding

\$120,000.00 USD

Activity 3 Approved Funding

\$120,000.00 USD

Activity Justification 3

No changes to requested amount.

Budget Activity 4

Budget Activity 4 Name

"SBCPHD Office Equipment"

Activity Description 4

"For each of the 3 renovated locations Countywide (Santa Maria, Lompoc, and Santa Barbara) for new ECM staff to have office equipment to support the provision of ECM services.
 3 Desks - \$500 each
 3 Chairs - \$250 each
 1 Scanner - \$325
 1 Printer - \$350
 Total = \$2,925"

Activity 4 Requested Funding

\$8,775.00 USD

Activity 4 Approved Funding

\$8,775.00 USD

Activity Justification 4

No changes to requested amount.

Budget Activity 5

Budget Activity 5 Name

SBCPHD Findhelp

Activity Description 5

"Findhelp as a closed-loop referral platform:
- \$10,000/year for 1.5 years/18 months"

Activity Justification 5

No changes to requested amount.

Activity 5 Requested Funding

\$15,000.00 USD

Activity 5 Approved Funding

\$15,000.00 USD

Budget Activity 6

Budget Activity 6 Name

"SBCPHD
Indirect"

Activity Description 6

5% of the requested budget to cover indirect costs associated with implementing the project. $\$1,232,615.19 \times 0.05 = \$61,630.76$

Activity Justification 6

No changes to requested amount.

Activity 6 Requested Funding

No answer

Activity 6 Approved Funding

\$61,630.76 USD

Budget Activity 7

Budget Activity 7 Name

"AIH&S
IT Equipment "

Activity Description 7

"For each of the 3 new staff hired through CITED, we will be purchasing the following equipment for them to provide ECM Services effectively.

- 1 Laptop - \$1,620
- 1 Headset - \$100
- 1 Docking Stations - \$260
- 2 External Monitors - \$320 (x2 = \$640)
- 1 Cell Phone (for use in field)- \$700
- 1 Phone Charger & 1 Case - \$25
- 1 Mouse & 1 Mousepad - \$43
- 1 Laptop Bag - \$28
- Total= \$3,416"

Activity Justification 7

No changes to requested amount.

Activity 7 Requested Funding

\$10,248.00 USD

Activity 7 Approved Funding

\$10,248.00 USD

Budget Activity 8

Budget Activity 8 Name

"AIH&S
Office Equipment"

Activity Description 8

"For each of the 3 new ECM staff to have office equipment to support the provision of ECM services.

1 Desk - \$500 each

1 Chair - \$250 each

Total = \$700"

Activity 8 Requested Funding

\$2,250.00 USD

Activity 8 Approved Funding

\$2,250.00 USD

Activity Justification 8

No changes to requested amount.

Budget Activity 9

Budget Activity 9 Name

AIH&S Findhelp

Activity Description 9

"Findhelp as a closed-loop referall platform:
- \$10,000/year for 1.5 years/18 months"

Activity 9 Requested Funding

\$15,000.00 USD

Activity 9 Approved Funding

\$15,000.00 USD

Activity Justification 9

No changes to requested amount.

Budget Activity 10

Budget Activity 10 Name

"AIH&S
Indirect"

Activity Description10

5% of the requested budget to cover indirect costs associated with implementing the project. $773,269.80 \times 0.05 = 38,663.49$

Activity 10 Requested Funding

\$38,663.49 USD

Activity 10 Approved Funding

\$38,663.49 USD

Activity Justification 10

No changes to requested amount.

Budget Activity 11

Budget Activity Name 11

Cottage Findhelp

Activity Description 11

"Findhelp as a closed-loop referral platform:
 - \$75,000 for Year 1
 - \$85,000 for Year 2 (requesting half to cover a total of 1.5 years/18 months)"

Activity Justification11

No changes to requested amount.

Activity 11 Requested Funding

\$117,500.00 USD

Activity 11 Approved Funding

\$117,500.00 USD

Budget Activity 12

Budget Activity Name 12

Cottage Findhelp

Activity Description 12

Integration of Findhelp with local case management platforms for local CBOs receiving clinic referrals

Activity Justification 12

No changes to requested amount.

Activity 12 Requested Funding

\$40,000.00 USD

Activity 12 Approved Funding

\$40,000.00 USD

Budget Activity 13

Budget Activity Name 13

"Cottage Indirect"

Activity Description 13

5% of the requested budget to cover indirect costs associated with implementing the project. $\$362,964.14 \times 0.05 = \$18,148.21$

Activity Justification 13

No changes to requested amount.

Activity 13 Requested Funding

\$18,148.21 USD

Activity 13 Approved Funding

\$18,148.21 USD

Budget Activity 14

Budget Activity Name 14

Santa Barbara County Public Health Department (SBCPHD) - Health Services Aide

Activity Description14

3,0 of FTE(s)
 Annual Salary= \$51,324.89
 40% Fringe Rate
 18 months, New Hire

Activity Justification 14

No changes to requested amount.

Activity 14 Requested Funding

\$323,346.81 USD

Activity 14 Approved Funding

\$323,346.81 USD

Budget Activity 15

Budget Activity Name 15

SBCPHD - Staff Nurse

Activity Description 15

2.0 of FTE(s)
 Annual Salary= \$106,132.35
 40% Fringe Rate
 18 months, New Hire

Activity Justification 15

No changes to requested amount.

Activity 1 Requested Funding 15

\$445,755.87 USD

Activity 15 Approved Funding

\$445,755.87 USD

Budget Activity 16

Budget Activity Name 16

SBCPHD - Departmental Business Specialist II dbs)

Activity Description 16

1.0 of FTE(s)
 Annual Salary= \$103,658.00
 40% Fringe Rate
 18 months, New Hire

Activity Justification 16

No changes to requested amount.

Activity 16 Requested Funding

\$217,681.80 USD

Activity 16 Approved Funding

\$217,681.80 USD

Budget Activity 17

Budget Activity Name 17

SBCPHD - Administrattive Office Professional II

Activity Description17

1.0 of FTE(s)
 Annual Salary= \$68,395.92
 5% Fringe Rate
 12 months, Existing staff

Activity 17 Requested Funding

\$71,815.72 USD

Activity 17 Approved Funding

\$71,815.72 USD

Activity Justification 17

No changes to requested amount.

Budget Activity 18

Budget Activity Name 18

AIH&S - Project Manager

Activity Description 18

1.0 of FTE(s)
Annual Salary= \$118,560.00
18% Fringe Rate
18 months, New Hire

Activity 18 Requested Funding

\$209,851.20 USD

Activity 18 Approved Funding

\$209,851.20 USD

Activity Justification 18

No changes to requested amount.

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If this page is blank, please proceed to page 3.

Budget Activity 19

Budget Activity Name 19

AIH&S - Case Manager

Activity Description 19

2.0 of FTE(s)
Annual Salary= \$76,960.00
18% Fringe Rate
12 months, existing staff

Activity 19 Requested Funding

\$181,625.60 USD

Activity 19 Approved Funding

\$181,625.60 USD

Activity Justification 19

No changes to requested amount.

Budget Activity 20

Budget Activity Name 20

AIH&S - ECM Administrator

Activity Description 20

1.0 of FTE(s)
Annual Salary= \$97,760.00
18% Fringe Rate
18 months, New Hire

Activity 20 Requested Funding

\$173,035.20 USD

Activity 20 Approved Funding

\$173,035.20 USD

Activity Justification 20

No changes to requested amount.

Budget Activity 21

Budget Activity Name 21

AIH&S - Registered Dietician

Activity Description 21

0.25 of FTE(s)
 Annual Salary= \$89,440.00
 18% Fringe Rate
 12 months, existing staff

Activity 21 Requested Funding

\$26,384.80 USD

Activity 21 Approved Funding

\$26,384.80 USD

Activity Justification 21

No changes to requested amount.

Budget Activity 22

Budget Activity Name 22

AIH&S - Psychiatrist

Activity Description 22

0.25 of FTE(s)
 Annual Salary= \$350,000.00
 18% Fringe Rate
 18 months, New Hire

Activity 22 Requested Funding

\$154,875.00 USD

Activity 22 Approved Funding

\$154,875.00 USD

Activity Justification 22

No changes to requested amount.

Budget Activity 23

Budget Activity Name 23

Cottage - Program and Evaluation Manager

Activity Description 23

0.5 FTE(s)
 Annual Salary= \$152,160.87
 35% Fringe Rate
 12 months/ existing staff

Activity 23 Requested Funding

\$102,708.59 USD

Activity 23 Approved Funding

\$102,708.59 USD

Activity Justification 23

No changes to requested amount.

Budget Activity 24

Budget Activity Name 24

Cottage - Pediatric Resiliency Collaborative (PeRC) Coordinator

Activity Description 24

0.75 of FTE(s)
 Annual Salary= \$75,886.97
 35% Fringe Rate
 12 months, existing staff

Activity 24 Requested Funding

\$76,835.56 USD

Activity 24 Approved Funding

\$76,835.56 USD

Activity Justification 24

No changes to requested amount.

Budget Activity 25

Budget Activity Name 25

Cottage - Evaluator

Activity 25 description

0.2 of FTE(s)
 Annual Salary= \$96,000.00
 35% Fringe Rate
 12 months, existing staff

Activity 25 Requested Funding

\$25,920.00 USD

Activity 25 Approved Funding

\$25,920.00 USD

Activity Justification 25

No changes to requested amount.

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I acknowledge that I have reviewed my approved budget. *

True