

**Attachment A –
Olive Crest FY 2024-27
Board Contract
Second Amendment**

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

BETWEEN

COUNTY OF SANTA BARBARA

AND

OLIVE CREST

FOR

MENTAL HEALTH SERVICES

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

THIS SECOND AMENDMENT to the Agreement for Services of Independent Contractor, **BC No. 24-016**, is made by and between the **County of Santa Barbara** (County), a political subdivision of the State of California, and **Olive Crest** (Contractor), a California non-profit corporation with an address at 2130 E 4th St Ste 200, Santa Ana, CA 92705, for the continued provision of services specified herein (hereafter, Second Amendment).

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

WHEREAS, in June 2024, County and Contractor (collectively, the parties) entered into an Agreement for Services of Independent Contractor, BC No. 24-016, for the provision of mental health services to children and youth for a total maximum contract amount not to exceed \$1,500,000, inclusive of \$750,000 per fiscal year (FY), for the period of July 1, 2024, through June 30, 2026, (hereafter, the Agreement);

WHEREAS, in June 2025, the parties subsequently entered into a First Amendment to the Agreement to extend the term of the Agreement from June 30, 2026, to June 30, 2027; update certain standard terms in compliance with state and federal requirements; add seven locations for the care of children and youth placed in a Short-Term Residential Therapeutic Program (STRTP) outside of the County of Santa Barbara in the Counties of Orange and Riverside, commencing June 3, 2025; and add \$750,000 to the contract maximum for a revised, total maximum contract amount not to exceed \$2,250,000, inclusive of \$750,000 per fiscal year (FY 24-25, FY 25-26, and FY 26-27), for the period of July 1, 2024, through June 30, 2027, (hereafter, First Amendment); and

WHEREAS, the parties wish to make certain changes to the Agreement through this Second Amendment to update the member capacity in the program summary of both in-county and out-of-county Short-Term Residential Therapeutic Programs of Exhibit A-3 and Exhibit A-6, update the Schedule of Rates and Contract Maximum in Exhibit B-1, and decrease the contract amount by \$1,250,000 for a revised, total maximum contract amount not to exceed **\$1,000,000**, inclusive of \$750,000 for fiscal year (FY) 2024-2025, \$50,000 for FY 2025-2026, and \$200,000 for FY 2026-27, resulting in no change to the contract term of July 1, 2024, through June 30, 2027.

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

I. Delete Section 1, Program Summary, Second Paragraph of Exhibit A-3, Statement of Work: MHS, Short-Term Residential Therapeutic Program (STRTP), of the Agreement, and replace it with the following

1. PROGRAM SUMMARY.

Contractor shall operate a STRTP, certified by the California Department of Social Services, Community Care and Licensing Division. The Program shall serve one member, ages 12 through 24 years. The facility(ies) shall be certified as an STRTP.

II. Delete Section 1, Program Summary, Third Paragraph of Exhibit A-6, Statement of Work: MHS, Short-Term Residential Therapeutic Program, Out-of-County Placement, of the Agreement, and replace it with the following:

1. PROGRAM SUMMARY.

The Program shall serve one member, ages 12 through 24 years.

III. Delete Section II, Maximum Contract Amount, of Exhibit B, General Financial Provisions: MHS and replace it with the following:

II. MAXIMUM CONTRACT AMOUNT.

The Maximum Contract Amount of this Agreement shall not exceed **\$1,000,000**, inclusive of \$750,000 for FY 2024–2025, \$50,000 for FY 2025-2026 and \$200,000 for FY 2026–2027, in Mental Health funding, and shall consist of County, State, and/or Federal funds as shown in Exhibit B-1–MHS and subject to the provisions in Section I (Payment for Services). Notwithstanding any other provision of this Agreement, in no event shall County pay Contractor more than this Maximum Contract Amount for Contractor’s performance hereunder without a properly executed amendment.

THIS SECTION LEFT BLANK INTENTIONALLY.

EXHIBIT B-1-MHS SCHEDULE OF RATES AND CONTRACT MAXIMUM FOLLOWS.

IV. Delete Exhibit B-1-MHS, Schedule of Rates and Contract Maximum and replace it with the following:

EXHIBIT B-1- MHS

SCHEDULE OF RATES AND CONTRACT MAXIMUM

(Applicable to program(s) described in Exhibit(s) A-3, A-4, and A-6)

CONTRACTOR NAME: Olive Crest **FISCAL YEAR:** 2024-2025

Contracted Service	Service Type	Provider Group (4)	Practitioner Type	Full Time Equivalent Staffing	Hourly Rate (Avg. Direct Bill rate)	Medi-Cal Target Hours	Medi-Cal Contract Allocation
Medi-Cal Billable Services	Outpatient Services Fee-For-Service	Prescriber	Psychiatrist/ Contracted Psychiatrist	0.01	\$628.96	7	\$4,403
			Physicians Assistant	0.00	\$352.61	0	\$0
			Nurse Practitioner (& Cert Nurse Spec.)	0.20	\$390.96	143	\$55,907
		Non-Prescriber	Registered Nurse	0.00	\$319.35	0	\$0
			Licensed Vocational Nurse	0.00	\$167.76	0	\$0
			Licensed Psychiatric Technician	0.10	\$143.82	65	\$9,348
		Behavioral Health Provider	Psychologist/ Pre-licensed Psychologist	0.00	\$316.19	0	\$0
			LPHA / Assoc. LPHA	2.00	\$204.61	1,299	\$265,791
			Certified Peer Recovery Specialist	0.00	\$161.65	0	\$0
			Rehabilitation Specialists & Other Qualified Providers	4.00	\$153.95	2,598	\$399,968
				6.31		4,112	\$735,416

Contracted Service	Service Type	Reimbursement Method	Non-Medi-Cal Contract Allocation
Non-Medi-Cal Billable Services	Outpatient Non-Medi-Cal Services (1)	Fee-For Service	\$14,584
			\$14,584

Total Contract Maximum **\$750,000**

Contract Maximum by Program & Estimated Funding Sources							Total
Funding Sources (2)	Short-Term Residential Therapeutic Program	PROGRAM(S)					
		Medi-Cal Patient Revenue (3)	\$ 735,416				
Realignment Non-Medi-Cal Services	\$ 14,584					\$ 14,584	
TOTAL CONTRACT PAYABLE FY 24-25:		\$ -	\$ -	\$ -	\$ -	\$ 750,000	

CONTRACTOR SIGNATURE: Donald Verleur
 FISCAL SERVICES SIGNATURE: Christopher Jones

(1) Outpatient Non-Medi-Cal service allocation is provided to Non-Medi-Cal client services at the same Fee-For-Service rates as noted for Medi-Cal clients.
 (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. 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 Funds and SB 163.
 (4) Refer to taxonomy codes in Exhibit B-3 for billable practitioner types within each provider group.

EXHIBIT B-1- MHS
SCHEDULE OF RATES AND CONTRACT MAXIMUM
 (Applicable to program(s) described in Exhibit(s) A-3, A-4, and A-6)

CONTRACTOR NAME: Olive Crest **FISCAL YEAR:** 2025-2026

Contracted Service	Service Type	Provider Group (4)	Practitioner Type	Hourly Rate (Avg. Direct Bill rate)	Medi-Cal Contract Allocation
Medi-Cal Billable Services	Outpatient Services Fee-For-Service	Prescriber	Psychiatrist/ Contracted Psychiatrist	\$628.96	
			Physicians Assistant	\$352.61	
			Nurse Practitioner (& Cert Nurse Spec.)	\$390.96	
		Non-Prescriber	Registered Nurse	\$319.35	
			Licensed Vocational Nurse	\$167.76	
			Licensed Psychiatric Technician	\$143.82	
		Behavioral Health Provider	Psychologist/ Pre-licensed Psychologist	\$316.19	
			LPHA / Assoc. LPHA	\$204.61	
			Certified Peer Recovery Specialist	\$161.65	
			Rehabilitation Specialists & Other Qualified Providers	\$153.95	
					\$49,020
					\$49,020

Contracted Service	Service Type	Reimbursement Method	Non-Medi-Cal Contract Allocation
Non-Medi-Cal Billable Services	Outpatient Non-Medi-Cal Services (1)	Fee-For Service	\$980
			\$980
			\$50,000

Contract Maximum by Program & Estimated Funding Sources					Total
Funding Sources (2)	PROGRAM(S)				
	Short-Term Residential Therapeutic Program				
Medi-Cal Patient Revenue (3)	\$ 49,020				\$ 49,020
Realignment Non-Medi-Cal Services	\$ 980				\$ 980
TOTAL CONTRACT PAYABLE FY 25-26:	\$ 50,000	\$ -	\$ -	\$ -	\$ 50,000

Signed by:
 CONTRACTOR SIGNATURE: Donald Verleur
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 FISCAL SERVICES SIGNATURE: Christopher Jones
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- (1) Outpatient Non-Medi-Cal service allocation is intended to cover services provided to Non-Medi-Cal client services at the same Fee-For-Service rates as noted for Medi-Cal clients.
- (2) The Director or designee may reallocate between funding sources at his/her discretion during the term of the contract, including to utilize and maximize any additional funding or FFP provided by local, State, or Federal law, regulation, policy, procedure, or program. Reallocation of funding sources does not alter the Maximum Contract Amount and does not require an amendment to the contract.
- (3) Source of Medi-Cal match is State and Local Funds including but not limited to Realignment, MHSA, General Fund, Grants, Other Departmental Funds and SB 163.
- (4) Refer to taxonomy codes in Exhibit B-3 for billable practitioner types within each provider group.

EXHIBIT B-1- MHS

SCHEDULE OF RATES AND CONTRACT MAXIMUM

(Applicable to program(s) described in Exhibit(s) A-3, A-4, and A-6)

CONTRACTOR NAME:

Olive Crest

FISCAL YEAR: 2026-2027

Contracted Service	Service Type	Provider Group (4)	Practitioner Type	Hourly Rate (Avg. Direct Bill rate)	Medi-Cal Contract Allocation
Medi-Cal Billable Services	Outpatient Services Fee-For-Service	Prescriber	Psychiatrist/ Contracted Psychiatrist	\$628.96	
			Physicians Assistant	\$352.61	
			Nurse Practitioner (& Cert Nurse Spec.)	\$390.96	
		Non-Prescriber	Registered Nurse	\$319.35	
			Licensed Vocational Nurse	\$167.76	
			Licensed Psychiatric Technician	\$143.82	
		Behavioral Health Provider	Psychologist/ Pre-licensed Psychologist	\$316.19	
			LPHA / Assoc. LPHA	\$204.61	
			Certified Peer Recovery Specialist	\$161.65	
			Rehabilitation Specialists & Other Qualified Providers	\$153.95	
					\$196,078
					\$196,078

Contracted Service	Service Type	Reimbursement Method	Non-Medi-Cal Contract Allocation
Non-Medi-Cal Billable Services	Outpatient Non-Medi-Cal Services (1)	Fee-For Service	\$3,922
			\$3,922
			\$200,000

Contract Maximum by Program & Estimated Funding Sources					
Funding Sources (2)	PROGRAM(S)				Total
	Short-Term Residential Therapeutic Program				
Medi-Cal Patient Revenue (3)	\$ 196,078				\$ 196,078
Realignment Non-Medi-Cal Services	\$ 3,922				\$ 3,922
TOTAL CONTRACT PAYABLE FY 26-27:	\$ 200,000	\$ -	\$ -	\$ -	\$ 200,000

Signed by:
 CONTRACTOR SIGNATURE: Donald Verleur
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 FISCAL SERVICES SIGNATURE: Christopher Jones
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- (1) Outpatient Non-Medi-Cal service allocation is intended to cover services provided to Non-Medi-Cal client services at the same Fee-For-Service rates as noted for Medi-Cal clients.
- (2) The Director or designee may reallocate between funding sources at his/her discretion during the term of the contract, including to utilize and maximize any additional funding or FFP provided by local, State, or Federal law, regulation, policy, procedure, or program. Reallocation of funding sources does not alter the Maximum Contract Amount and does not require an amendment to the contract.
- (3) Source of Medi-Cal match is State and Local Funds including but not limited to Realignment, MHSA, General Fund, Grants, Other Departmental Funds and SB 163.
- (4) Refer to taxonomy codes in Exhibit B-3 for billable practitioner types within each provider group.

- V. Effectiveness.** The terms and provisions set forth in this Second Amendment shall modify and supersede all inconsistent terms and provisions set forth in the original Agreement and First Amendment. The terms and provisions of the original Agreement, except as expressly modified and superseded by the First Amendment and this Second Amendment, are ratified and confirmed and shall continue in full force and effect and shall continue to be legal, valid, binding, and enforceable obligations of the parties.
- VI. Execution of Counterparts.** This Second Amendment may be executed in any number of counterparts, and each of such counterparts shall for all purposes be deemed to be an original, and all such counterparts, or as many of them as the parties shall preserve undestroyed, shall together constitute one and the same instrument.

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SIGNATURE PAGE FOLLOWS

SIGNATURE PAGE

Second Amendment to Agreement for Services of Independent Contractor between the **County of Santa Barbara** and **Olive Crest**.

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

COUNTY OF SANTA BARBARA:

By: _____
BOB NELSON, CHAIR
BOARD OF SUPERVISORS
Date: _____

ATTEST:

MONA MIYASATO
COUNTY EXECUTIVE OFFICER
CLERK OF THE BOARD

By: _____
Deputy Clerk
Date: _____

CONTRACTOR:

OLIVE CREST

By: _____
Signed by: Donald Verleur
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Authorized Representative
Name: Donald Verleur
Title: CEO
Date: 5/22/2026

APPROVED AS TO FORM:

RACHEL VAN MULLEM
COUNTY COUNSEL

By: _____
Signed by: Bo Bai
48A252DEFFD3466...
Deputy County Counsel

APPROVED AS TO ACCOUNTING FORM:

BETSY M. SCHAFFER, CPA
AUDITOR-CONTROLLER

By: _____
Signed by: James Munro
02BA147EF6A84DE...
Deputy

RECOMMENDED FOR APPROVAL:

ANTONETTE NAVARRO, LMFT,
DIRECTOR, DEPARTMENT OF
BEHAVIORAL WELLNESS

By: _____
DocuSigned by: Antonette "Toni" Navarro
2095C5A16FE1474...
Director

APPROVED AS TO FORM:

MARISA KAHN, RISK MANAGER
RISK MANAGEMENT

By: _____
Signed by: Marisa Kahn
DF54F5C66F0C41A...
Risk Manager