



Contract Number

23-601 A-2

SAP Number

4400010735 – Total Contract

4400025570 – CFS Aggregate

Department of Behavioral Health

Department Contract Representative	Christopher Carso
Telephone Number	(909) 388-0856
Contractor	CLARE MATRIX
Contractor Representative	Matt Walton
Telephone Number	(310) 314-6200
Contract Term	July 1, 2023 through June 30, 2027
Original Contract Amount	\$1,520,000
Amendment Amount	\$0.00
Total Contract Amount	\$1,520,000
Total Aggregate Contract Term	July 1, 2023 through June 30, 2026
Total Aggregate Amount – For Clients Referred by CFS	\$2,400,000
Cost Center	1018511000
Grant Number (If applicable)	N/A

THIS CONTRACT is entered into in the State of California by and between San Bernardino County, hereinafter called the County, and CLARE|MATRIX referenced above, hereinafter called Contractor.

IT IS HEREBY AGREED AS FOLLOWS:

WITNESSETH:

IN THAT CERTAIN **Contract No. 23-601** by and between San Bernardino County, a political subdivision of the State of California, and Contractor for Early Intervention, Outpatient Treatment, Intensive Outpatient Treatment, and Recovery Services, which Contract first became effective July 1, 2023, the following changes are hereby made and agreed to, effective July 1, 2025:

- I. ARTICLE V FUNDING, paragraph K and L are hereby amended to read as follows:
 - K. The maximum financial obligation under this contract shall not exceed \$1,520,000 for the contract term.

Separately, the contract amendment amount of \$800,000 shall increase the total additional aggregate funding amount from \$1,600,000 to \$2,400,000 that may be applied (but not necessarily ensured) for any client referred from San Bernardino County Children and Family Services for fiscal years 2023-24, 2024-25, and 2025-26.

L. 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 XX PERSONNEL, paragraph N is hereby replaced in its entirety and revised as follows:

N. 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.

III. ATTACHMENT V Campaign Contributions Disclosure (SB1439) is hereby replaced with Levine Act-Campaign Contribution Disclosure (formerly referred to as SB 1439) as attached.

IV. Exhibit I Schedules A and B for FY 2025-26 are hereby added.

V. All other terms, conditions and covenants in the basic agreement remain in full force and effect.

This Agreement 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 Agreement. The parties shall be entitled to sign and transmit an electronic signature of this Agreement (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 Agreement upon request.

SAN BERNARDINO COUNTY

CLARE|MATRIX

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

►

Dawn Rowe, Chair, Board of Supervisors

By _____
(Authorized signature - sign in blue ink)

Dated: _____

Name Matt Walton
(Print or type name of person signing contract)

SIGNED AND CERTIFIED THAT A COPY OF THIS DOCUMENT HAS BEEN DELIVERED TO THE CHAIRMAN OF THE BOARD

Title _____
(Print or Type)

Lynna Monell
Clerk of the Board of Supervisors
of San Bernardino County

Dated: _____

By _____
Deputy

Address 909 Pico Blvd,
 Santa Monica, CA 90405

FOR COUNTY USE ONLY

Approved as to Legal Form
►

Dawn Martin, Deputy County Counsel
Date _____

Reviewed for Contract Compliance
►

Michael Shin, Contracts Administrative Manager
Date _____

Reviewed/Approved by Department
►

Georgina Yoshioka, Director
Date _____

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SUBSTANCE USE DISORDER RECOVERY SERVICES - OUTPATIENT CONTRACT
Personnel Expense Detail

BUDGET PERIOD: **July 1, 2025 to June 30, 2026**

PROVIDER NAME:	CLAREIMATRIX	PREPARER:	Rami Assad
FACILITY ADDRESS:	812 N. Euclid Ave.	TITLE:	
	Ontario, CA 91762	DATE PREPARED:	12/23/2024
PROVIDER NUMBER : (36XX)	36DY		

Position Title	Full Time Annual Salary	Full Time Fringe Benefits	Total Full Time Salaries & Benefits	% / FTE of Total Salary & Benefits	Total Salaries and Benefits Charged to Contract Services
Program Manager	\$ 71,200	\$ 22,784	\$ 93,984	50.0%	\$ 46,992
Behavioral Health Clinician	\$ 56,314	\$ 18,020	\$ 74,334	50.0%	\$ 37,167
Behavioral Health Clinician	\$ 59,000	\$ 18,880	\$ 77,880	50.0%	\$ 38,940
Counselor	\$ 47,520	\$ 15,206	\$ 62,726	50.0%	\$ 31,363
Counselor	\$ 38,405	\$ 12,290	\$ 50,695	50.0%	\$ 25,347
Admissions and Intake Coordinator	\$ 45,987	\$ 14,716	\$ 60,703	50.0%	\$ 30,351
Administrative Coordinator	\$ -	\$ -	\$ -	50.0%	\$ -
Administrative Assistant	\$ 36,885	\$ 11,739	\$ 48,424	50.0%	\$ 24,212
Quality Assurance	\$ 58,367	\$ 18,677	\$ 77,044	10.0%	\$ 7,704
Billor	\$ 53,000	\$ 16,960	\$ 69,960	10.0%	\$ 6,996
Evaluator	\$ 68,000	\$ 21,760	\$ 89,760	10.0%	\$ 8,976
			\$ -		\$ -
			\$ -		\$ -
			\$ -		\$ -

TOTAL COST	\$ 258,050
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SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SUBSTANCE USE DISORDER RECOVERY SERVICES - OUTPATIENT CONTRACT
Budget Detail

BUDGET PERIOD: July 1, 2025 to June 30, 2026
PROVIDER NAME: CLASSINATROY

*Explain each expense by line item. Provide an explanation for determination of all figures (rate, duration, quantity, benefits, PFE, etc.). For example, show how indirect costs or overhead were calculated.		
(1)	(2)	(3)
Schedule of Expenditures for Costs	Costs	Cost Assignment Explanation*
TOTAL SALARIES AND BENEFITS	\$ 296,000	
Equipment, Materials and Supplies		
Depreciation - Equipment		
Maintenance - Equipment		
Medical, Dental and Laboratory Supplies		
Membership Dues	\$ 1,000	Shared Program cost of annual dues and fees
Rent and Lease Equipment	\$ 2,049	Monthly shared expense of leased copier
Clothing and Personal Supplies		
Food		
Laundry Services and Supplies		
Small Tools and Instruments		
Training		
Miscellaneous Supplies	\$ 4,400	Program supplies including manuals, binders, etc and office supplies including pens, paper, staples, etc
Operational Expenses		
Communications	\$ 4,328	Annual expense for phones, Zoom accounts and other communications
Depreciation - Structures and Improvements		
Household Expenses		
Insurance		
Interest Expense		
Lease Property Maintenance, Structures, Improvements and Grounds	\$ 4,000	Annual expense for anticipated maintenance, repair and cleaning costs for program
Maintenance - Structures, Improvements, and Grounds		
Miscellaneous Expense		
Office Expense	\$ 16,159	Share of cost for program's EHR (MIS) system
Publications and Legal Notices	\$ 1,368	Printing Costs
Rents & Lease - Land, Structure, and Improvements	\$ 34,407	Share of the program's annual rent for the clinic
Taxes and Licenses	\$ 591	Clinic Licensing and certification fees
Drug Screening and Other Testing	\$ 21,456	Annual expense for drug screening, testing and testing supplies
Utilities	\$ 8,072	Annual shared utility expenses including such items as electricity, gas, water, etc
Other	\$ 550	Program share of costs of such items as Payroll platform and bank platform costs
Professional and Special Services		
Pharmaceutical		
Professional and Special Services	\$ 2,797	Program share of cost for medical consultants and clinical supervision consultants
Transportation		
Transportation		
Travel	\$ 40	Travel costs associated with the program
Gas, Oil, & Maintenance - Vehicles		
Rents & Leases - Vehicles		
Depreciation - Vehicles		
Other Costs		
Administrative Indirect Costs	\$ 66,000	19% HHS Federally Approved Indirect Rate agreement
OTHER:		
TOTAL OPERATING EXPENSES	\$ 171,960	
FEES/OTHER AGENCY REVENUE		
TOTAL EXPENDITURES	\$ 430,000	


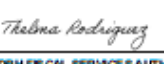

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SUBSTANCE USE DISORDER RECOVERY SERVICES - OUTPATIENT CONTRACT
SCHEDULE A - Proposed Budget

BUDGET PERIOD: July 1, 2025 to June 30, 2026

Contractor Name: <u>CLAREIMATRIX</u>	Prepared by: <u>Rami Assad</u>
Facility Address: <u>812 N. Euclid Ave.</u>	Title: _____
<u>Ontario, CA 91762</u>	Date Prepared: <u>12/23/2024</u>
Provider Number (360x): <u>36DY</u>	

FUNDING SOURCE	Drug Medi-Cal	CalWORKs	AB109	Youth	Block Grant	CFS	TOTAL
Outpatient Treatment (ODF)							
Cost - Individual Counseling	\$ 78,274	\$ -	\$ -	\$ 4,833	\$ 47,270	\$ 19,133	\$ 149,510
Units of Service (15 minute increment)	1,495	0	0	92	903	365	2,855
Interim Rate	\$ 52.37	\$ 0.00	\$ 0.00	\$ 52.37	\$ 52.37	\$ 52.37	\$ 52
Cost - Group Counseling	\$ 60,698	\$ -	\$ -	\$ 946	\$ 40,945	\$ 23,525	\$ 126,114
Units of Service (15 minute increment)	1,159	0	0	18	782	449	2,408
Interim Rate	\$ 52.37	\$ 0.00	\$ 0.00	\$ 52.37	\$ 52.37	\$ 52.37	\$ 52
Intensive Outpatient Treatment (IOT)							
Cost - Individual Counseling	\$ 45,073	\$ -	\$ -	\$ -	\$ 54,724	\$ -	\$ 99,797
Units of Service (15 minute increment)	861	0	0	0	1,045	0	1,906
Interim Rate	\$ 52.37	\$ 0.00	\$ 0.00	\$ 0.00	\$ 52.37	\$ 0.00	\$ 52
Cost - Group Counseling	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0
Units of Service (15 minute increment)	0	0	0	0	0	0	0
Interim Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0
Early Intervention Treatment (EI)							
Cost - Individual Counseling							\$ 0
Units of Service (15 minute increment)							0
Interim Rate				\$ 0.00			\$ 0
Cost - Group Counseling							\$ 0
Units of Service (15 minute increment)							0
Interim Rate				\$ 0.00			\$ 0
Recovery Services (RS)							
Cost - Individual Counseling	\$ -						\$ 0
Units of Service (15 minute increment)	0						0
Interim Rate	\$ 0.00				\$ 0.00	\$ 0.00	\$ 0
Cost - Group Counseling							\$ 0
Units of Service (15 minute increment)							0
Interim Rate	\$ 0.00				\$ 0.00	\$ 0.00	\$ 0
Cost - Family Therapy							\$ 0
Units of Service (15 minute increment)							0
Interim Rate	\$ 0.00				\$ 0.00	\$ 0.00	\$ 0
Cost - Recovery Monitoring							\$ 0
Units of Service (15 minute increment)							0
Interim Rate	\$ 0.00				\$ 0.00	\$ 0.00	\$ 0
Case Management (ODF/IOT/EI/RS)							
Cost - ODF Case Management	\$ 15,852	\$ -	\$ -	\$ 1,506	\$ 15,551	\$ 7,342	\$ 40,251
Units of Service (15 minute increment)	303	0	0	29	297	140	769
Interim Rate	\$ 52.37	\$ 0.00	\$ 0.00	\$ 52.37	\$ 52.37	\$ 52.37	\$ 52
Cost - IOT Case Management	\$ 3,050	\$ -	\$ -	\$ -	\$ 11,278	\$ -	\$ 14,328
Units of Service (15 minute increment)	58	0	0	0	215	0	274
Interim Rate	\$ 52.37	\$ 0.00	\$ 0.00	\$ 0.00	\$ 52.37	\$ 0.00	\$ 52
Cost - EI Case Management							\$ 0
Units of Service (15 minute increment)							0
Interim Rate				\$ 0.00		\$ 0.00	\$ 0
Cost - RS Case Management							\$ 0
Units of Service (15 minute increment)							0
Interim Rate	\$ 0.00				\$ 0.00	\$ 0.00	\$ 0
Physician Consultation							
Cost	\$ 0						\$ 0
Units of Service (15 minute increment)	0						0
Interim Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0
Medication Assisted Treatment (MAT)							
Cost	\$ 0	\$ 0			\$ 0		\$ 0
Units of Service (15 minute increment)	0	0			0	0	0
Interim Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0
SUMMARY OF ALL SERVICES							
Total Costs	\$ 202,947	\$ 0	\$ 0	\$ 7,285	\$ 169,768	\$ 50,000	\$ 430,000
Units of Service (15 minute increment)	3,875	0	0	139	3,242	955	8,211

* Round Costs to nearest dollar

APPROVED:	
SIGNATURE: 	PRINTED NAME: Ken Simms
<small>Ken Simms (Jan 16, 2025 09:53 PST)</small>	DATE: Jan 16, 2025
PROMOTER AUTHORIZED SIGNATURE: 	PRINTED NAME: Thelma Rodriguez
<small>Thelma Rodriguez (Jan 16, 2025 11:56 PST)</small>	DATE: Jan 16, 2025
DBH FISCAL SERVICES AUTHORIZED SIGNATURE: 	PRINTED NAME: Michael Sweitzer
<small>Michael Sweitzer (Jan 16, 2025 11:56 PST)</small>	DATE: Jan 16, 2025
DBH PROGRAM MANAGER or DESIGNEE SIGNATURE: _____	PRINTED NAME: _____
	DATE: _____

Federal funds include:	CEDARS#	CEDARS#	Award Name	Federal Agency	Pass-through Agency
Substance Abuse Prevention & Medical Assistance	93.99	93.78	SABG	SAMHSA	State DHCS
			DMC	DHHS	State DHCS



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

The following is a list of items that are not covered by the Levine Act. A Campaign Contribution Disclosure Form will not be required for the following:

- Contracts that are competitively bid and awarded as required by law or County policy
- Contracts with labor unions regarding employee salaries and benefits
- Personal employment contracts
- Contracts under \$50,000
- Contracts where no party receives financial compensation
- Contracts between two or more public agencies
- The review or renewal of development agreements unless there is a material modification or amendment to the agreement
- The review or renewal of competitively bid contracts unless there is a material modification or amendment to the agreement that is worth more than 10% of the value of the contract or \$50,000, whichever is less
- Any modification or amendment to a matter listed above, except for competitively bid contracts.

DEFINITIONS

Actively supporting or opposing the matter: (a) Communicate directly with a member of the Board of Supervisors or other County elected officer [Sheriff, Assessor-Recorder-Clerk, District Attorney, Auditor-Controller/Treasurer/Tax Collector] for the purpose of influencing the decision on the matter; or (b) testifies or makes an oral statement before the County in a proceeding on the matter for the purpose of influencing the County's decision on the matter; or (c) communicates with County employees, for the purpose of influencing the County's decision on the matter; or (d) when the person/company's agent lobbies in person, testifies in person or otherwise communicates with the Board or County employees for purposes of influencing the County's decision in a matter.

Agent: A third-party individual or firm who, for compensation, is representing a party or a participant in the matter submitted to the Board of Supervisors. If an agent is an employee or member of a third-party law, architectural, engineering or consulting firm, or a similar entity, both the entity and the individual are considered agents.

Otherwise related entity: An otherwise related entity is any for-profit organization/company which does not have a parent-subsidary relationship but meets one of the following criteria:

- (1) One business entity has a controlling ownership interest in the other business entity;
- (2) there is shared management and control between the entities; or
- (3) a controlling owner (50% or greater interest as a shareholder or as a general partner) in one entity also is a controlling owner in the other entity.

For purposes of (2), "shared management and control" can be found when the same person or substantially the same persons own and manage the two entities; there are common or commingled funds or assets; the business entities share the use of the same offices or employees, or otherwise share activities, resources or personnel on a regular basis; or there is otherwise a regular and close working relationship between the entities.

Parent-Subsidiary Relationship: A parent-subsidiary relationship exists when one corporation has more than 50 percent of the voting power of another corporation.

Contractors must respond to the questions on the following page. If a question does not apply respond N/A or Not Applicable.

1. Name of Contractor: CLAREIMATRIX
2. Is the entity listed in Question No.1 a nonprofit organization under Internal Revenue Code section 501(c)(3)?
 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
N/A	N/A

6. Name of agent(s) of Contractor:

Company Name	Agent(s)	Date Agent Retained (if less than 12 months prior)
N/A	N/A	N/A

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):
N/A	N/A	N/A

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
N/A	N/A

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.