



Contract Number

18-346-A-2

SAP Number

4400008352

Department of Behavioral Health

Department Contract Representative	Jesus Maciel
Telephone Number	909-388-0887
Contractor	Hearts & Lives
Contractor Representative	Luvia Rodriguez
Telephone Number	(909) 338-3222
Contract Term	July 1, 2018 – September 30, 2024
Original Contract Amount	\$3,091,369
Amendment Amount	\$149,580
Total Contract Amount	\$3,240,949
Cost Center	9203212200

THIS AMENDMENT is entered into in the State of California by and between San Bernardino County, hereinafter called the County, and Hearts & Lives referenced above, hereinafter called Contractor.

IT IS HEREBY AGREED AS FOLLOWS:

WITNESSETH:

IN THAT CERTAIN **Contract No. 18-346** by and between San Bernardino County, a political subdivision of the State of California, and Contractor for 0-5 Comprehensive Treatment Services (CTS): Screening, Assessment, Referral and Treatment (SART) and Early Intervention and Identification Services (EIS), which Contract first became effective July 1, 2018, the following changes are hereby made and agreed to:

- I. ARTICLE IV FUNDING AND BUDGETARY RESTRICTIONS, paragraphs E and K are hereby amended, and paragraph L is hereby added to read as follows:
 - E. County will take into consideration requests for changes to Contract funding, within the existing contracted amount. All requests must be submitted in writing by Contractor to DBH Fiscal no later than March 1 for the operative fiscal year. Requests must be addressed to the Fiscal Designee written on organizational letterhead, and include an explanation of the revisions being requested.

- K. The Contract amendment amount of \$149,580 shall increase the total contract amount from \$3,091,3699 to \$3,240,949 for the contract term.
 - L. The allowable funding sources for this Contract may include: the Children and Families Commission for San Bernardino County (First 5), Federal Financial Participation Medi-Cal, and Mental Health Services Act Prevention and Early Intervention funds.
- 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, 2018, through September 30, 2024 inclusive.
- III. ARTICLE XVI PERSONNEL, paragraphs L and M are hereby added to read as follows:
- L. Executive Order N-6-22 Russia Sanctions

On March 4, 2022, Governor Gavin Newsom issued Executive Order N-6-22 (the EO) regarding Economic Sanctions against Russia and Russian entities and individuals. "Economic Sanctions" refers to sanctions imposed by the U.S. government in response to Russia's actions in Ukraine (<https://home.treasury.gov/policy-issues/financial-sanctions/sanctions-programs-and-country-information/ukraine-russia-related-sanctions>), as well as any sanctions imposed under state law (<https://www.dgs.ca.gov/OLS/Ukraine-Russia>). The EO directs state agencies and their contractors (including by agreement or receipt of a grant) to terminate contracts with, and to refrain from entering any new contracts with, individuals or entities that are determined to be a target of Economic Sanctions. Accordingly, should it be determined that Contractor is a target of Economic Sanctions or is conducting prohibited transactions with sanctioned individuals or entities, that shall be grounds for termination of this agreement. Contractor shall be provided advance written notice of such termination, allowing Contractor at least 30 calendar days to provide a written response. Termination shall be at the sole discretion of the County.
 - M. Campaign Contribution Disclosure (SB 1439)

Contractor has disclosed to the County using Attachment III - Campaign Contribution Disclosure Senate Bill 1439, whether it has made any campaign contributions of more than \$250 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 \$250 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. This amendment hereby adds Schedules A and B for FY 2024/25. All previously approved schedules remain in effect.
- V. This amendment hereby adds ATTACHMENT III "Campaign Contribution Disclosure Form" (SB 1439).

VI. All other terms, conditions and covenants in Contract No. 18-346 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 Amendment. 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.

SAN BERNARDINO COUNTY

HEARTS & LIVES

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

Dawn Rowe, Chair, Board of Supervisors

By  _____
(Authorized signature - sign in blue ink)

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

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

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




Title _____
(Print or Type)

By _____
Deputy

Dated: _____
24028 Lake Drive, Suite A

Address _____
Crestline, CA. 92325

FOR COUNTY USE ONLY

<p>Approved as to Legal Form</p> <p> _____ Dawn Martin, Deputy County Counsel</p> <p>Date _____</p>	<p>Reviewed for Contract Compliance</p> <p> _____ Ellayna Hoatson, Contracts Supervisor</p> <p>Date _____</p>	<p>Reviewed/Approved by Department</p> <p> _____ Georgina Yoshioka, Director</p> <p>Date _____</p>
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SCHEDULE A - Planning Estimates

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH

Early Identification and Intervention Services
(EIIS)

Contractor Name: **Hearts & Lives**

Provider RU # **36KEI/33J9EI**

Contract/RFP# **EIIS 18-346**

Address: **24028 Lake Dr Crestline 92325
PO BOX 4644 Blue Jay 92317**

Date Form Completed: **4/30/24**
Date Form Revised:

Actual Cost Contract (cost reimbursement)

FY 2024 - 2025
July 1, 2024 - September 30, 2024

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

LINE #	MODE OF SERVICE	SERVICE FUNCTION	Early Intervention Services					Prevention Services		TOTAL		
			Case Mgmt and ICC (01-09)	Mental Health Services (10-50)	15-Outpatient Intensive Home Based Services (57)	Medication Support (60)	Crisis Intervention (70)	60 - Client Support Client Flexible Support (72)	Non-Medi-Cal Client Support (78)			
1	100%	Distribution %	5.10%	87.57%	0.00%	0.00%	0.10%		7.23%			
1	100%	Distribution %	5.00%	85.90%	0.00%	0.00%	0.10%	1.91%	7.09%			
EXPENSES												
2		SALARIES	0	5,255	90,280	0	0	105		7,452	103,092	
3		BENEFITS	0	820	14,084	0	0	16		1,162	16,082	
		(2+3 must equal total staffing costs)	0	6,075	104,364	0	0	121	0	8,614	119,174	
4		OPERATING EXPENSES	0	1,520	26,119	0	0	30	581	2,156	30,407	
5		TOTAL EXPENSES (2+3+4)	0	7,595	130,483	0	0	152	581	10,770	149,580	
AGENCY REVENUES												
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	
11		CONTRACT AMOUNT (5-10)	0	7,595	130,483	0	0	152	581	10,770	149,580	
FUNDING												
12	Mix % 99.30%	MEDI-CAL (FFP)	Share % 50.00%	0	3,771	64,785	0	0	75		68,632	
13												
14		PEI Matching Funds (BHSA)	100.00%	0	3,771	64,785	0	0	75		68,632	
15		Provider Matching Funds (If applicable)		0	0	0	0	0			0	
16												
17		FIRST-5 (Non-Medi-Cal)	8.23%	0	53	912	0	0	1	581	10,770	12,317
18		FUNDING TOTAL		0	7,595	130,483	0	0	152	581	10,770	149,580
19		NET COUNTY FUNDS (Local Cost) MUST = ZERO		0	0	0	0	0	0	0	0	
20		STATE FUNDING (Including Realignment)		0	3,771	64,785	0	0	75	0	68,632	
21		AGENCY FUNDING (non-DBH)		0	0	0	0	0	0	0	0	
22		FEDERAL FUNDING		0	3,824	65,697	0	0	76	581	10,770	80,949
23		TOTAL FUNDING		0	7,595	130,483	0	0	152	581	10,770	149,580
24		TARGET COST PER UNIT OF SERVICE			\$0.50	\$0.81	\$0.00	\$0.00	\$0.96			
25		UNITS OF TIME (Days (Mode 05) / Minutes (Mode 15))			15,168	161,491	0	0	159			176,819

Client Days 0

APPROVED:

Luvia Rodriguez

May 6, 2024

Anthony Altamirano
Anthony Altamirano (May 6, 2024 10:07 PDT)

May 6, 2024

Allison Cunningham LCSW SPM

May 6, 2024

PROVIDER AUTHORIZED SIGNATURE

DATE

DBH FISCAL SERVICES

DATE

DBH PROGRAM MANAGER

DATE

Luvia Rodriguez

Anthony Altamirano

Allison Cunningham

PROVIDER AUTHORIZED SIGNER (PRINT NAME)

DBH FISCAL SERVICES (PRINT NAME)

DBH PROGRAM MANAGER (PRINT NAME)

PREPARED BY:

DBH FISCAL SERVICES

**SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B**

FY 2024 - 2025

Prepared by: Nathan Rosado
Title: Fiscal Specialist

Contractor Name: Hearts & Lives
 Provider RU# 36KEI/33J9EI
 Contract/RFP# EIIS 18-346
 Address: 24028 Lake Dr Crestline 92325
PO BOX 4644 Blue Jay 92317
 Date Form Completed: 4/30/24

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, 2024 - September 30, 2024

ITEM	TOTAL COST TO ORGANIZATION	% CHARGED TO OTHER FUNDING SOURCE	TOTAL COST TO OTHER FUNDING SOURCE	PERCENT CHARGED TO PROGRAM	TOTAL COST TO PROGRAM
1 Database Charge	\$0	100%	\$0	0%	\$0
2 Crestline Office Rent	\$10,050	30%	\$3,015	70%	\$7,035
3 Blue Jay Office Rent	\$12,573	12%	\$1,509	88%	\$11,065
4 Crestline Utilities	\$3,633	26%	\$941	74%	\$2,693
5 Blue Jay Utilities	\$780	22%	\$174	78%	\$606
6 Crestline Program Expenses	\$1,494	40%	\$598	60%	\$897
7 Blue Jay Program Expenses	\$558	50%	\$279	50%	\$279
8 Insurances	\$5,173	50%	\$2,586	50%	\$2,586
9 Dues and Subscriptions	\$2,265	15%	\$330	85%	\$1,935
10 Advertising/Business Promotion	\$125	100%	\$125	0%	\$0
11 Food Expenses for Classes/Meetings	\$539	11%	\$57	89%	\$482
12 Program Materials and Supplies	\$1,134	0%	\$0	100%	\$1,134
13 Employee Mileage/Travel Expenses	\$600	24%	\$141	76%	\$459
14 Office Supplies	\$461	35%	\$163	65%	\$297
15 Employee Reimbursement	\$314	0%	\$0	100%	\$314
16 Training	\$0	0%	\$0	100%	\$0
17 Professional Fees	\$6,250	90%	\$5,625	10%	\$625
18		100%	\$0		\$0
54		100%	\$0		\$0
55		100%	\$0		\$0
SUBTOTAL B:	\$45,950		\$15,544		\$30,407
GROSS COSTS TOTAL STAFFING AND OPERATING EXPENSES:					\$149,580

**SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
BUDGET NARRATIVE
FY 2024 - 2025**

Contractor Name: Hearts & Lives
 Provider RU#: 36KEI/33J9EI
 Contract/RFP#: EIIS 18-346
 Address: 24028 Lake Dr Crestline 92325
PO BOX 4644 Blue Jay 92317
 Date Form Completed: 4/30/24

Prepared by: Nathan Rosado
 Title: Fiscal Specialist

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, 2024 - September 30, 2024

ITEM	Justification of Cost
1 Database Charge	Database charge is allocated at .26% of total contract cost. This charge is imposed by county in order to maintain databases services.
2 Crestline Office Rent	Rent is allocated by sq footage used in service of the EIIS program. Total building square footage is 3675 sq ft, with 2874 sq ft dedicated to direct services and remaining space is either indirect cost or shared cost with other programs.
3 Blue Jay Office Rent	Rent is allocated by sq footage used in service of the EIIS program. Total office space is 1740 sq ft, with 12% used for shared contract endeavors and the rest used for direct EIIS services.
4 Crestline Utilities	Utilities include internet, phone, gas, cleaning, water delivery, and electric services to the building. Utility bills are allocated based on rental sq footage and direct cost needed to provide clients with a safe and sanitary environment. Cost that is not directly associated with a part of the building requiring direct
5 Blue Jay Utilities	Utilities for the Blue Jay office include internet, phone, and cleaning services are allocated by rental sq footage. These services are will be considered direct cost as they are only serving the EIIS contract. This is to align with contract requirements for a sanitary working/ services area.
6 Crestline Program Expenses	Program expenses are allocated by direct cost employee Specifically in relation to program and location need. This may include incentives, food items for clients, materials for therapy projects, admission to therapy related activities, environmental enrichment items such as craft tables, or other furniture or
7 Blue Jay Program Expenses	Program expenses are allocated by direct cost employee Specifically in relation to program and location need. This may include incentives, food items for clients, materials for therapy projects, admission to therapy related activities, environmental enrichment items such as craft tables, or other furniture or manipulatives, such as books. This may also include other unforeseen items needed for the betterment of the client receiving behavioral health treatment
8 Insurances	All Insurances are indirect cost allocation from 15% pool. These insurance include D & O, Cyber, Abuse and Molestation. And liability insurance.
9 Dues and Subscriptions	This item is considered both direct or indirect cost depending on the service. HIPPA compliant zoom is considered a direct cost to provide telehealthn services. Therapy Notes is a EHR system utilized by Hearts & Lives to maintain compliance with EHR requirements and is considered a direct cost. Other dues and subscriptions are considered indirect cost and will be indicated in records.
10 Advertising/Business Promotion	Indirect cost Allocated by 15% Indirect. This cost covers website development, brochures, ads, flyers, and other advertising or promotional items support services and the notification to potential clients of services.
11 Food Expenses for Classes/Meetings	Indirect cost from 15% pool. Covers food expenses during case management and other program related staff functions as well as potential classes or group
12 Program Materials and Supplies	Allocated by direct cost FTE considered a direct cost. Materials used by therapists in order to more effectively reach program objectives and treatment goals
13 Employee Mileage/Travel Expenses	This is an as needed direct cost allocation. Travel related expenses, i.e. hotel, meals, parking, taxi, etc. Employee mileage reimbursement for attending mee
14 Office Supplies	General office supplies, i.e. ink cartridges, paper, etc.
15 Employee Reimbursement	This is an as needed direct cost allocation for any program related expense incurred by program staff that is not part of Mileage /Travel expenses, i.e. office
16 Training	Ongoing training, attendance at conferences, company retreats, seminars and workshops. Direct Cost as needed.
17 Professional Fees	Indirect cost Allocated by 15% Indirect. This fees includes, legal fees external auditing firm fees, and book keeping fees.
18	
53	
54	
55	

**SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
FY 2024 - 2025
Service Projections (Mode 15)**

Productivity Expectation: 60%	CM Rate per Min.	MHS Rate/Min	MSS Rate/Min	Crisis Rate/Min
Agency Per Min Rates:	\$2.20	\$3.55	\$5.56	\$4.20
Target Cost Per Unit of Service	\$0.50	\$0.81	\$0.00	\$0.96

Contractor Name:	Hearts & Lives
Provider RU#:	36KEI/33J9EI
Contract/RFP#:	EIIS 18-346
Address:	24028 Lake Dr Crestline 92325
	PO BOX 4644 Blue Jay 92317
Date Form Completed:	4/30/24
Date Form Revised:	

ALL YELLOW HIGHLIGHTED AREAS REQUIRE INPUT BY PROVIDER

MONTH	Estimated Units of Service (Minutes)	Planned Clinical FTE's	Projected Revenue Generated by Service Type							Clients Served		
			Case Management and ICC (01-09)	Mental Health Services (10-50)	Intensive Home Based Services (57)	Medication Support (60)	Crisis Intervention (70)	Starting Census		Monthly Census		
								Admissions (Episodes Opened)	Discharges (Episodes Closed)			
Jul-22	14,735	4.58	\$633	\$10,874	\$0	\$0	\$13	6	2	36		
Aug-22	14,735	4.58	\$633	\$10,874	\$0	\$0	\$13	4	2	38		
Sep-22	14,735	4.58	\$633	\$10,874	\$0	\$0	\$13	4	1	41		
Oct-22	14,735	4.58	\$633	\$10,874	\$0	\$0	\$13	0	0	41		
Nov-22	14,735	4.58	\$633	\$10,874	\$0	\$0	\$13	0	0	41		
Dec-22	14,735	4.58	\$633	\$10,874	\$0	\$0	\$13	0	0	41		
Jan-23	14,735	4.58	\$633	\$10,874	\$0	\$0	\$13	0	0	41		
Feb-23	14,735	4.58	\$633	\$10,874	\$0	\$0	\$13	0	0	41		
Mar-23	14,735	4.58	\$633	\$10,874	\$0	\$0	\$13	0	0	41		
Apr-23	14,735	4.58	\$633	\$10,874	\$0	\$0	\$13	0	0	41		
May-23	14,735	4.58	\$633	\$10,874	\$0	\$0	\$13	0	0	41		
Jun-23	14,735	4.58	\$633	\$10,874	\$0	\$0	\$13	0	0	41		
TOTAL	176,819		\$7,595	\$130,483	\$0	\$0	\$152	14	5			
Total Revenue							\$138,230	Unduplicated Clients Served		46		
Estimated Cost Per Client:								\$3,005				

	15-Outpatient	15-Outpatient	15-Outpatient	15-Outpatient	
	Case Management	Mental Health Services	Medication Support Services	Crisis Intervention	TOTAL
Total Minutes of Services	15,168	161,491	0	159	176,819
Total Monthly Minutes of Services (Average)	1264	13458	0	13	14735
Dosage (minutes) per client per month	31	334	0	0	365
Dosage (hours) per client per month	0.52	5.56	0.00	0.01	6.09

Total Hours Per Unduplicated Client for Duration of the Program: 0.00

Avg Monthly Census	Expected Length of Program (months)
40	



**Campaign Contribution Disclosure
(SB 1439)**

DEFINITIONS

Actively supporting 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: Hearts & Lives
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	

6. Name of agent(s) of Contractor:

Company Name	Agent(s)	Date Agent Retained (if less than 12 months prior)
Hearts & Lives	Luvia Rodriguez	

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		

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	

9. Was a campaign contribution, of more than \$250, 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/County elected officer 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 \$250 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.