TO AGREEMENT FOR SERVICES OF INDEPENDENT CONTRACTOR

This First Amendment (hereafter First Amended Contract) to the Agreement for Services of Independent Contractor, <u>BC 17-053</u>, is made by and between the County of Santa Barbara (County) and PathPoint (Contractor), for the continued provision of services specified herein.

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

Whereas, due to changes to improve the service documentation process from County Quality Care Management, County and Contractor have determined the need to eliminate the Contract Maximum Allowable (CMA) rate for FY 16-17;

Whereas, this First Amended Contract incorporates the terms and conditions set forth in the Agreement approved by the County Board of Supervisors June 2016 except as modified in this First Amended Contract.

NOW, THEREFORE, in consideration of the mutual covenants and conditions contained herein, County and Contractor(s) agree as follows:

- I. In <u>Exhibit B</u>, <u>Financial Provisions</u>, delete <u>Section VIII.A</u>, and replace with the following:
 - A. Pre-audit Cost Report(s) submitted pursuant to this Exhibit B MH Section VII (Cost Reports) and State approved UOS, at the end of each Fiscal Year or portion thereof that this Agreement is in effect, the County will perform pre-audit cost report settlement(s). Such settlements will be subject to the terms and conditions of this Agreement and any other applicable State and/or Federal statutes, regulations, policies and procedures, or requirements pertaining to cost reporting and settlements for applicable Federal and/or State programs. In no event shall the settlement exceed the maximum amount of this agreement. Settlement for services shall be adjusted to the lower of:
 - 1. Contractor's published charge(s) to the general public, as approved by the Contractor's governing board; unless the Contractor is a Nominal Fee Provider. This federal published charges rule is applicable only for the outpatient, rehabilitative, case management and 24-hour services.
 - 2. The Contractor's actual costs.
 - 3. The COUNTY Maximum Allowable rate.

For FY 2016-17 only and for no other Fiscal Year or portion thereof that this Agreement is in effect, settlement for services shall be adjusted to the lower of Contractor's published charge(s) to the general public (subsection VIII.A.1) or actual costs (subfsection VIII.A.2) and shall exclude the County Maximum Allowable rate (subsection VIII.A.3).

- II. In Exhibit B-1 MH, Schedule of Rates and Contract Maximum, add a footnote clarification to the County Maximum Allowable Rate column heading:
 - (4) Does not apply to FY 16-17.

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

CONT	RACT	OR	NAME:
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PathPoint

FISCAL YEAR: 2016-2017

Contracted Services(1)	Service Type	Mode	Service Description	Unit of Service	Service Function Code	County Maximum Allowable Rate (4)
			Targeted Case Management	Minutes	01	\$2.02
Medi-Cal Billable Services			Collateral	Minutes	10	\$2.61
	1		*MHS Assessment Minutes		30	\$2.61
			MHS - Plan Development	Minutes	31	\$2.61
	Outpatient Services	15	*MHS- Therapy (individual)	Minutes	11,40	\$2.61
			MHS - Rehab (Family, Individual, Group)	Minutes	12, 41, 51	\$2.61
	1		Medication Support Services	Mintues	61, 62	\$2.61
			Crisis Intervention	Minutes	70	\$3.88
Non-Medi-Cal Billable Services	Outreach Services	45	Community Client Services	N/A	20	Actual Cost

			_		PRO	GRAM					
	Servi	upportive ommunity ces (Paths to tecovery)		esidential ort Services						TOTAL	
GROSS COST:	s	993,003	\$	182.845							\$1,175,848
LESS REVENUES COLLECTED BY CONTRACTOR			-				-	-		-	01,110,040
PATIENT FEES							1			S	
CONTRIBUTIONS								_		S	
OTHER (LIST):										\$	
TOTAL CONTRACTOR REVENUES	\$	¥	\$		\$	R	s				\$0
MAXIMUM ANNUAL CONTRACT AMOUNT PAYABLE:	8	993,003	s	182,845	s		s	5		15	1,175,848

TOTAL CONTRACT AMOUNT PAYABLE:	8	2,979,009	3	548,535	\$	3,627,544
MAXIMUM 18-19 CONTRACT AMOUNT PAYABLE:	\$	993,003	\$	182,845	\$	1,175,848
MAXIMUM 17-18 CONTRACT AMOUNT PAYABLE:	\$	993,003	\$	182,845	\$	1,175,848
MAXIMUM 16-17 CONTRACT AMOUNT PAYABLE:	3	993,003	\$	182,845	\$	1,175,848
OTHER (LIST):	_				S	
SUBSIDY	S	99,300	\$	42,393	\$	141,693
NON-MEDI-CAL					\$.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
MEDICAL (3)	S	893,703	\$	140,452	\$	1,034,155

CONTRACTOR SI	GNATURE:
---------------	----------

STAFF ANALYST SIGNATURE:

FISCAL SERVICES SIGNATURE:

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

(2) The Director or designee may reallocate between funding sources at his/her discretion during the term of the contract, including to utilize and maximize any additional funding or FFP provided by local, State, or Federal law, regulation, policy, procedure, or program. The Director or designee also reserves the right to reallocate between funding sources in the year end cost settlement. Reallocation of funding sources does not alter the Maximum Contract Amount and does not require an amendment to the contract.

- (3) Source of Medi-Cal match is State and Local Funds including but not limited to Realignment, MHSA, General Fund, Grants, Other Departmental and SB 163.
- (4) Does not apply to FY 16-17.
- * MHS Assessment and MHS Therapy services may only be provided by licensed, registered or waivered Mental Health clinicians, or graduate student interns under direct supervision of a licensed, registered or waivered Mental Health clinician.

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

		SCHEDOLE OF RATES AND CONTRACT	INIVAINI
CONTRACTOR NAME: PathPoint	CONTRACTOR NAME:	PathPoint	

FISCAL 2016-2017 YEAR:

Contracted Services(1)	Service Type	Mode	Service Description	Unit of Service	Service Function Code	County Maximum Allowable Rate (4)
-			Targeted Case Management	Minutes	01	\$2.02
Medi-Cal Billable Services	1		Cogateral	Minutes	10	\$2.61
			'M' 13- Assessment	Minutes	30	\$2.61
	1 1		MHS - Plan Development	Minutes	31	\$2.61
	Outpatient Services	15	'MHS- Therapy (Individual)	Minutes	11, 40	\$2.61
	-		M-S - Rehab (Family, Individual, Group)	Minutes	12, 41, 51	\$2.61
			Medication Support Services	Miniues	61, 62	\$2.61
			Crisis Intervention	Minutes	70	\$3,88
Non-Medi-Cal Billable Services	Outreach Services	45	Community Client Services	N/A	20	Actual Cost

	PROGRAM											
	Serv	supportive community ices (Paths to Recovery)		esidential ort Services							TOTAL	
GROSS COST	S	993,003	5	182,845							\$1,175,848	
LESS REVENUES COLLECTED BY CONTRACTOR:	MI.											
PATIENT FEES	T									18		
CONTRIBUTIONS										\$		
OTHER (LIST):										\$	040	
TOTAL CONTRACTOR REVENUES	.53	W.	s	- 9	s		S	2			02	
MAXIMUM ANNUAL CONTRACT AMOUNT PAYABLE:	2	993,003	5	182,845	3	300	5		3	- 5	1,176,848	

TOTAL CONTRACT AMOUNT PAYABLE:		2,979,003	\$	648,536	A		3.527.544
MAXIMUM 18-19 CONTRACT AMOUNT PAYABLE:	\$	993.003	\$	182,845		s	1,175,848
MAXIMUM 17-18 CONTRACT AMOUNT PAYABLE	2	993,003	\$	182,845		\$	1,175,848
MAXIMUM 16-17 CONTRACT AMOUNT PAYABLE	s	993,003	s	182,845		5	1,175,848
OTHER (LIST)						S	
SUBSIDY	\$	99,300	\$	42,393		\$	141,893
NON-MEDI-CAL						S	
MEDI-CAL (3)	\$	893,703	\$	140,452		5	1,034,155

	ACTOD	CLONIAT	TIDE.
CUNIK	ACIOR	SIGNAT	URE.

STAFF ANALYST SIGNATURE:

FISCAL SERVICES SIGNATURE:

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

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⁽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⁾ Does not apply to FY 16-17.

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

III. All other terms remain in full force and effect.

First Amendment to Agreement for Services of Independent Contractor between the County of Santa Barbara and PathPoint.

IN WITNESS WHEREOF, the parties have executed this First Amendment to be effective on the da

date executed by COUNTY.	
	COUNTY OF SANTA BARBARA: ALICE GLEGHORN, PH.D., DIRECTOR DEPARTMENT OF BEHAVIORAL WELLNESS
	By: Wind
	Date: 6/20/17
1	CONTRACTOR:
	PATHPOINT
	By:
	Authorized Representative
	Name:
	Title:
	Date:
APPROVED AS TO FORM:	APPROVED AS TO ACCOUNTING FORM:
MICHAEL C. GHIZZONI	THEODORE A. FALLATI, CPA
COUNTY COUNSEL	AUDITOR-CONTROLLER
By: Deput County Counsel	Deputy Deputy
	APPROVED AS TO INSURANCE FORM:

RAY AROMATORIO RISK MANAGEMENT

By:

First Amendment to Agreement for Services of Independent Contractor between the **County of Santa Barbara** and **PathPoint**.

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

	COUNTY OF SANTA BARBARA: ALICE GLEGHORN, PH.D., DIRECTOR DEPARTMENT OF BEHAVIORAL WELLNESS
	By:
	Date:
	CONTRACTOR: PATHPOINT
a *	By: Authorized Representative Name: CUNTHIA S BURTON
	Title: PRES/LEO Date: 6/26/11
APPROVED AS TO FORM:	APPROVED AS TO ACCOUNTING FORM:
MICHAEL C. GHIZZONI COUNTY COUNSEL	THEODORE A. FALLATI, CPA AUDITOR-CONTROLLER
By: Deputy County Counsel	By:
	APPROVED AS TO INSURANCE FORM:
a a	RAY AROMATORIO RISK MANAGEMENT
	By: Risk Management



County of Santa Barbara BOARD OF SUPERVISORS

Minute Order

June 20, 2017

Present:

5 - Supervisor Williams, Supervisor Wolf, Supervisor Hartmann, Supervisor Adam, and

Supervisor Lavagnino

BEHAVIORAL WELLNESS

File Reference No. 17-00472

RE:

Consider recommendations regarding Behavioral Wellness' Mental Health (MH) agreements amendments for Fiscal Year (FY) 2016-2017, as follows:

- a) Approve, ratify, and authorize the Director of the Department of Behavioral Wellness to execute amendments to the Behavioral Wellness' MH agreements in accordance with the template amendment, to eliminate the County Maximum Allowable (CMA) rate for FY 2016-2017, but with no change to the maximum contract amounts, for the following MH providers:
- i) Casa Pacifica FY 2016-2017 First Amendment;
- ii) Child Abuse Listening and Mediation, Inc. FY 2016-2017 First Amendment;
- iii) Community Action Commission FY 2016-2019 First Amendment;
- iv) Council on Alcoholism and Drug Abuse FY 2016-2017 Third Amendment;
- v) Family Service Agency FY 2016-2017 Second Amendment;
- vi) Good Samaritan Shelter, Inc. FY 2016-2017 Fourth Amendment;
- vii) PathPoint FY 2016-2019 First Amendment;
- viii) Telecare Corporation FY 2016-2019 First Amendment; and
- ix) Transitions Mental Health Association FY 2016-2017 First Amendment; and
- b) Determine that these activities are exempt from California Environmental Quality Act (CEQA) review per CEQA Guidelines Section 15378(b)(5), as government organizational or administrative activities that do not involve commitment to a specific project that may result in a potentially significant physical impact on the environment.

A motion was made by Supervisor Wolf, seconded by Supervisor Lavagnino, that this matter be Acted on as follows:

a) i) Approved.

The motion carried by the following vote:

Ayes: 4 - Supervisor Wolf, Supervisor Hartmann, Supervisor Adam, and Supervisor

Lavagnino

Recused: 1 - Supervisor Williams



County of Santa Barbara BOARD OF SUPERVISORS

Minute Order

June 20, 2017

A motion was made by Supervisor Wolf, seconded by Supervisor Williams, that this matter be Acted on as follows:

- a) ii) through ix) Approved; and
- b) Approved.

The motion carried by the following vote:

Ayes: 5 - Supervisor Williams, Supervisor Wolf, Supervisor Hartmann, Supervisor Adam, and Supervisor Lavagnino



BOARD OF SUPERVISORS AGENDA LETTER

Clerk of the Board of Supervisors 105 E. Anapamu Street, Suite 407 Santa Barbara, CA 93101 (805) 568-2240 Agenda Number:

Department Name:

Behavioral Wellness

Department No.:

043

For Agenda Of:

June 20, 2017

Placement:

Administrative

Estimated Time:

Continued Item:

No

If Yes, date from:

Vote Required:

Majority

TO:

Board of Supervisors

FROM:

Department

Alice Gleghorn, Ph.D. Director

Director(s)

Department of Behavioral Wellness, 684-5220

Contact Info:

Pam Fisher, Pam Fisher, Psy.D., Deputy Director of Clinical

Operations, Behavioral Wellness, 681-5220

SUBJECT:

Behavioral Wellness – Mental Health Amendments FY 16-17

County Counsel Concurrence

Auditor-Controller Concurrence

As to form: Yes

Other Concurrence: Risk Management

As to form: NA

As to form: Yes

Recommended Actions:

That the Board of Supervisors:

- A. Approve, ratify, and authorize the Director of the Department of Behavioral Wellness to execute amendments to the Behavioral Wellness' Mental Health (MH) agreements in accordance with the attached template amendment, to eliminate the County Maximum Allowable rate (CMA) for FY 16-17, but with no change to the maximum contract amounts, for the following MH providers:
 - 1. Casa Pacifica FY 16-17 First Amendment
 - 2. Child Abuse Listening and Mediation, Inc. FY 16-17 First Amendment
 - 3. Community Action Commission FY 16-19 First Amendment
 - 4. Council on Alcoholism and Drug Abuse FY 16-17 Third Amendment
 - 5. Family Service Agency FY 16-17 Second Amendment
 - 6. Good Samaritan Shelter, Inc. FY 16-17 Fourth Amendment
 - 7. PathPoint FY 16-19 First Amendment
 - 8. Telecare Corporation FY 16-19 First Amendment
 - 9. Transitions Mental Health Association FY 16-17 First Amendment
- B. Determine that these activities are exempt from California Environmental Quality Act (CEQA) review per CEQA Guidelines Section 15378(b)(5), as government organizational or administrative activities that do not involve commitment to a specific project that may result in a potentially significant physical impact on the environment.

Summary Text:

The Santa Barbara County Department of Behavioral Wellness provides a continuum of mental health services to Santa Barbara County residents, in part through contracted providers including Community Based Organizations (CBOs).

This item is on the agenda to remove the County's mental health CMA limitation clause for the specific CBOs listed above for FY 16-17 only. The CMA rate limitation is not a Federal or State requirement. Rather, it is a locally imposed contractual restriction to ensure that cost of service delivery remains within anticipated levels. This year, due to changes implemented at Behavioral Wellness to improve the service documentation process, many CBOs experienced a temporary decline in services levels as more clinical staff time was spent focusing on documentation to ensure compliance with Medi-Cal standards. This caused the per unit rate of service to rise above the CMA. A one-time removal of this contractual restriction is necessary to ensure that contractors do not incur large cost settlements as a result of the implementation of enhanced documentation standards imposed by Behavioral Wellness' QCM. Behavioral Wellness anticipates less services disallowed by the state during the audit process resulting from the documentation improvements.

Approval of the recommended actions will allow these affected CBO agencies to avoid possible cash shortfalls while being compensated at levels within their original FY 16-17 contract funding allocations. Effective with this change, contractor settlement for services will be adjusted to the lower of the Contractor's published charge(s) to the general public as approved by the Contractor's governing board or the Contractor's actual costs.

Background:

For FY 16-17 the Behavioral Wellness' QCM division implemented enhancements in documentation and quality standards to improve compliance with the Medi-Cal billing process. As these enhanced quality standards were implemented, contractor and County clinical staff were spending increased time documenting services. This led to a temporary decline in the volume of rendered services as less contractor staff time was available for service delivery.

The reduction in the volume of total services, in turn, resulted in unit cost rates in excess of the CMA rate as the same clinical costs were spread over less services. Based on existing policy and financial provisions, a contractor would not be able to fully utilize their FY 16-17 contract funding allocation as the costs in excess of the CMA limit would not be reimbursed at cost settlement time. This would result in estimated unreimbursed costs of up to \$2.2M to County CBO organizations, a significant financial hardship to these partner organizations.

After careful and thorough consideration, executive management at Behavioral Wellness has decided that removing the CMA limitation for FY 16-17 is warranted and in the best interest of the County and contract agencies. This would allow contractors to recover the full cost of their service delivery for FY 16-17 in accordance with the federal financial participation (FFP) process. The impact to the County would be minimal, as any County matching funds are already contemplated in the adopted budget and in existing contracts.

In FY 17-18 and beyond, the CMA rate will be enforced as it has been in prior years as it is an appropriate measure of cost effectiveness. The expectation is that service levels will continue to increase as providers fully implement the documentation standards. Behavioral Wellness has seen an increase in service levels in the last quarter of FY 16-17 and expects the trend to continue.

The approval of this recommendation will allow Behavioral Wellness to eliminate for FY 16-17 each of the listed mental health contractor's CMA limitation clause efficiently according to a standardized template approved by the Board, without needing to bring each individual contract to the Board. With approval of the Board, Behavioral Wellness will update and individualize each MH contractor listed above with an amendment based on the attached template amendment, which states that for FY 16-17, the CMA limitation clause will not apply.

Fiscal and Facilities Impacts:

Budgeted: There are no budget impacts. The adopted FY 16-17 budget is based on maximum contract amounts and this amendment does not alter existing contract maximum amounts.

Fiscal Analysis:

Narrative: Behavioral Wellness will have to utilize existing matching funds (Realignment, MHSA) to provide a maximum 50% match to additional Federal funds received from removal of the CMA limitation. Matching funds will not be in excess of amounts already considered in the adopted budget.

Key Contract Risks:

As with any contract funded by State and Federal sources, there is a risk of future audit disallowances and repayments. If Behavioral Wellness does not make this amendment, the County will be contractually required to limit contractor reimbursement to the CMA rate and contractors will have to use their existing funds or fundraise to pay for these unreimbursed costs estimated at \$2.2M. Some providers may have increased difficulties covering this contract deficiency which may result in significant financial hardship.

Special Instructions:

Please return one (1) Minute Order to Denise Morales: dmorales@co.santa-barbara.ca.us.

Attachments:

Attachment A: MH CMA FY 16-17 Contract Amendment Template

Authored by:

C.Boyer/D.Morales/SS

TO AGREEMENT FOR SERVICES OF INDEPENDENT CONTRACTOR

This [First] Amendment (hereafter [First] Amended Contract) to the Agreement for Services of Independent Contractor, [BC #], is made by and between the County of Santa Barbara (County) and {Contractor Name} (Contractor), for the continued provision of services specified herein.

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

Whereas, due to changes to improve the service documentation process from County Quality Care Management, County and Contractor have determined the need to eliminate the Contract Maximum Allowable (CMA) rate for FY 16-17;

Whereas, this [First] Amended Contract incorporates the terms and conditions set forth in the Agreement approved by the County Board of Supervisors in [Month/Year approved], except as modified in this [First] Amended Contract.

NOW, THEREFORE, in consideration of the mutual covenants and conditions contained herein, County and Contractor(s) agree as follows:

- In <u>Exhibit B</u>, <u>Financial Provisions</u>, delete <u>Section VIII.A</u>, and replace with the following:
 - A. Pre-audit Cost Report(s) submitted pursuant to this Exhibit B MH Section VII (Cost Reports) and State approved UOS, at the end of each Fiscal Year or portion thereof that this Agreement is in effect, the County. will perform pre-audit cost report settlement(s). Such settlements will be subject to the terms and conditions of this Agreement and any other applicable State and/or Federal statutes, regulations, policies and procedures, or requirements pertaining to cost reporting and settlements for applicable Federal and/or State programs. In no event shall the settlement exceed the maximum amount of this agreement. Settlement for services shall be adjusted to the lower of:
 - 1. Contractor's published charge(s) to the general public, as approved by the Contractor's governing board; unless the Contractor is a Nominal Fee Provider. This federal published charges rule is applicable only for the outpatient, rehabilitative, case management and 24-hour services.
 - 2. The Contractor's actual costs.
 - The COUNTY Maximum Allowable rate.

For FY 2016-17 only and for no other Fiscal Year or portion thereof that this Agreement is in effect, settlement for services shall be adjusted to the lower of Contractor's published charge(s) to the general public (subsection VIII.A.1) or actual costs (subsection VIII.A.2) and shall exclude the County Maximum Allowable rate (subsection VIII.A.3).

- II. In Exhibit B-1 MH, Schedule of Rates and Contract Maximum, add a footnote clarification to the County Maximum Allowable Rate column heading:
 - (4) Does not apply to FY 16-17.

EXHIBIT 8-1 MH DEPARTMENT OF BEHAVIORAL WELLNESS SCHEDULE OF RATES AND CONTRACT MAXIMUM

CONTRACTOR NAME:					FISCAL YEAR:		
Contracted Services	Service Type	Mode	Service Description	Unit of Service	Service Function Code	Gounty Maximun Allowabk Rate (4)	
	24-Hour						
	Services	05	Adult Crisis Residential	Bed Day	40	\$345.38	
	Gel Vices	-	Adult Residential	Bed Day	65	\$168.46	
			Crisis Stabilization Urgent Care	Hour	25	\$94.54	
	l	l	Day Treetment Haif Day	Haur	81	5144 13	
	Day Services	10	Day Treatment Full Day	Oay	85	\$202.43	
			Day Rehab Half Day	Hour	91	\$84.08	
			Day Rehab Full Day	Day	95	\$131.24	
			Targeted Case Management	Minutes	01	\$2.02	
	1		Intensive Care Coordination	Minutes	07	\$2.02	
** ** ** ** ** ** **		l .	Collateral	Minutes	10	\$2.61	
Medi-Cal Billable Services	1	1	(1) MHS- Assessment	Miratos	30	\$2.61	
		I	MHS - Plan Development	Minutor	31	\$2.61	
		l .	(1) Made Thorney (Family.		46.72		
	Outpatient	l	hors - Rohab (Farriy.		11, 40, 50	\$2.01	
	Services	15	Individual Group)	Minison	12, 41, 51	\$2.61	
		I	MHE - PHE		57	\$2.01	
			Tan	A COLUMN TO A COLU	58	\$2.61	
		75	Poly Management-	lon	90	\$4.62	
	92	The second second	Mor on S rt and	1			
		THE REAL PROPERTY.	hlarvan	Mireon	61, 62	\$4.82	
Non Medi-Cai Billable	1	SUPPLIES THE	miking Nursing	MILLER	70	\$3.88	
	A PROPERTY.		Intensive	Bed Day	30	N/A	
	24- Serv		(MD): Besic (No patch)	Bed Day	35	N/A	
	Marie Committee of the		(MD): With Patch	Bed Day	36	N/A	
			Mental Health Rohat Conter	Bed Day	90	NA	
	Tod !	_	Mental Health Promotion	N/A	10	Actual Cos	
	3 ces	45	Community Client Services	N/A	20	Actual Cos	
			Life Support: Board and Care	N/A			
	(I				40	Actual Cos	
	Support		Client Housing Support	N/A	70	Adtual Cos	
	Services	60	Glent Housing Operation	N/A	71	Actual Cos	
			Client Flexible Support	N/A	72	Actual Cos	
		L	Other Non Medi-Cal Client	N/A	78	Actual Cos	
			PROGRAM			1	
			PROGRAM				
	Program 1	Program 2				TOTAL	
OSS COST							
38 REVENUES COLLECTED BY CONTRACTOR			U ₁				
ATIENT FEES						3 .	
CONTRIBUTIONS						5 .	
OTHER (LIST):						\$	
TAI, CONTRACTOR REVENUES	3 .	\$.	s .	5 -			
XXIMUM CONTRACT AMOUNT PAYABLE:	s .	ls :			3 .	1 .	
URGES OF FUNDING FOR MAXIMUM CONTRACT AMO	OUNT (2)						
EDI-CAL (3)							
ON-MIDECAL.						5	
						5	
UBSIDY							
						1	

STAFF ANALYST SIGNATURE: FISCAL SERVICES SIGNATURE:

⁽¹⁾ MHS Assessment and MHS Therapy services may only be provided by licensed, registered or waivered Mental Health clinicians, or graduate student interns under direct supervision of a licensed, registered or waivered Mental Health clinician

⁽²⁾ The Director or designee may reallocate between funding sources at his/her discretion during the term of the contract, including to utilize and maximize any additional funding or FFP provided by local, State, or Federal law, regulation, policy, procedure, or program. The Director or designee also reserves the right to reallocate between funding sources in the year end cost settlement. Reallocation of funding sources does not alter the Maximum Contract Amount and does not require an amendment to the contract.

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

⁽⁴⁾ Does not apply to FY 16-17

III. All other terms remain in full force and effect.

[First] Amendment to Agreement for Services of Independent Contractor between the **County of Santa Barbara** and **[CONTRACTOR]**.

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

	COUNTY OF SANTA BARBARA: ALICE GLEGHORN, PH.D., DIRECTOR DEPARTMENT OF BEHAVIORAL WELLNESS				
	Ву:				
<u>a</u>	Date:				
8	CONTRACTOR: {ENTER NAME OF CONTRACTOR}				
	By:				
	Authorized Representative	_			
	Name:				
	Title:				
	Date:				
APPROVED AS TO FORM:	APPROVED AS TO ACCOUNTING FORM:				
MICHAEL C. GHIZZONI	THEODORE A. FALLATI, CPA				
COUNTY COUNSEL	AUDITOR-CONTROLLER				
By:	D				
Deputy County Counsel	By: Deputy				
	APPROVED AS TO INSURANCE FORM:				
	RAY AROMATORIO				
	RISK MANAGEMENT				
	Ву:				
	Risk Management				