



Contract Number

16-405 A-4

SAP Number

4400009467

Department of Behavioral Health

Department Contract Representative	Tammi Phillips
Telephone Number	(909) 388-0860
Contractor	Mountain Counseling & Training, Inc.
Contractor Representative	Michael Beavers
Telephone Number	(909) 336-3330
Contract Term	July 1, 2016 – December 31, 2021
Original Contract Amount	\$2,100,000
Amendment Amount	\$255,000
Total Contract Amount	\$2,355,000
Cost Center	9206352200

THIS CONTRACT is entered into in the State of California by and between the County of San Bernardino, hereinafter called the County, and Mountain Counseling & Training referenced above, hereinafter called Contractor.

IT IS HEREBY AGREED AS FOLLOWS:

WITNESSETH:

IN THAT CERTAIN **Contract No. 16-405** by and between the County of San Bernardino, a political subdivision of the State of California, and Contractor for wraparound mental health services, which Contract first became effective July 1, 2016, the following changes are hereby made and agreed to, effective July 1, 2021:

- I. ARTICLE IV Funding and Budgetary Restrictions, paragraph K is hereby amended to read as follows:
 - K. The maximum financial obligation under this contract shall not exceed \$360,000 per fiscal year for fiscal years 2016-17, 2017-18, and 2018-19 and shall not exceed \$510,000 for fiscal year 2019-20 and shall not exceed \$765,000 for fiscal year 2020-21. This amendment shall increase the total contract by \$255,000, from \$2,100,000 to \$2,355,000 for fiscal year 2021-2022. This

amendment hereby adds the Comprehensive Children and Family Support Services (CCFSS) Schedules A and B for fiscal year 2021-22. All previously approved schedules remain in effect.

II. ARTICLE XIII Duration and Termination, paragraph A is hereby amended to read as follows:

A. The term of this Agreement shall be from July 1, 2016 through December 31, 2021 inclusive.

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III. 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.

COUNTY OF SAN BERNARDINO

►

Curt Hagman, Chairman, Board of Supervisors

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

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

By _____
Deputy

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

By _____
(Authorized signature - sign in blue ink)

Name _____
(Print or type name of person signing contract)

Title _____
(Print or Type)

Dated: _____

Address _____

FOR COUNTY USE ONLY

Approved as to Legal Form

►

Dawn Martin, Deputy County Counsel

Date _____

Reviewed for Contract Compliance

►

Natalie Kessee, Contracts Manager

Date _____

Reviewed/Approved by Department

►

Veronica Kelley, Director

Date _____

SCHEDULE A

SCHEDULE A - Planning Estimates

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH

Actual Cost Contract (cost reimbursement)

CCFSS/ Success First Wraparound

FY 2021 - 2022

July 1, 2021 - December 31, 2021 (6 Month)

Prepared by: Stephen Tilden
Title: Chief Financial Officer

Mountains to Arrowhead- Success First/Early Wrap

Contractor Name: Mountain Counseling & Training, Inc.

Provider # 02028

Contract/RFP# 16-405 A3

Address: 340 Highway 138

Crestline, CA 92325-6300

Date Form Completed: 9/15/2020

Date Form Revised:

LINE		MODE OF SERVICE	15- Case Management (01-06,08-09)	15-Outpatient Intensive Care Coordination (07)	15-Outpatient Mental Health Services (10-50)	15-Outpatient Intensive Home Based Services (57)	15-Outpatient TBS (58)	15-Outpatient Medication Support (60)	15-Outpatient Crisis Intervention (70)	60- Support Client Flexible Support (72)	60 - Support Other Non-Medi- Cal Client Support (78)	TOTAL
#		SERVICE FUNCTION										
1	100%	Distribution %	6.50%	11.00%	62.50%	12.00%	2.00%	0.00%	0.50%	4.00%	1.50%	
2		SALARIES	10,788	18,257	103,730	19,916	3,319	0	830		2,490	159,330
3		BENEFITS	2,158	3,651	20,746	3,983	664	0	166		498	31,866
			12,946	21,908	124,477	23,900	3,983	0	996	0	2,987	
4		OPERATING EXPENSES	4,147	7,018	39,878	7,656	1,276	0	319	2,552	957	63,804
5		TOTAL EXPENSES (2+3+4)	17,093	28,926	164,354	31,556	5,259	0	1,315	2,552	3,944	255,000
6		PATIENT FEES										0
7		PATIENT INSURANCE										0
8		MEDI-CARE										0
9		GRANTS/OTHER										0
10		TOTAL AGENCY REVENUES (6+7+8+9)	0	0	0	0	0	0	0	0	0	0
11		CONTRACT AMOUNT (5-10)	17,093	28,926	164,354	31,556	5,259	0	1,315	2,552	3,944	255,000
12	70.00%	MEDI-CAL (FFP) 50.00%	5,982	10,124	57,524	11,045	1,841	0	460	0	0	86,976
13	100%	EPSDT (2011 REALIGNMENT) 36.03%	4,311	7,296	41,452	7,959	1,326	0	332	0	0	62,676
14		MHSA MATCH- 13.97%	1,672	2,828	16,072	3,085	515	0	128			24,300
15		MHSA FUNDING	5,128	8,678	49,306	9,467	1,578	0	394	2,552	3,944	81,048
16	0.00%	AB2726	0	0	0	0	0	0	0	0	0	0
17	0.00%	REALIGNMENT - NET COUNTY	0	0	0	0	0	0	0	0	0	0
18												0
19		FUNDING TOTAL	17,093	28,926	164,354	31,556	5,259	0	1,315	2,552	3,944	255,000
20		NET COUNTY FUNDS (Local Cost) MUST = ZERO										0
21		STATE FUNDING (Including Realignment)	11,111	18,802	106,830	20,511	3,418	0	855	2,552	3,944	168,024
22		FEDERAL FUNDING	5,982	10,124	57,524	11,045	1,841	0	460	0	0	86,976
23		TOTAL FUNDING	17,093	28,926	164,354	31,556	5,259	0	1,315	2,552	3,944	255,000
24		SCHEDULE OF MAXIMUM ALLOWANCES (CCR)	2.20	2.20	2.99	2.99	2.99	5.56	4.20	1.00	1.00	
25		TARGET COST PER UNIT OF SERVICE	1.90	1.90	2.67	2.67	2.45	0.00	4.02	1.00	1.00	
26		UNITS OF TIME (Minutes)	9,015	15,257	61,463	11,801	2,146	0	327			100,010

SCHEDULE B

Schedule B

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH

STAFFING DETAIL

FY 2021 - 2022

July 1, 2021 - December 31, 2021 (6 Month)

Staffing Detail - Personnel (Includes Personal Services Contracts for Professional Services)

Mountains to Arrowhead/Success First

CONTRACTOR NAME: Mountain Counseling & Training, Inc.

Name	Degree/ License	Position Title	Full Time Annual Salary*	Full Time Fringe Benefits*	Total Full Time Salaries & Benefits*	% Cost Allocated Contract Services	(6 Month)	Budgeted Hours of Contract Services	(6 Month)	(6 Month)
							Total Salaries and Benefits Charged to Contract Services		Total Salaries Charged to Contract	Total Benefits Charged to Contract
TBD	AS	Family Specialist	36,000	7,200	43,200	25.00%	5,400	490	4,500	900
TBD	BA	Family Specialist	36,000	7,200	43,200	25.00%	5,400	490	4,500	900
Tyler Glenn	BA	Family Specialist	36,000	7,200	43,200	25.00%	5,400	490	4,500	900
Leona Chen	MA	Family Specialist	36,000	7,200	43,200	25.00%	5,400	490	4,500	900
Kelly Gmeiner-Trisotto	MA	Program Manager	50,000	10,000	60,000	36.00%	10,800	706	9,000	1,800
TBD	BS	Sr Prog Coordinator	37,500	7,500	45,000	36.00%	8,100	706	6,750	1,350
Amy Johnson		Prog. Coord/Office Assistant	32,500	6,500	39,000	36.00%	7,020	706	5,850	THE FOLL
Erin Martinez	BA	Prog. Coord/Office Assistant	32,500	6,500	39,000	36.00%	7,020	706	5,850	1,170
TBD	LMFT	Interim Lead Clinician	52,500	10,500	63,000	36.00%	11,340	706	9,450	1,890
TBD	AMFT/APCC/ACSW	Licensed Clinician	50,000	10,000	60,000	36.00%	10,800	706	9,000	1,800
Susie Gamboa	AMFT	PreLicensed Clinician	47,500	9,500	57,000	48.00%	13,680	941	11,400	2,280
TBD	AMFT/APCC/ACSW	PreLicensed Clinician	47,500	9,500	57,000	100.00%	28,500	1,960	23,750	4,750
Joelle Jacobs	AMFT	PreLicensed Clinician	47,500	9,500	57,000	48.00%	13,680	941	11,400	2,280
TBD	AMFT/APCC/ACSW	PreLicensed Clinician	47,500	9,500	57,000	48.00%	13,680	941	11,400	2,280
Michael Beavers	LMFT	Clinical Director	90,000	18,000	108,000	14.40%	7,776	282	6,480	1,296
Rhonda Boss	LMFT	Clinical Supervisor	75,000	15,000	90,000	36.00%	16,200	706	13,500	2,700
Kelly Simone		Parent Partner/Case Manager	35,000	7,000	42,000	100.00%	21,000	1,960	17,500	3,500
									159,330	31,866

TOTAL COST:	191,196	95,598
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Detail of Fringe Benefits: Employer FICA/Medicare, Workers Comp

Unemployment, Vacation Pay, Sick Pay, Pension and Health Benefits

* = Sub-Contracted Person listed on Schedule "A" Planning as operating expenses, not salaries & benefits.

SCHEDULE B

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH SCHEDULE B

FY 2021 - 2022

Prepared by: Stephen Tilden
Title: Chief Financial Officer

Success First
"Mountains to Arrowhead"

Mountain Counseling &
Contractor Name: **Training, Inc.**
Provider # **02028**
Contract/RFP# **16-405 A3**
Address: **340 Highway 138**
Crestline, CA 92325-6300
Date Form Completed: **9/15/2020**

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, 2021 - December 31, 2021 (6 Month)

						Budget Revision	
ITEM	TOTAL COST TO ORGANIZATION	% CHARGED TO OTHER FUNDING SOURCE	TOTAL COST TO OTHER FUNDING SOURCE	PERCENT CHARGED TO PROGRAM	TOTAL COST TO PROGRAM	Request Change	Revised Budget
1 External Database Fee (.26% of Contract)	\$1,326	0%	\$0	100%	\$663	0	663
2 Building Rent	\$29,200	71.0%	\$20,732	29.00%	\$4,234		4,234
3 Building Maintenance	\$18,500	71.0%	\$13,135	29.00%	\$2,683		2,683
4 Telephone & Internet	\$900	71.0%	\$639	29.00%	\$131		131
5 Program Specific costs	\$7,500	0.0%	\$0	100.00%	\$3,750		3,750
6 Cel Phone--Usage/Access	\$7,900	71.0%	\$5,609	29.00%	\$1,146		1,146
7 Utilities	\$6,500	71.0%	\$4,615	29.00%	\$943		943
8 Equipment	\$25,600	71.0%	\$18,176	29.00%	\$3,712		3,712
9 Office Supplies	\$15,000	71.0%	\$10,650	29.00%	\$2,175		2,175
10 Professional Outside Services	\$22,035	71.0%	\$15,645	29.00%	\$3,195		3,195
11 Interest & Bank Charges	\$13,500	71.0%	\$9,585	29.00%	\$1,958		1,958
12 Insurance	\$3,886	71.0%	\$2,759	29.00%	\$563		563
13 Training, Development, & Resources	\$11,500	71.0%	\$8,165	29.00%	\$1,668		1,668
14 Travel & Mileage	\$18,700	71.0%	\$13,277	29.00%	\$2,712		2,712
15 Dues & Subscriptions	\$4,900	71.0%	\$3,479	29.00%	\$711		711
16 Business Support Services	\$17,800	71.0%	\$12,638	29.00%	\$2,581		2,581
17 General & Administrative (NTE 15%)	\$61,965	0.0%	\$0	100.0%	\$30,983		30,983
SUBTOTAL B:	\$266,712		\$139,104		\$63,804		63,804
GROSS COSTS TOTAL STAFFING AND OPERATING EXPENSES:					\$255,000		

SCHEDULE B

**SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B (SF-EW)
BUDGET NARRATIVE
FY 2021-2022**

Prepared by: Stephen Tilden
Title: CFO

Contractor Name: Mountain Counseling & Training, Inc.
Contract # 16-405
Address: 340 Hwy 138
Crestline, CA 92325-6300
Date Form Completed: 9/15/2020
Updated _____

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, 2021 - December 31, 2021

ITEM		Justification of Cost
1	External Database Fee (.26% of Contract)	Participation in external database is a required aspect of program to facilitate focus of treatment services and reporting of outcomes.
2	Building Rent	Lease/rent for office space. Base rent of \$2187 per month with annual increases of 5%.
3	Building Maintenance	Repairs/improvements related to facility (including landscaping/exterior maintenance, pest control, phone/data infrastructure repair/installation costs), snow removal.
4	Telephone & Internet	Phone and internet costs (landline and internet access).
5	Program Specific costs	Normally unallowed cost specifically permitted in contract. (client Incentives, community outreach)
6	Cell Phone--Usage/Access	Cell Phone costs related to monthly usage (access, governmental fees, etc.).
7	Utilities	Utilities (sanitation , water, gas , trash collection, electric, security, etc.).
8	Equipment	Computers, phones, furniture, copier, printers, related technology (maintenance and purchase).Cell phone equipment purchase costs. Depreciation
9	Office Supplies	Office supplies, computer supplies, postage.
10	Professional Outside Services	Review and/or auditing costs (use of external audit/consulting firm to ensure fidelity to Generally Accepted Accounting Practices and Dept. of Health and Human Services regulations/requirements). Allowable legal costs. Payroll processing service.
11	Interest	Interest on credit lines for daily operations due to timing of county payments.
12	Insurance	Insurance costs including: liability, Directors' & Officers insurance, includes all required/recommended county coverages such as auto, cyber-, sexual misconduct, etc
13	Training, Development, & Resources	Program-related consultants, external and internal staff development and training costs, Includes mandatory County trainings (CPR, First Aid, HIPAA) and program-related trainings such as program-specific best practices, certification training required for classes, and clinical resources.
14	Travel & Mileage	Reimbursement to employees for use of owned vehicles, travel/accomodation related to program-related workshops, leased car (if applicable). Based on IRS rates at 7/1/18 and adjusted quarterly if IRS rates change.
15	Dues & Subscriptions	program-related professional/organizational memberships.
16	Business Support Services	Monthly Electronic Health Records costs, Information Technology consulting support and other costs related to use of technology, includes software subscription costs
17	General & Administrative (NTE 15%)	Includes Executive (e.g. CEO, CFO, HRD, Admn Asst) administrative salaries and wages and related taxes and benefits. Indirect admin. costs will not exceed 15% of direct costs.

SCHEDULE B

**SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
FY 2021 - 2022**

Contractor Name: Mountain Counseling & Training, Inc.
 Provider #: 02028
 Contract/RFP#: 16-405 A3
 Address: 340 Highway 138
 Crestline, CA 92325-6300
 Date Form Completed: 9/15/2020
 Date Form Revised: 2/5/20

ALL YELLOW HIGHLIGHTED AREAS REQUIRE INPUT BY PROVIDER

MONTH	Estimated Units of Service (Minutes)	Planned Clinical FTE's	Required Productivity (based on 168 hours per month per FTE)	Projected Revenue Generated by Service Type							Clients Served		
				Case Mgmt (01-09)	Intensive Care Coordination (07)	Mental Health Services (10-50)	Intensive Home Based Services (57)	TBS (58)	Medication Support (60)	Crisis Intervention (70)	Starting Census		7
											Admissions (Episodes Opened)	Discharges (Episodes Closed)	Monthly Census
Jul-19	8,334	3.66	23%	\$1,424	\$2,411	\$13,696	\$2,630	\$438	\$0	\$110	2	2	7
Aug-19	8,334	3.66	23%	\$1,424	\$2,411	\$13,696	\$2,630	\$438	\$0	\$110	3	2	8
Sep-19	8,334	3.66	23%	\$1,424	\$2,411	\$13,696	\$2,630	\$438	\$0	\$110	4	1	11
Oct-19	8,334	3.66	23%	\$1,424	\$2,411	\$13,696	\$2,630	\$438	\$0	\$110	4	2	13
Nov-19	8,334	3.66	23%	\$1,424	\$2,411	\$13,696	\$2,630	\$438	\$0	\$110	5	2	16
Dec-19	8,334	3.66	23%	\$1,424	\$2,411	\$13,696	\$2,630	\$438	\$0	\$110	3	1	18
Jan-20	8,334	3.66	23%	\$1,424	\$2,411	\$13,696	\$2,630	\$438	\$0	\$110	5	2	21
Feb-20	8,334	3.66	23%	\$1,424	\$2,411	\$13,696	\$2,630	\$438	\$0	\$110	5	3	23
Mar-20	8,334	3.66	23%	\$1,424	\$2,411	\$13,696	\$2,630	\$438	\$0	\$110	5	4	24
Apr-20	8,334	3.66	23%	\$1,424	\$2,411	\$13,696	\$2,630	\$438	\$0	\$110	4	3	25
May-20	8,334	3.66	23%	\$1,424	\$2,411	\$13,696	\$2,630	\$438	\$0	\$110	3	2	26
Jun-20	8,334	3.66	23%	\$1,424	\$2,411	\$13,696	\$2,630	\$438	\$0	\$110	1	4	23
TOTAL	100,010			\$17,093	\$28,926	\$164,354	\$31,556	\$5,259	\$0	\$1,315	44	28	
				Total Revenue					\$248,503	Unduplicated Clients Served			51
									Est. Medi-Cal Cost Per Client:		\$4,873		
									Est. Non-Medi-Cal Cost Per Client:		\$127		
									Est. Total Cost Per Client:		\$5,000		