

THE INFORMATION IN THIS BOX IS NOT A PART OF THE CONTRACT AND IS FOR COUNTY USE ONLY



**Contract Number**

**22-577 A-1**

**SAP Number**

**400019546**

## Department of Behavioral Health

<b>Department Contract Representative</b>	Nathaniel Rodriguez
<b>Telephone Number</b>	(909) 388-0861
<b>Contractor</b>	Hearts & Lives
<b>Contractor Representative</b>	Luvia Rodriguez
<b>Telephone Number</b>	(909) 338-3222
<b>Contract Term</b>	July 1, 2022 through June 30, 2026
<b>Original Contract Amount</b>	\$420,000
<b>Amendment Amount</b>	\$140,000
<b>Total Contract Amount</b>	\$560,000
<b>Cost Center</b>	9203342200
<b>Grant Number (If applicable)</b>	N/A

**IT IS HEREBY AGREED AS FOLLOWS:**

**AMENDMENT NO. 1**

IN THAT CERTAIN **Contract No. 22-577** by and between San Bernardino County, a political subdivision of the State of California, (hereinafter referred to as County) and Hearts & Lives (hereinafter referred to as Contractor) for Promotores de Salud/Community Health Worker program services, which first became effective July 1, 2022, the following changes are hereby made and agreed to:

- I. ARTICLE V FUNDING AND BUDGETARY RESTRICTIONS, paragraph H and I are hereby amended to read as follows:
  - H. The maximum financial obligation under this contract shall not exceed \$560,000 for the contract term.
  - I. This amendment hereby adds Schedules A and B for FY 2025-26 as set forth in Exhibit I. All previously approved schedules remain in effect.

II. ARTICLE XIV DURATION AND TERMINATION, paragraph A is hereby amended to read as follows:

The term of this agreement shall be from July 1, 2022 through June 30, 2026 inclusive. The County may, but is not obligated to, extend awarded contract(s) for up to one (1) additional one-year period contingent on the availability of funds and Contractor performance.

III. ARTICLE XVII PERSONNEL, paragraph L is hereby added:

L. Levine Act Campaign Contribution Disclosure (formerly referred to as Senate Bill 1439)

Contractor has disclosed to the County using Attachment III – Levine Act Campaign Contribution Disclosure Senate Bill (formerly referred to as Senate Bill 1439), whether it has made any campaign contributions of more than \$500 to any member of the Board of Supervisors or other County elected officer [Sheriff, Assessor-Recorder-Clerk, Auditor-Controller/Treasurer/Tax Collector and the District Attorney] within the earlier of: (1) the date of the submission of Contractor's proposal to the County, or (2) 12 months before the date this Contract was approved by the Board of Supervisors. Contractor acknowledges that under Government Code section 84308, Contractor is prohibited from making campaign contributions of more than \$250 to any member of the Board of Supervisors or other County elected officer for 12 months after the County's consideration of the Contract.

In the event of a proposed amendment to this Contract, the Contractor will provide the County a written statement disclosing any campaign contribution(s) of more than \$500 to any member of the Board of Supervisors or other County elected officer within the preceding 12 months of the date of the proposed amendment.

Campaign contributions include those made by any agent/person/entity on behalf of the Contractor or by a parent, subsidiary or otherwise related business entity of Contractor.

IV. ATTACHMENT IV LEVINE ACT-CAMPAIGN CONTRIBUTION DISCLOSURE (formerly referred to as SB 1439) is hereby added.

V. EXHIBIT I is hereby added to include Schedules A and B for FY 2025-26.

VI. All other terms and conditions remain in full force and effect.

This Amendment may be executed in any number of counterparts, each of which so executed shall be deemed to be an original, and such counterparts shall together constitute one and the same Contract. The parties shall be entitled to sign and transmit an electronic signature of this Amendment (whether by facsimile, PDF or other email transmission), which signature shall be binding on the party whose name is contained therein. Each party providing an electronic signature agrees to promptly execute and deliver to the other party an original signed Amendment upon request.

**IN WITNESS WHEREOF**, the San Bernardino County and the Contractor have each caused this Contract Amendment to be subscribed by its respective duly authorized officers, on its behalf.

SAN BERNARDINO COUNTY

▶ *Dawn Rowe*  
Dawn Rowe, Chair, Board of Supervisors

Dated: JUN 18 2025  
SIGNED AND CERTIFIED THAT A COPY OF THIS DOCUMENT HAS BEEN DELIVERED TO THE CHAIRMAN OF THE BOARD

By *Jenni Lynne Monell*  
Jenni Lynne Monell  
Clerk of the Board of Supervisors  
of San Bernardino County  
SAN BERNARDINO COUNTY, CA



Hearts & Lives

(Print or type name of corporation, company, contractor, etc.)

DocuSigned by:  
By *Luvia Rodriguez*  
37794 Authorized signature - sign in blue ink

Name Luvia Rodriguez  
(Print or type name of person signing contract)

Title Executive Director  
(Print or Type)

Dated: 5/28/2025

Address 24028 Lake Drive  
Crestline, CA 92325

**FOR COUNTY USE ONLY**

Approved as to Legal Form  
Signed by: *Dawn Martin*  
Dawn Martin, Deputy County Counsel  
Date 5/28/2025

Reviewed for Contract Compliance  
Signed by: *Michael Shin*  
Michael Shin, Administrative Manager  
Date 5/28/2025

Reviewed/Approved by Department  
DocuSigned by: *Georgina Yoshioka*  
Georgina Yoshioka, Director  
Date 5/29/2025

SCHEDULE A - Planning Estimates

SAN BERNARDINO COUNTY  
DEPARTMENT OF BEHAVIORAL HEALTH  
PREVENTION AND EARLY INTERVENTION  
(PEI)

Actual Cost Contract (cost reimbursement)

Promotores de Salud/Community Health Workers

Contractor Name: **Hearts & Lives**  
Region: **Mountain**

Contract #/REF # **21-114**

Address: **PO Box 4644, Blue Jay, CA 92317**

Prepared by: **Nathan Rosado**  
Title: **Fiscal Specialist**

FY 2025 - 2026  
July 1, 2025 to June 30, 2026

Date Form Completed: **4/15/25**  
Updated: **4/15/25**

PEI County Program: Promotores de Salud / Community Health Workers							TOTAL
State Defined Program: Outreach for Increasing Recognition of Early Signs of Mental Illness							
#	COMPONENTS	Distribution					
		0.00%	90.00%	10.00%			
		Mode 15	Mode 45				
		Early Intervention Services (01-57)	Mental Health Promotion (10)	Community Client Services (20)			
1	EXPENSES						
2	SALARIES	\$ -	\$ 95,575	\$ 10,619		\$ 106,194	
3	BENEFITS	\$ -	\$ 8,571	\$ 952		\$ 9,523	
4	(2+3 must equal total staffing costs)	\$ -	\$ 104,145	\$ 11,572		\$ 115,717	
5	OPERATING EXPENSES	\$ -	\$ 21,854	\$ 2,428		\$ 24,283	
6	TOTAL EXPENSES (2+3+5)	\$ -	\$ 126,000	\$ 14,000		\$ 140,000	
7	AGENCY REVENUES						
8	PATIENT FEES					\$ -	
9	PATIENT INSURANCE					\$ -	
10	GRANTS/OTHER					\$ -	
11	TOTAL AGENCY REVENUES (8+9+10)	\$ -	\$ -	\$ -		\$ -	
12	CONTRACT AMOUNT (6-11)	\$ -	\$ 126,000	\$ 14,000		\$ 140,000	
13	FUNDING						
14	MHSA	\$ -	\$ 126,000	\$ 14,000		\$ 140,000	
15	TOTAL FUNDING	\$ -	\$ 126,000	\$ 14,000		\$ 140,000	
16	UNDUPLICATED PARTICIPANTS		1,657	184			
17	TOTAL UNDUPLICATED PARTICIPANTS	0	1,657	184		1,841	
18	COST PER UNDUPLICATED PARTICIPANT	\$ -	\$ 76.04	\$ 76.09		\$ 76.05	
19	SERVICES						
20	TOTAL SERVICES	0	1,657	184		1,841	
21	COST PER TOTAL SERVICES	\$ -	\$ 76.04	\$ 76.09		\$ 76.05	

APPROVED:

*Luvia Rodriguez*

May 1, 2025

*Christopher M. Lukachie*

May 2, 2025

*Jeanine Wymer*

May 5, 2025

PROVIDER AUTHORIZED SIGNATURE

DATE

DBH FISCAL SERVICES

DATE

DBH PROGRAM MANAGER

DATE

Luvia Rodriguez

Christopher M. Lukachie

Jeanine Wymer

PROVIDER AUTHORIZED SIGNER (PRINT NAME)

DBH FISCAL SERVICES (PRINT NAME)

DBH PROGRAM MANAGER (PRINT NAME)



SAN BERNARDINO COUNTY  
DEPARTMENT OF BEHAVIORAL HEALTH  
SCHEDULE B

FY 2025 - 2026

Contractor Name: Hearts & Lives  
Region: Mountain  
Contract #/RFP #: 21-114  
Address: PO Box 4644, Blue Jay, CA 92317

Prepared by: Nathan Rosado  
Title: Fiscal Specialist

Date Form Completed: 4/15/25  
Updated: 4/15/25

Operating Expenses - Please list all operating costs charged to this program, including administrative support costs and management fees along with a detail explanation of the categories below.

July 1, 2025 to June 30, 2026

ITEM	TOTAL COST TO ORGANIZATION	% CHARGED TO OTHER FUNDING SOURCE	TOTAL COST TO OTHER FUNDING SOURCE	PERCENT CHARGED TO CONTRACT	TOTAL COST TO CONTRACT
1 Rent	\$100,512	87%	\$87,445	13%	\$13,067
2 Utilities	\$15,659	85%	\$13,326	15%	\$2,333
3 Employee Mileage/Travel	\$1,000	0%	\$0	100%	\$1,000
4 Advertising/Printing/Postage	\$1,300	0%	\$0	100%	\$1,300
5 Program Needs	\$2,000	0%	\$0	100%	\$2,000
6 Office Supplies	\$700	0%	\$0	100%	\$700
7 Dues/Insurance/Taxes/Licensing	\$29,000	88%	\$25,520	12%	\$3,480
8 Therapist	\$403	0%	\$0	100%	\$403
9		0%	\$0	100%	\$0
10		0%	\$0	100%	\$0
11		0%	\$0	100%	\$0
12		0%	\$0	100%	\$0
<b>SUBTOTAL B:</b>	\$150,574		\$126,291		\$24,283
<b>GROSS TOTAL STAFFING AND OPERATING COSTS</b>					\$33,806

SAN BERNARDINO COUNTY  
DEPARTMENT OF BEHAVIORAL HEALTH  
SCHEDULE B  
BUDGET NARRATIVE  
FY 2025 - 2026

PREVENTION AND EARLY INTERVENTION

Prepared by: Nathan Rosado  
Title: Fiscal Specialist

Contractor Name: Hearts & Lives  
Region: Mountain  
Contract #/RFP #: 21-114  
Address: PO Box 4644, Blue Jay, CA 92317

Date Form Completed: 4/15/25  
Updated: 4/15/25

Budget Narrative for Operating Expenses. Explain each expense by line item. Provide an explanation for determination of all figures (rate, duration, quantity, Benefits, FTE's, etc.) for example explain how overhead or indirect cost were calculated.

July 1, 2025 to June 30, 2026

ITEM	Justification of Cost
1 Rent	Rent based on add'l space required, ensuring adequate confidentiality. (\$3,800/mo. * 12 months * 13%) Rent based on square footage 3735 sq ft Blue Jay Office rent needed for workshop space
2 Utilities	Telephone, gas & electric, wireless. Based on approximated add'l phone and utility.
3 Employee Mileage/Travel	Travel related expenses, i.e. hotel, meals, parking, taxi, etc. Employee mileage reimbursement for attending meetings, seminars, etc.
4 Advertising/Printing/Postage	Brochures, ads placed in print or social media format. Printing of letterhead, envelopes, business cards and reference information. Mail and postal expenses.
5 Program Needs	Costs of supplies and materials to perform program. Includes food expenses for groups, and meetings.
6 Office Supplies	General office supplies, i.e. ink cartridges, paper, etc.
7 Dues/Insurance/Taxes/Licensing	Add'l liability, workers comp insurances. Cost of add'l dues and memberships.
8 Therapist	Cost for Therapist to go over curriculum and offer Subject Matter Expert Guidance
9	
10	
11	
12	

SAN BERNARDINO COUNTY  
DEPARTMENT OF BEHAVIORAL HEALTH  
PREVENTION AND EARLY INTERVENTION  
FY 2025 - 2026  
July 1, 2025 to June 30, 2026

Contractor Name: Hears & Lives  
Region: Mountain  
Contract #: RFP # 21-114  
Address: PO Box 4644, Blue Jay, CA 92317

Date Form Completed: 4/15/25  
Updated: 4/15/25

Year to Date Unduplicated Participant Count			
Early Intervention	Mental Health Promotion	Community Client Svcs	Program
	1,657	184	1,841

**PEI County Program: Promotores de Salud / Community Health Workers Program  
State Defined Program: Outreach for Increasing Recognition of Early Signs of Mental Illness**

Service Projections for:	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	TOTAL
Early Intervention Services (01-57)													0
Mental Health Promotion (10)	138	136	136	136	136	136	136	136	136	136	136	139	1657
Community Client Services (20)	15	15	15	15	15	15	15	15	16	16	16	18	184
<b>TOTAL</b>	<b>153</b>	<b>154</b>	<b>154</b>	<b>154</b>	<b>155</b>	<b>1841</b>							

  

Hours Projections for:	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	TOTAL
Early Intervention Services (01-57)	0	0	0	0	0	0	0	0	0	0	0	0	0
Mental Health Promotion (10)	289	289	289	289	289	289	289	289	289	289	289	289	3,483
Community Client Services (20)	32	32	32	32	32	32	32	32	32	32	32	32	385
<b>TOTAL</b>	<b>321</b>	<b>3,868</b>											

  

Cost Projections for:	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	TOTAL
Early Intervention Services (01-57)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Mental Health Promotion (10)	\$ 10,500	\$ 10,500	\$ 10,500	\$ 10,500	\$ 10,500	\$ 10,500	\$ 10,500	\$ 10,500	\$ 10,500	\$ 10,500	\$ 10,500	\$ 10,500	\$ 128,000
Community Client Services (20)	\$ 1,167	\$ 1,167	\$ 1,167	\$ 1,167	\$ 1,187	\$ 1,187	\$ 1,187	\$ 1,167	\$ 1,167	\$ 1,167	\$ 1,167	\$ 1,167	\$ 14,000
<b>TOTAL</b>	<b>\$ 11,667</b>	<b>\$ 11,667</b>	<b>\$ 11,667</b>	<b>\$ 11,667</b>	<b>\$ 11,687</b>	<b>\$ 11,687</b>	<b>\$ 11,687</b>	<b>\$ 11,667</b>	<b>\$ 140,000</b>				



Yes  If yes, skip Question Nos. 3-4 and go to Question No. 5 No

3. Name of Principal (i.e., CEO/President) of entity listed in Question No. 1, if the individual actively supports the matter and has a financial interest in the decision:
4. If the entity identified in Question No.1 is a corporation held by 35 or less shareholders, and not publicly traded ("closed corporation"), identify the major shareholder(s):
5. Name of any parent, subsidiary, or otherwise related entity for the entity listed in Question No. 1 (see definitions above):

Company Name	Relationship
Not Applicable	

6. Name of agent(s) of Contractor:

Company Name	Agent(s)	Date Agent Retained (if less than 12 months prior)
Hearts & Lives	Luvia Rodriguez	Not Applicable

7. Name of Subcontractor(s) (including Principal and Agent(s)) that will be providing services/work under the awarded contract if the subcontractor (1) actively supports the matter and (2) has a financial interest in the decision and (3) will be possibly identified in the contract with the County or board governed special district.

Company Name	Subcontractor(s):	Principal and/or Agent(s):
Not Applicable		

8. Name of any known individuals/companies who are not listed in Questions 1-7, but who may (1) actively support or oppose the matter submitted to the Board and (2) have a financial interest in the outcome of the decision:

Company Name	Individual(s) Name
Not Applicable	

9. Was a campaign contribution, of more than \$500, made to any member of the San Bernardino County Board of Supervisors or other County elected officer within the prior 12 months, by any of the individuals or entities listed in Question Nos. 1-8?

No  If **no**, please skip Question No. 10.

Yes  If **yes**, please continue to complete this form.

10. Name of Board of Supervisor Member or other County elected officer: \_\_\_\_\_

Name of Contributor: \_\_\_\_\_

Date(s) of Contribution(s): \_\_\_\_\_

Amount(s): \_\_\_\_\_

Please add an additional sheet(s) to identify additional Board Members or other County elected officers to whom anyone listed made campaign contributions.

By signing the Contract, Contractor certifies that the statements made herein are true and correct. Contractor understands that the individuals and entities listed in Question Nos. 1-8 are prohibited from making campaign contributions of more than \$500 to any member of the Board of Supervisors or other County elected officer while award of this Contract is being considered and for 12 months after a final decision by the County.