Board Contract: 21-033

FIRST AMENDMENT TO THE AGREEMENT FOR SERVICES OF INDEPENDENT CONTRACTOR

Between

COUNTY OF SANTA BARBARA DEPARTMENT OF BEHAVIORAL WELLNESS AND

MENTAL HEALTH ASSOCIATION IN SANTA BARBARA COUNTY (DBA MENTAL WELLNESS CENTER)

FOR

MENTAL HEALTH SERVICES

FIRST AMENDMENT TO THE AGREEMENT FOR SERVICES OF INDEPENDENT CONTRACTOR

THIS FIRST AMENDMENT to the Agreement for Services of Independent Contractor, referenced as BC 21-033, by and between the County of Santa Barbara (County), a political subdivision of the state of California, and Mental Health Association in Santa Barbara County (DBA Mental Wellness Center) (Contractor), a California nonprofit, wherein Contractor agrees to provide, and County agrees to accept, the services specified herein (Agreement).

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

WHEREAS, on June 22, 2021, the County Board of Supervisors authorized the County to enter into an Agreement for Services of Independent Contractor, referred to as BC 21-033, for the provision of adult mental health services for a total contract maximum amount not to exceed \$6,471,853, inclusive of \$2,152,751 for FY 21-22, \$2,143,475 for FY 22-23, and \$2,175,627 for FY 23-24, for the period of July 1, 2021 through June 30, 2024, subject to annual budget appropriations; and

WHEREAS, through this First Amended Agreement, the County and Contractor wish to modify the staffing requirements for the Intensive Residential Programs and Polly's House to increase the full time equivalent (FTE) allocations for the Residential Administrator and Transportation Coordinator positions; update Exhibits B-1 and B-2 for FYs 22-23 and 23-24; and add \$964,958 to the contract for a new total contract maximum amount not to exceed \$7,436,811, inclusive of \$2,152,751 for FY 21-22, \$2,642,030 for FY 22-23, and \$2,642,030 for FY 23-24, for the period of July 1, 2021 through June 30, 2024.

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

- I. Delete Section 11 (Staffing) of Exhibit A-2 (Statement of Work: MHS Intensive Residential Programs) and replace it with the following:
 - 11. **STAFFING.** For all programs, Contractor shall abide by CCLD staffing requirements for coverage 24-hours a day, seven (7) days a week with on-call staff as necessary for emergency situations. Contractor shall adhere to the Program staffing requirements outlined below, unless otherwise approved by Behavioral Wellness in writing. Amendments to these requirements do not require a formal amendment to this Agreement, but shall be agreed to in writing by the Designated Representatives or Designees. Contractor shall employ staff in the positions listed following, at the approximate Full Time Equivalent (FTE) levels indicated for each program:
 - A. Alameda House Contractor shall establish and employ a service delivery team for the program, with 6.82 Full Time Equivalent (FTE) as follows:
 - i. 0.25 FTE Residential Service Manager, defined in section 11.D
 - ii. 1.0 FTE Residential Administrator, defined in section 11.E
 - iii. 3.75 FTE Direct Care Workers, defined in section 11.F
 - iv. 1.25 FTE Consumer Family Peer Direct Care Workers, defined in section 11.F

- v. 0.50 FTE Transportation Coordinator, defined in section 11.G
- vi. 0.05 FTE Operations Coordinator, defined in section 11.H
- vii. 0.02 FTE Clinician defined in section 11.I
- B. Casa Juana Maria Contractor shall establish and employ a service delivery team for the program, with 6.57 Full Time Equivalent (FTE) as follows:
 - i. 0.25 FTE Residential Service Manager, defined in section 11.D
 - ii. 1.0 FTE Residential Administrator, defined in section 11.E
 - iii. 3.75 FTE Direct Care Workers, defined in section 11.F
 - iv. 1.25 FTE Consumer Family Peer Direct Care Workers, defined in section 11.F.
 - v. 0.25 FTE Transportation Coordinator, defined in section 11.G
 - vi. 0.05 Operations Coordinator, defined in section 11.H
 - vii. 0.02 Clinician, defined in section 11.I
- C. **CG House** Contractor shall establish and employ a service delivery team for the program, with 6.82 Full Time Equivalent (FTE) as follows:
 - i. 0.25 FTE Residential Service Manager, defined in section 11.D
 - ii. 1.0 FTE Residential Administrator, defined in section 11.E
 - iii. 3.75 Direct Care Workers, defined in section 11.F
 - iv. 1.25 FTE Consumer Family Peer Direct Care Workers, defined in section 11.F.
 - v. 0.5 FTE Transportation Coordinator/Direct Care Worker, defined in section 11.G.
 - vi. 0.05 FTE Operations Coordinator, defined in section 11.H
 - vii. 0.02 FTE Clinician, defined in section 11.I.
- D. Residential Service Manager: This position shall act as the Program Supervisor and shall be a licensed/waivered/registered MHRS. The Residential Service Manager shall have a Master's degree in a related field and at least two years of direct experience working with adults with serious mental illness, including at least two years of residential and program management and/or supervisory experience in a mental health setting. In addition, the Residential Service Manager shall perform the following duties:
 - i. Provide overall Program Supervision;
 - ii. Develop and maintain facility standards of care congruent with the population seeking placement;
 - iii. Coordinate admissions with administrator and Clinician including supervising assessments, care plans and move-ins; and
 - iv. Oversee client admission interviews.
- E. Residential Administrator is the Adult Residential Facility (ARF) CCLD Administrator of the Program. The Residential Administrator shall have an ARF certification and at least two years of direct experience working with adults with

serious mental illness. The Residential Administrator shall perform the following duties:

- i. Coordinate and develop facility policies and procedures of care congruent with the population seeking placement with the Residential Service Manager;
- ii. Maintain the facility in compliance with all CCLD, local, state and federal requirements; and
- iii. Maintain sound practices and procedures for individual client care and individualized plans for clients.
- F. Direct Care Workers and Consumer Family Peer Direct Care Workers (including Direct Care with CCLD Administrator certification). Direct Care workers shall be at minimum Mental Health Workers, as defined in the Behavioral Wellness Credentialing Policy and Procedure 4.015. Direct Care workers shall perform the following duties:
 - i. Assist with activities of daily living, including passing out medication as assigned and following facility protocol, licensing regulation and guidelines for both client and employee safety;
 - ii. Follow safety guidelines in the facility, including universal precautions when providing care to clients; and
 - iii. Follow the individual service plan and individual program plan for each client.
 - iv. Those assigned as Consumer Family Peers should be individuals with lived experience or family/care givers of those with lived experience. Programming should include peer groups and activities that embody recovery, resilience, and wellness principles.
- G. Transportation Coordinator shall perform the following duties:
 - i. Provide transportation to clients as delegated by Residential Service Manager
 - ii. Follow safety guidelines in the facility;
 - iii. Follow the individual service plan and individual plan for each client; and
 - iv. Function as a team member, assisting coworkers as the need arises.
- H. Operations Coordinator: Meets criteria for Mental Health Rehabilitation Specialist (MHRS) and provides oversight and guidance to the teams on fulfilling all job duties and required programmatic requirements.
- I. Clinician: Licensed Clinical Social Worker (LCSW), Licensed Marriage and Family Therapist (LMFT), Licensed Professional Clinical Counselor (LPCC) or Clinical Psychologist licensed by state of California, current and in good standing. Minimum of three years working with mentally ill/substance abuse population.

II. Delete Section 11 (Staffing) of Exhibit A-6 (Statement of Work: MHS – Adult Housing Supports: Polly's House) and replace it with the following:

11. **STAFFING.** For all programs, Contractor shall abide by CCLD staffing requirements for coverage 24-hours per day, seven days per week with on-call staff as necessary for emergency situations. Contractor shall adhere to the Program staffing requirements

outlined below, unless otherwise approved by Behavioral Wellness in writing. Amendments to these requirements do not require a formal amendment to this Agreement, but shall be agreed to in writing by the Designated Representatives or Designees. Contractor shall employ staff in the positions listed following, at the approximate Full Time Equivalent (FTE) levels indicated for each program:

- A. **Polly's House** Contractor shall establish and employ a service delivery team for the program, with 7.97 Full Time Equivalent (FTE) as follows:
 - i. 0.25 FTE Residential Service Manager, defined in section 11.B
 - ii. 1.0 FTE Residential Administrator, defined in section 11.C
 - iii. 5.0 FTE Direct Care Workers, defined in section 11.D
 - iv. 1.40 FTE Consumer Family Peer Direct Care Workers, defined in section 11.D
 - v. 0.02 FTE Clinician, defined in section 11.E
 - vi. 0.05 FTE Operations Coordinator, defined in section 11.F
 - vii. 0.25 FTE Transportation Coordinator, defined in section 11.G.
- B. Residential Service Manager: This position shall act as the Program Supervisor and shall be a licensed/waivered/registered MHRS. The Program Supervisor shall have a Master's degree in a related field and at least two years of direct experience working with adults with serious mental illness, including at least two years of residential and program management and/or supervisory experience in a mental health setting. In addition, the Program Supervisor shall perform the following duties:
 - i. Provide overall Program Supervision;
 - ii. Develop and maintain facility standards of care congruent with the population seeking placement;
 - iii. Coordinate admissions with administrator and Clinician including supervising assessments, care plans and move-ins; and
 - iv. Oversee client admission interviews.
- C. Residential Administrator is the Adult Residential Facility (ARF)CCLD Administrator of the Program. The Residential Administrator shall have an ARF certification and at least two years of direct experience working with adults with serious mental illness. The Residential Administrator shall perform the following duties:
 - i. Coordinate and develop facility policies and procedures of care congruent with the population seeking placement with the Residential Service Manager;
 - ii. Maintain the facility in compliance with all CCLD, local, state and federal requirements; and
 - iii. Maintain sound practices and procedures for individual client care and individualized plans for clients.
- D. Direct Care Workers and Consumer Family Peer Direct Care Workers (including Direct Care with CCLD Administrator certification): Direct Care workers shall be

at minimum Mental Health Workers, as defined in the Behavioral Wellness Credentialing Policy and Procedure 4.015.

Direct Care workers shall perform the following duties:

- i. Assist with activities of daily living, including passing out medication as assigned and following facility protocol, licensing regulation and guidelines for both client and employee safety;
- ii. Coordinate peer activities that include groups, trainings, and networking for the residents and staff;
- iii. Follow safety guidelines in the facility, including universal precautions when providing care to clients; and
- iv. Follow the individual service plan and individual program plan for each client.
- v. Those assigned as Consumer Family Peers should be individuals with lived experience or family/care givers of those with lived experience. Programming should include peer groups and activities that embody recovery, resilience, and wellness principles.
- E. Clinician: Meets criteria as a Licensed Clinical Social Worker (LCSW), Licensed Marriage and Family Therapist (LMFT), Licensed Professional Clinical Counselor (LPCC) or Clinical Psychologist licensed by state of California, current and in good standing. Minimum of three years working with mentally ill/substance abuse population. The Clinician shall perform mental health services, as defined in section 3.
- F. Operations Coordinator: Meets criteria for Mental Health Rehabilitation Specialist (MHRS). The operations coordinator shall provide oversight and guidance to the teams on fulfilling all job duties and required regulatory and programmatic requirements.
- G. Transportation Coordinator shall perform the following duties:
 - i. Provide transportation to clients as delegated by Residential Service Manager
 - ii. Follow safety guidelines in the facility;
 - iii. Follow the individual service plan and individual plan for each client; and
 - iv. Function as a team member, assisting coworkers as the need arises.

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

II. MAXIMUM CONTRACT AMOUNT.

The Maximum Contract Amount of this Agreement shall not exceed \$2,152,751 for FY 21-22, \$2,642,030 for FY 22-23, and \$2,642,030 for FY 23-24 for a total contract amount not to exceed \$7,436,811 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.

IV. Delete Exhibit B-1 – MHS: Schedule of Rates and Contract Maximum applicable to FY 22-23 and replace it with the following:

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

CONTRACTOR NAME:	Mental Wellness Center	FISCAL YEAR:	2022-2023
		_	

	Contracted Services(1)	Service Type	Mode	Service Description	Unit of Service	Service Function Code	County Maximum Allowable Rate(4)
	Medi-Cal Billable Services	Outpatient Services	15	(Individual) Crisis Intervention	Minutes Minutes	41 70	\$3.47 \$5.17
r	Non -	Support	60	Life Support: Board and Care	N/A	40	Actual Cost
	Medi-Cal Billable Services	Services	60	Other Case Management	N/A	60	Actual Cost

	PROGRAMS								
		Recovery							
		Learning							
		Center,							
		Family	Peer Technology	Alameda		De La Vina	1		
	Casa Juana Maria	Advocate	Suite	House	CG House	House	Polly's House	TOTAL	
GROSS COST:	\$ 582,721	\$ 362,275	\$ 18,083	\$ 624,319	\$ 634,195	\$ 148,316	\$ 759,447	\$3,129,356	
LESS REVENUES COLLECTED BY CONTRACTOR:									
PATIENT FEES								\$ -	
CONTRIBUTIONS	\$ 88,632			\$ 88,632	\$ 88,632	\$ 58,938	\$ 162,492	\$ 487,326	
OTHER (LIST):								\$ -	
TOTAL CONTRACTOR REVENUES	\$ 88,632		\$ -	\$ 88,632	\$ 88,632	\$ 58,938	\$ 162,492	\$487,326	
MAXIMUM ANNUAL CONTRACT AMOUNT PAYA	\$ 494,089	\$ 362,275	\$ 18,083	\$ 535,687	\$ 545,563	\$ 89,378	\$ 596,955	\$ 2,642,030	

4,468				\$ 15,000	*	15,000		\$ 59,695	\$ 104,163 30,000
4,468								\$ 59,695	\$ 104,163
	\$	362,275	\$ 18,083	\$ 234,309	\$	238,753	\$ 89,378		\$ 942,799
19,621	<u> </u>			\$ 286,378	\$	291,810		\$ 537,260	\$ 1,565,068
	19,621	19,621	 \$ 362,275 \$						

	C Docu Skyned by:
CONTRACTOR SIGNATURE:	Annuaric Cameron
	—419C419S2[74]F —Doculigned by:
FISCAL SERVICES SIGNATURE:	Christie Boyer
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⁽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 after 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.

⁽⁴⁾ Director or designee may increase or remove the CMA based on operating needs. Modifications to the CMA do not after the Maximum Contract Amount and do not require an amendment to the contract.

⁽⁵⁾ The contract provides for flexible funds to cover client board and care costs for indigent clients. Contractor shall confirm client indigent status with County prior to placement in an indigent bed for costs to be reimbursable. Director or designee has the right to reallocate flexible funds between adult residential facilities and/or reallocate additional funds from other funding sources, subject to the contract maximum, should board and care costs exceed the amount estimated in the Exhibit B-1.

Delete Exhibit B-1 - MHS: Schedule of Rates and Contract Maximum applicable to V. FY 23-24 and replace it with the following:

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

CONTRACTOR NAME:	Mental Wellne	ss Center			FISCAL YEAR:	111111111111111111111111111111111111111	•••	
Contracted Services(1)	Service Type	Mode	Service Description	Unit of Service	Service Function Code	County Maximum Allowable Rate(4)		
Medi-Cal Billable Services	Outpatient	Outpatient 15 (Inc.		Minutes	41	\$3.54	1	
Medi-Cai biliable Selvices	Services	15	Crisis Intervention	Minutes	70	\$5.27]	
Non -	Support	60	Life Support: Board and Care	N/A	40	Actual Cost		
Medi-Cal Billable Services	Services	90	Other Case Management	N/A	60	Actual Cost		
	T		PRO	GRAMS				
	Casa Juana M	Recovery Learning Center, Family aria Advocate	Peer Technology Suite	Alameda House	CG House	De La Vina House	Polly's House	TOTAL
GROSS COST:		,721 \$ 362,275		\$ 624,319	·	\$ 148,316		\$3,129,356
LESS REVENUES COLLECTED BY CONTRACTOR		,,,,,,,	1. 10,000	1	1			и
PATIENT FEES								\$ -
CONTRIBUTIONS	\$ 88	.632		\$ 88,632	\$ 88,632	\$ 58,938	\$ 162,492	\$ 487,326
OTHER (LIST):								\$ -
TOTAL CONTRACTOR REVENUES	\$ 88	.632	\$ -	\$ 88,632				\$487,326
MAXIMUM ANNUAL CONTRACT AMOUNT F	\$ 494,	089 \$ 362,275	\$ 18,083	\$ 535,687	\$ 545,563	\$ 89,378	\$ 596,955	\$ 2,642,030

SOURCES OF FUNDING FOR MAXIMUM ANNUAL CONTRACT AMOUNT (2)									
MEDI-CAL (3)	\$	449,621			\$ 286,378	\$ 291,810		\$ 537,260	\$ 1,565,068
NON-MEDI-CAL			\$ 362,275	\$ 18,083	\$ 234,309	\$ 238,753	\$ 89,378		\$ 942,799
SUBSIDY	\$	44,468						\$ 59,696	\$ 104,164
OTHER(LIST): MHSA funded client flex funding (5)					\$ 15,000	\$ 15,000			\$ 30,000
MAXIMUM 23-24 CONTRACT AMOUNT PA	1 :	494,089	\$ 362,275	\$ 18.083	\$ 535,687	\$ 545.563	\$ 89,378	\$ 596,955	\$ 2,642,030

	— DocuSigned by:
CONTRACTOR SIGNATURE:	Anumarie Cameron
oon well on on one of the order.	4118C41D52E741F. DocuSigned by:
FISCAL SERVICES SIGNATURE:	Christie Boyer

⁽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 after 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.

⁽⁴⁾ Director or designee may increase or remove the CMA based on operating needs. Modifications to the CMA do not after the Maximum Contract Amount and do not require an amendment to the contract.

⁽⁵⁾ The contract provides for flexible funds to cover client board and care costs for indigent clients. Contractor shall confirm client indigent status with County prior to placement in an indigent bed for costs to be reimbursable. Director or designee has the right to reallocate flexible funds between adult residential facilities and/or reallocate additional funds from other funding sources, subject to the contract maximum, should board and care costs exceed the amount estimated in the Exhibit B-1.

VI. Delete Exhibit B-2 – Entity Budget by Program applicable to FY 22-23 and replace it with the following:

Santa Barbara County Department of Behavioral Wellness Contract Budget Packet Entity Budget By Program

AGENCY NAME: Mental Wellness Center

COUNTY FISCAL YEAR: 2022 2023

PNEA	COLUMN# 1	2	3	4	5	6	7	8	9
	I. REVENUE SOURCES:	COUNTY BEHAVIORAL WELLNESS PROGRAMS TOTALS	Casa Juana Maria	Alameda House	CG House	Polly's House	DLV	Recovery Learning Center, Family Advocate	Peer Technology Suite
1	Behavioral Wellness Funding	\$ 2,642,030	\$494,089	\$535,687	\$545,563	\$596,955	\$ 89,378	\$362,275	\$ 18,083
2	Total Other Revenue	\$ 2,642,030	\$494,089	\$535,687	\$545,563	\$596,955	\$ 89,378	\$362,275	\$ 18,083
3	II. Client and Third Party Revenues:								
4	4350;4455: Rent / Client Fees	\$ 58,938					\$ 58,938		
5	4350: Board and Care / SSI	\$ 428,388	\$ 88,632	\$ 88,632	\$ 88,632	\$162,492	<u> </u>		and the second s
6	Total Client and Third Party Revenues	\$ 487,326	\$ 88,632	\$ 88,632	\$ 88,632	\$162,492	\$ 58,938	S -	\$.
7	GROSS PROGRAM REVENUE BUDGET	\$ 3,129,356	\$582,721	\$624,319	\$634,195	\$759,447	\$148.316	\$362,275	\$ 18,083
8	III. DIRECT COSTS	COUNTY BEHAVIORAL WELLNESS PROGRAMS TOTALS	Casa Juana Maria	Alameda House	CG House	Poliy's House	DLV	Recovery Learning Center, Family Advocate	Peer Technology Suite
9	III.A. Salaries and Benefits Object Level								
10	6000-6001: Salaries (Complete Staffing Schedule)	\$ 1,720,908	\$347,844	\$359,804	\$359,804	\$414,820	\$ 35,948	\$187,139	
11	6128-6129 Benefits (Medical, Dental, Vision & 401k)	\$ 132,822	\$ 26,088	\$ 26,985	\$ 26,985	\$ 31,112	\$ 3,177	\$ 17,208	\$ 1,267
12	6123-6125-6127: Payroll Costs (FICA, SUTA & WC)	\$ 132,822	\$ 26,088	\$ 26,985	\$ 26,985	\$ 31,112	\$ 3,177	\$ 17,208	\$ 1,267
13	Salaries and Benefits Subtotal	\$ 1,986,552	\$400,020	\$413,774	\$413,774	\$477,044	\$ 42,302	\$221,555	\$ 18,083
4	III.B Services and Supplies Object Level								
15	6221: Rent / Mortgage	\$ 319,626	\$ 42,058	\$ 43,909	\$ 51,000	\$ 64,571	\$ 58,838	\$ 59,250	
16	6233: Supplies	\$ 40,147	\$ 7,827	\$ 6,280	\$ 6,675	\$ 15,000	\$ 4,365		
17	6234: Staff Expense / New Hire Testing	\$ 7,322	\$ 1,719	\$ 1,717	\$ 1,717	\$ 2,169			
18	6235: Telephone / Communication	\$ 31,537	\$ 5,621	\$ 6,303	\$ 7,384	\$ 9,269	\$ 2,960		
19	6237:Utilities	\$ 48,188	\$ 8,977	\$ 5,165	\$ 3,675	\$ 25,375	\$ 4,996		
20	6239: Repairs & Maintenance	\$ 69,759	\$ 9,344	\$ 13,799	\$ 17,147	\$ 24,934	\$ 4,535		
21	6245: Mileage (reim., fuel, repairs & registration)	\$ 16,045	\$ 2,343	\$ 6,445	\$ 6,242	\$ 1,015			
22	6263: Equipment & Furnishings	\$ 22,474	\$ 4,822	\$ 6,288	\$ 6,288	\$ 2,538	\$ 2,538		
23	6265: Insurance	\$ 25,530	\$ 5,218	\$ 5,218	\$ 5,218	\$ 7,318	\$ 2,558		
24	6267:Licenses	\$ 2,803	\$ 613	\$ 613	\$ 613	\$ 761	\$ 203		
25	6275:Professional Svcs/Client Support Counselors	\$ 38,951				S -	\$ 2,815	\$ 36,136	
26	6289: Miscellaneous	\$ 3,079	\$ 540	\$ 508	\$ 508	\$ 1,015	\$ 508		
27	6388: Depreciation	S -							
28	Services and Supplies Subtotal	\$ 625,461	\$ 89,082	\$ 96,245	\$106,467	\$153,965	\$ 84,316	\$ 95,386	
29	III.C. Client Expense Object Level Total (Not Medi-Cal Reimbursable)								
30	Food - SSI Funded	\$ 83,631	\$ 17,612	\$ 17.867	\$ 16.233	\$ 29,381	\$ 2,538	******	
31	MHSA Client Housing Support- Bad Debt	\$ 30,000	9 17,012	\$ 15,000	\$ 15,000	Q 20,001	2,550		
32	SUBTOTAL DIRECT COSTS	\$ 2,725,644	\$506,714	\$542,886	\$551,474	\$660,390	\$129,156	\$316,941	\$ 18,083
33	IV. INDIRECT COSTS	2,723,344	UUUU,I 14		VVV 1,71 7	3330,030	V.~V.,1.5V		
34	6999: Administrative Indirect Costs	\$ 403,712	\$ 76,007	\$ 81,433	\$ 82,721	\$ 99,057	\$ 19,160	\$ 45,334	
	(Reimbursement limited to 15%)	, ,,,,,,,	3 . 0.501	5 0.,.00			,	3 .0,50	
	GROSS DIRECT AND INDIRECT COSTS	\$ 3,129,356	\$582,721	\$624,319	\$634,195	\$759,447	\$148,316	\$362,275	\$ 18,083

VIII. Delete Exhibit B-2 – Entity Budget by Program applicable to FY 23-24 and replace it with the following:

Santa Barbara County Department of Behavioral Wellness Contract Budget Packet Entity Budget By Program

AGENCY NAME: Mental Wellness Center

COUNTY FISCAL YEAR: 2023 2024

Behavioral Wellness Funding	*SMT	COLUMN # 1	2	3	4	5	6	7	8	9
2 Total Other Revenue		I. REVENUE SOURCES:	BEHAVIORAL WELLNESS PROGRAMS			CG House	Polly's House	DLV	Learning Center, Family	Technology
Section Count Co	1	Behavioral Wellness Funding	\$ 2,642,030	\$494,089	\$535,687	\$545,563	\$596,955	\$ 89,378	\$362,275	\$ 18,083
4 4350.4455 Rent / Client Fees \$ \$8,938 \$ 428,388 \$8,632 \$8,632 \$8,632 \$8,632 \$5,038 \$ \$ \$ \$ \$ \$ \$ \$ \$	2	Total Other Revenue	\$ 2,642,030	\$494,089	\$ 535,687	\$545,563	\$596,955	\$ 89,378	\$362,275	\$ 18,083
\$ 4350. Board and Care / SSI \$ 428,388 \$ 88,632 \$ 88,632 \$ 88,632 \$ 162,492 \$ 5 6 7 total Client and Third Party Revenues \$ 487,326 \$ 88,632 \$ 88,632 \$ 88,632 \$ 162,492 \$ 5 5,938 \$ 5 7 GROSS PROGRAM REVENUE BUDGET \$ 3,129,356 \$ 588,2721 \$ 624,319 \$ 634,195 \$ 759,447 \$ 148,316 \$ 362,275 \$ 18,01 \$ 11.0 IRECT COSTS \$ 20,000 \$ 20	3	II. Client and Third Party Revenues:								
Food Country	4	4350;4455: Rent / Client Fees	\$ 58,938					\$ 58,938		
III. DIRECT COSTS	5	4350: Board and Care / SSI	\$ 428,388	\$ 88,632	\$ 88,632	\$ 88,632	\$162,492	\$ -		
BEHAVIORAL WELLINESS PROGRAMS TOTALS T	6	Total Client and Third Party Revenues	\$ 487,326	\$ 88,632	\$ 88,632	\$ 88,632	\$162,492	\$ 58,938	\$ -	\$
III. DIRECT COSTS	7	GROSS PROGRAM REVENUE BUDGET	\$ 3,129,356	\$582,721	\$624,319	\$634,195	\$759,447	\$148,316	\$362,275	\$ 18,083
III. DIRECT COSTS	-									
0000-8001: Salaries (Complete Staffing Schedule)	}	III. DIRECT COSTS	BEHAVIORAL WELLNESS PROGRAMS	1		CG House	Polly's House	DLV	Learning Center, Family	Technology
11 6128-6129 Benefits (Medical, Dental, Vision & 401k) \$ 132,822 \$ 26,088 \$ 26,985 \$ 31,112 \$ 3,177 \$ 17,208 \$ 1.2 5123-6125-6127 Payroll Costs (FicA, SUTA & WC) \$ 132,822 \$ 26,088 \$ 26,985 \$ 26,985 \$ 31,112 \$ 3,177 \$ 17,208 \$ 1.2 5123-6125-6127 Payroll Costs (FicA, SUTA & WC) \$ 132,822 \$ 26,088 \$ 26,985 \$ 26,985 \$ 31,112 \$ 3,177 \$ 17,208 \$ 1.2 51,208 \$ 1.2 1	}	III.A. Salaries and Benefits Object Level								
12 6123-6125-6127: Payroll Costs (FICA, SUTA & WC) \$ 132,822 \$ 26,088 \$ 26,985 \$ 26,985 \$ 31,112 \$ 3,177 \$ 17,208 \$ 1.2 \$ 3,177 \$ 1,208 \$ 1.2 \$ 3,177 \$ 1,208 \$ 1.2 \$ 3,177 \$ 1,208 \$ 1.2 \$ 3,177 \$ 1,208 \$ 1.2 \$ 3,177 \$ 1,208 \$ 1.2 \$ 3,177 \$ 1,208 \$ 1.2 \$ 3,177 \$ 1,208 \$ 1.2 \$ 3,177 \$ 1,208 \$ 1.2 \$ 3,177 \$ 1,208 \$ 1.2 \$ 3,177 \$ 1,208 \$ 1.2 \$ 3,177 \$ 1,208 \$ 1.2 \$ 3,177 \$ 1,208 \$ 1.2 \$ 3,177 \$ 1,208 \$ 3,177 \$ 1,208 \$ 3,177 \$ 1,208 \$ 3,177 \$ 1,208 \$ 3,177 \$ 1,208 \$ 3,177 \$ 1,208 \$ 3,177 \$ 1,208 \$ 3,177 \$ 1,208 \$ 3,177 \$ 1,208 \$ 3,177 \$ 1,208 \$ 3,177 \$ 1,208 \$ 3,177 \$ 1,208 \$ 3,177 \$ 1,208 \$ 3,177 \$ 1,208 \$ 3,177 \$ 1,208 \$ 3,177 \$ 1,208 \$ 3,177 \$ 1,208 \$ 3,209	10	6000-6001: Salaries (Complete Staffing Schedule)	\$ 1,720,908	\$347,844	\$359,804		\$414,820	\$ 35,948	\$187,139	\$ 15,54
Salaries and Benefits Subtotal \$ 1,986,552 \$400,020 \$413,774 \$413,774 \$477,044 \$42,302 \$221,555 \$18,101	11	6128-6129 Benefits (Medical, Dental, Vision & 401k)	\$ 132,822	\$ 26,088	\$ 26,985	\$ 26,985	\$ 31,112	\$ 3,177	\$ 17,208	\$ 1,26
III.B Services and Supplies Object Level	12	6123-6125-6127: Payroll Costs (FICA, SUTA & WC)	\$ 132,822	\$ 26,088	\$ 26,985	\$ 26,985	\$ 31,112	\$ 3,177	\$ 17,208	\$ 1.26
\$ 319,626 \$ 42.058 \$ 43.909 \$ 51.000 \$ 64.571 \$ 58.836 \$ 59.250 \$ 16 6233: Supplies \$ 40.147 \$ 7.827 \$ 6.280 \$ 6.675 \$ 15.000 \$ 4.365 \$ 17 6234: Staff Expense / New Hire Testing \$ 7.322 \$ 1.719 \$ 1.717 \$ 1.717 \$ 2.169 \$ 1.6633: Supplies \$ 48.188 \$ 8.977 \$ 5.621 \$ 6.303 \$ 7.384 \$ 9.269 \$ 2.960 \$ 19 6237: Utilities \$ 48.188 \$ 8.977 \$ 5.165 \$ 3.675 \$ 25.375 \$ 4.996 \$ 19 6237: Utilities \$ 48.188 \$ 8.977 \$ 5.165 \$ 3.675 \$ 25.375 \$ 4.996 \$ 19 6237: Utilities \$ 48.188 \$ 8.977 \$ 5.165 \$ 3.675 \$ 25.375 \$ 4.996 \$ 19 6237: Utilities \$ 48.188 \$ 8.977 \$ 5.165 \$ 3.675 \$ 25.375 \$ 4.996 \$ 10 6239: Repairs & Maintenance \$ 69,769 \$ 9.344 \$ 13.799 \$ 17.147 \$ 24.934 \$ 4.535 \$ 10 6239: Repairs & Furnishings \$ 22.474 \$ 4.822 \$ 6.245 \$ 1.016 \$ 10 625	13	Salaries and Benefits Subtotal	\$ 1,986,552	\$400,020	\$413,774	\$413,774	\$477,044	\$ 42,302	\$ 221,555	\$ 18,08.
16 6233 Supplies	14	III.B Services and Supplies Object Level								
17 6234 Staff Expense / New Hire Testing S	15	6221: Rent / Mortgage	\$ 319,626	\$ 42,058	\$ 43,909	\$ 51,000	\$ 64,571	\$ 58,838	\$ 59,250	
18 6235 Telephone / Communication \$ 31,537 \$ 5,621 \$ 6,303 \$ 7,384 \$ 9,269 \$ 2,960	16	6233: Supplies	\$ 40,147	\$ 7,827	\$ 6,280	\$ 6,675	\$ 15,000	\$ 4,365		
19 6237:Utilities	17	6234: Staff Expense / New Hire Testing	\$ 7,322	\$ 1,719	\$ 1,717	\$ 1,717	\$ 2,169			
20 6239: Repairs & Maintenance \$ 69,759 \$ 9,344 \$ 13,799 \$ 17,147 \$ 24,934 \$ 4,535 21 6245: Mileage (reim., fuel, repairs & registration) \$ 16,045 \$ 2,343 \$ 6,445 \$ 6,242 \$ 1,015 22 6263: Equipment & Furnishings \$ 22,474 \$ 4,822 \$ 6,288 \$ 6,288 \$ 2,538 \$ 2,538 23 6265: Insurance \$ 25,530 \$ 5,218 \$ 5,218 \$ 5,218 \$ 7,318 \$ 2,558 24 6267: Licenses \$ 2,803 \$ 613 \$ 613 \$ 613 \$ 761 \$ 203 \$ 2275: Professional Syca/Client Support Counselors \$ 38,951 \$ 5,000	18	6235: Telephone / Communication	S 31,537	\$ 5,621	\$ 6,303	\$ 7,384	\$ 9,269	\$ 2,960		
1	19	6237:Utilities	\$ 48,188	\$ 8,977	\$ 5,165	\$ 3,675	\$ 25,375	\$ 4,996		
22 6263: Equipment & Furnishings \$ 22,474 \$ 4,822 \$ 6,288 \$ 6,288 \$ 2,538 \$ 2,538 \$ 2,538 \$ 23 6265: Insurance \$ 25,530 \$ 5,218 \$ 5,218 \$ 5,218 \$ 7,318 \$ 2,558 \$ 24 6267: Licenses \$ 2,803 \$ 613 \$ 613 \$ 613 \$ 761 \$ 203 \$ 25 6275: Professional Sycs/Client Support Counselors \$ 38,951 \$ 5,218 \$ 5,218 \$ 5,218 \$ 7,318 \$ 2,558 \$ 2,538 \$ 2,	20	6239: Repairs & Maintenance	\$ 69,759	\$ 9,344	\$ 13,799	\$ 17,147	\$ 24,934	\$ 4,535		
23 6265: Insurance \$ 25,530 \$ 5,218 \$ 5,218 \$ 5,218 \$ 7,318 \$ 2,558 \$ 2,627 10 10 10 10 10 10 10 1	21	6245: Mileage (reim., fuel, repairs & registration)	\$ 16,045	\$ 2,343	\$ 6,445	\$ 6,242	\$ 1,015			
24 6267:Licenses \$ 2,803 \$ 613 \$ 613 \$ 761 \$ 203 25 6276:Professional Sycs/Client Support Counselors \$ 38,951 \$ 5 - \$ 2,815 \$ 36,136 26 6289: Miscellaneous \$ 3,079 \$ 540 \$ 508 \$ 508 \$ 1,015 \$ 508 27 6388: Depreciation \$ 5 - \$ 2,815 \$ 36,136 28 Services and Supplies Subtotal \$ 625,461 \$ 89,082 \$ 96,245 \$ 106,467 \$ 153,965 \$ 84,316 \$ 95,386 29 III.C. Client Expense Object Level Total (Not Medi-Cal Reimbursable) 30 Food - SSI Funded \$ 83,631 \$ 17,612 \$ 17,867 \$ 16,233 \$ 29,381 \$ 2,538 31 MHSA Client Housing Support-Bad Debt \$ 30,000 \$ 15,000 \$ 15,000 32 SUBTOTAL DIRECT COSTS \$ 2,725,644 \$506,714 \$542,886 \$551,474 \$660,390 \$129,156 \$316,941 \$ 18,60 46 6999: Administrative Indirect Costs (Reimbursement limited to 15%) \$ 403,712 \$ 76,007 \$ 81,433 \$ 82,721 \$ 99,057 \$ 19,160 \$ 45,334 \$ 18,000 \$ 10,	22	6263: Equipment & Furnishings	\$ 22,474	\$ 4,822	\$ 6,288	\$ 6,288	\$ 2,538	\$ 2,538		
Second	23	6265: Insurance	\$ 25,530	\$ 5,218	\$ 5,218	\$ 5,218	\$ 7,318	\$ 2,558		
\$ 3,079 \$ 540 \$ 508 \$ 508 \$ 1,015 \$ 508 \$ 1,015 \$ 508 \$ 1,015 \$ 508 \$ 1,015 \$ 508 \$ 1,015 \$ 508 \$ 1,015 \$ 508 \$ 1,015 \$ 1,	24		\$ 2,803	\$ 613	\$ 613	\$ 613	\$ 761	\$ 203		
Services and Supplies Subtotal	25	6275:Professional Svcs/Client Support Counselors	\$ 38,951				5	\$ 2,815	\$ 36,136	
Services and Supplies Subtotal \$ 625,461 \$ 89,082 \$ 96,245 \$ \$106,467 \$ \$153,965 \$ 84,316 \$ 95,386	26	6289: Miscellaneous	\$ 3.079	\$ 540	\$ 508	\$ 508	\$ 1,015	\$ 508		
III.C. Client Expense Object Level Total (Not Medi-Cal Reimbursable)	27	6388: Depreciation	\$.							
Medi-Cal Reimbursable S 83,631 S 17,612 S 17,867 S 16,233 S 29,381 S 2,538 S 2,538 S S S S S S S S S	28	Services and Supplies Subtotal	\$ 625,461	\$ 89,082	\$ 96,245	\$106,467	\$153,965	\$ 84,316	\$ 95,386	
Food - SSI Funded \$ 83,631 \$ 17,612 \$ 17,867 \$ 16,233 \$ 29,381 \$ 2,538	29									
31 MHSA Client Housing Support- Bad Debt \$ 30,000 \$ 15,000 \$ 15,000 \$ 15,000 \$ 15,000 \$ 129,156 \$ 316,941 \$ 18,000 \$ 10,	30	<u> </u>	\$ 83 631	S 17,612	\$ 17,867	\$ 16,233	\$ 29,381	\$ 2,538		
\$2 SUBTOTAL DIRECT COSTS \$ 2,725,644 \$506,714 \$542,886 \$551,474 \$660,390 \$129,156 \$316,941 \$ 18,0 \$ \$3 IV. INDIRECT COSTS \$ 403,712 \$ 76,007 \$ 81,433 \$ 82,721 \$ 99,057 \$ 19,160 \$ 45,334 \$ \$4 CPOSS DIRECT AND INDIRECT COSTS		1	HINCON WILLIAMS CONTROL MADE AND STREET STREET, THE PARTY OF THE PARTY							
33 IV. INDIRECT COSTS 4 6999: Administrative Indirect Costs (Reimbursement limited to 15%) 5 403,712 \$ 76,007 \$ 81,433 \$ 82,721 \$ 99,057 \$ 19,160 \$ 45,334 \$	_			\$506.714	TO P. COLUMN THE CO. III. CO. CO.	THE RESERVE OF THE PARTY OF THE	\$660.390	\$129,156	\$316.941	\$ 18.08
6999: Administrative Indirect Costs (Reimbursement limited to 15%) \$ 403,712 \$ 76,007 \$ 81,433 \$ 82,721 \$ 99,057 \$ 19,160 \$ 45,334 \$	-	1								
(Reimbursement limited to 15%) 3 403,712 3 76,007 3 61,433 3 62,721 3 99,057 3 15,160 3 49,334 3										_
CROSS DIPECT AND INDIPECT COSTS	4		\$ 403,712	\$ 76,007	\$ 81,433	\$ 82,721	\$ 99,057	\$ 19,160	\$ 45,334	5
	5		\$ 3,129,356	\$ 582,721	\$624,319	\$634.195	\$ 759.447	5148.316	\$362,275	5 18 083

- IX. Effectiveness. The terms and provisions set forth in this First Amended Agreement shall modify and supersede all inconsistent terms and provisions set forth in the Agreement. The terms and provisions of the Agreement, except as expressly modified and superseded by this First Amended Agreement, 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.
- X. Execution of Counterparts. This First Amended 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.

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SIGNATURE PAGE

First Amendment to the Agreement for Services of Independent Contractor between the County of Santa Barbara and Mental Health Association in Santa Barbara County dba Mental

/ellness Center.		
N WITNESS WHEREOF, the parties have be effective on the date executed by COUN		First Amendment to the Agreement
· · · · · · · · · · · · · · · · · · ·		Y OF SANTA BARBARA:
	By:	JOAN HARTMANN, CHAIR BOARD OF SUPERVISORS
	Date:	10-4-22
ATTEST:	CONTRA	ACTOR:
MONA MIYASATO COUNTY EXECUTIVE OFFICER CLERK OF THE BOARD	SANTA I	L HEALTH ASSOCIATION IN BARBARA COUNTY DBA MENTAL ESS CENTER
By: She Le Ole Curra Deputy Clerk	By:	Docusigned by: [Innman: (ameron
Date: 10-4-27	Name:	Annmarie Cameron
	— Title:	CEO
	Date:	9/20/2022
APPROVED AS TO FORM:	APPROV	VED AS TO ACCOUNTING FORM:
RACHEL VAN MULLEM		M. SCHAFFER, CPA
COUNTY COUNSEL	AUDITO	R-CONTROLLER
By: Bo Ba CAPTODS445C0F408. Deputy County Counsel	_ By:	Pocusigned by: Robert Gus De25019E2AF094DE Deputy
RECOMMENDED FOR APPROVAL: ANTONETTE NAVARRO, LMFT DIRECTOR, DEPARTMENT OF BEHAVIORAL WELLNESS		ED AS TO INSURANCE FORM:
By: Antoutte "Toni" Navarro 2095C5A16FE1474 DIrector	Ву:	Occusigned by: Gry Millian OCCADACTEGACATO KISK Manager