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



Contract Number

20-156 A-2

SAP Number 4400013691

Department of Behavioral Health

Department Contract Representative Jesus Maciel **Telephone Number** 909-388-0887 Contractor Valley Star Behavioral Health, Inc. **Contractor Representative** Kent Dunlap **Telephone Number** 310-221-6336 **Contract Term** April 1, 2020 - March 31, 2025 **Original Contract Amount** \$25,008,028 **Amendment Amount** 891,682 **Total Contract Amount** \$25,899,710

920639220

Not Applicable

THIS AMENDMENT is entered into in the State of California by and between San Bernardino County, hereinafter called the County, and Valley Star Behavioral Health, Inc., referenced above, hereinafter called Contractor.

IT IS HEREBY AGREED AS FOLLOWS:

Cost Center

Grant Number (if applicable)

WITNESSETH:

IN THAT CERTAIN **Contract No. 20-156** by and between San Bernardino County, a political subdivision of the State of California, and Contractor for Crisis Walk-In Center Services, which Contract first became effective April 1, 2020, the following changes are hereby made and agreed to, effective April 15, 2024:

- I. ARTICLE IV <u>FUNDING AND BUDGETARY RESTRICTIONS</u>, paragraph I is hereby amended to read as follows:
 - I. The contract amendment amount of \$891,682 shall increase the total contract amount from \$25,008,028 to \$25,899,710 for the contract term.
- II. This amendment hereby adds revised Schedules A and B for Fiscal Years 2023-24 and 2024-25. All previously approved schedules remain in effect.

SAN BERNARDINO COUNTY

- III. ADDENDUM II DESCRIPTION OF PROGRAM SERVICES <u>OVERNIGHT MOBILE CRISIS</u> <u>RESPONSE</u> is hereby replaced.
- IV. 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.

Valley Star Behavioral Health, Inc.

1) aunm Rowe		(Print or type name of corporation, company, contractor, etc.)
- Carrillian		By kent Dunlap
Dawn Rowe, Chair, Board of Supervisors		(Authorized signature - sign in blue ink)
Dated:AUG 2 0 2024		Name Kent Dunlap
SIGNED AND CERTIFIED THAT A COPY		(Print or type name of person signing contract)
DOCUMENT HAS BEEN DELIVERED TO CHAIRMAN OF THE BOARD) THE	Title President and Chief Executive Officer
Typing Monell Silverk of the Board of S San Bernardino C		(Print or Type)
By C. Deputy		Dated: 8/5/2024
Deputy		Address 1585 South D Street, Ste. 101
ARDINO COUNTY		San Bernardino, CA 92408
TADINO C		
FOR COUNTY USE ONLY	Reviewed पर्सा धारा Compl	pliance Revieweଫନ୍ୟରିମେ by Department
Approved Say Sered Sal Form Dawn Martin Dawn Martin, Deputy County Counsel	Ellayna Hoatson	Georgina Yoshioka
MA AND A REPORT AND A STATE OF THE STATE OF		
Date	Date8/6/2024	Date

SCHEDULE A - Planning Estimates

Actual Cost Contract (cost reimbursement)

Sabina Waweru Prepared by: Senior Accountant

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH

Mobile Crisis Response

December 19, 2023 - June 30, 2024 FY 2023/2024

Contractor Name: Valley Star Behavioral Health, Inc Address: 12240 Hesperia Road, Suite A Victorville, CA 92395 Date Form Completed 2/29/2024 Date Form Revised RFP #/Contract #

100%	Distribution 9/	7000 300	1000			
200		33.06%	4.00%	1.00%		
LINE	MODE OF SERVICE	15-Mobile Crisis	15-Crisis Intervention	15-Transportation		
#	SERVICE FUNCTION	Mobile Crisis	Crisis Intervention	Transporation	Profit Margin	TOTAL
	EXPENSES					
1	SALARIES	593,924	25,007	6.252		625.183
2	BENEFITS	151,866	6,394	1,599		159.859
	(1+2 must equal total staffing costs)	745,790	31,402	7,850	0	785.042
3	OPERATING EXPENSES	224,637	9,458	2,365	46.432	282,892
4	TOTAL EXPENSES (1+2+3)	970,427	40,860	10,215	46.432	1.067.934
	AGENCY REVENUES			報の出版報報を引 BBB		
2	PATIENT FEES					C
9	PATIENT INSURANCE					0
7	MEDI-CARE					0
80	GRANTS/OTHER					0
6	TOTAL AGENCY REVENUES (5+6+7+8)	0	0	0	0	0
10	CONTRACT AMOUNT (4-9)	970,427	40,860	10,215	46,432	1,067,934
	Mix % FUNDING Share %					
11	100.00% MHSA	970,427	40,860	10,215	46,432	1,067,934
12						0
13						0
14		-		The state of	1.00	0
15	A Section of the sect					0
16		the section of the section of the	and the state of the state of the			0
17	FUNDING TOTAL	970,427	40,860	10,215	46,432	1,067,934
18	NET COUNTY FUNDS (Local Cost) MUST = ZERO	0	0	0	0	0
19	STATE FUNDING (Including Realignment)	0	0	0	0	0
20	FEDERAL FUNDING	970,427	40,860	10,215	46,432	1,067,934
21	TOTAL FUNDING	970,427	40,860	10,215	46,432	1,067,934

APPROVED:

Gary Barnés (May 9, 2024 09:14 PDT)
PROVIDER AUTHORIZED SIGNATURE Gary Barnes

May 9, 2024

nthony Altamirano (May 9, 2024 09:24 FDT)

DBH FISCAL SERVICES

May 9, 2024 Christina Entz (May 9, 2024 10:59 PDT)

DATE DBH PROGRAM MANAGER

May 9, 2024

Christina Entz

Gary Barnes

DBH FISCAL SERVICES (Print Name) Anthony Altamirano

DBH PROGRAM MANAGER (Print Name)

PROVIDER AUTHORIZED SIGNER (Print Name)

Schedule B

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH STAFFING DETAIL FY 2023/2024 December 19, 2023 - June 30, 2024 (12 months)

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

CONTRACTOR NAME: Valley Star Behavioral Health, Inc

act		5,325	6,624	117	12,138	12,138	12,138	138	12,138	138	316	8.316	316	8,316	8,316	8,316	1,228	2,377	2,483	200	2,163	562	828	598	0	859
Total Benefits Charged to Contract	Services	5,3	9'9	14,417	12.1	12.1	12.1	12,138	12,1	12,138	8.3	8.3	8.3	8,3	8,3	8.3	1.2	2,3	2,4	3	2,1	3	8	3		159,859
Total Salaries Charged to Contract	Services	20,828	25,905	56,384	47,474	47,474	47.474	47,474	47,474	47,474	32,525	32,525	32,525	32,525	32,525	32,525	4,791	9,297	9,712	1,957	8,462	2,195	3,356	2,302	0	625,183
Budgeted Units of Contract	Services																									
Total Salaries and Benefits Charged to	Contract Service	26,153	32,529	70,801	59,612	59,612	59,612	59,612	59,612	59,612	40,841	40,841	40,841	40,841	40,841	40,841	6,019	11,674	12,195	2,457	10,625	2,757	4,214	2,891	0	
% Time Spent on Contract	Services	26%	45%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	%6	14%	14%	%6	28%	%6	%6	%6		
Total Full Time Salaries &	Benefits*	100,498	77,554	70,801	59,612	59,612	59,612	59,612	59,612	59,612	40,841	40,841	40,841	40,841	40,841	40,841	928'99	83,388	87,108	27,305	37,923	30,631	46,821	32,119	0	,
Full Time	Benefits*	20,464	15,792	14,417	12,138	12,138	12,138	12,138	12,138	12,138	8,316	8,316	8,316	8,316	8,316	8,316	13,618	16,980	17,737	5,560	7,722	6,237	9,534	6,540	0	
Full Time Amusi	Salary*	\$ 80,035	\$ 61,762	\$ 56,384	\$ 47,474	\$ 47,474	\$ 47,474	\$ 47,474	\$ 47,474	\$ 47,474	\$ 32,525	\$ 32,525	\$ 32,525	\$ 32,525	\$ 32,525	\$ 32,525	\$ 53,259	\$ 66,409	\$ 69,371	\$ 21,745	\$ 30,201	\$ 24,394	\$ 37,287	\$ 25,579		
Position Title	2007	Administrator	Clinical Supervisor	Licensed Clinician	Mental Health Specialist II	Peer and Family Advocate	Human Resource Manager	Clinical Director	Director of Nursing	Training Clerk	HR Coordinator	Human Resources Assistant	Specialist, Talent Acquisition	Specialist, Training												
Degree/ License		Bachelors/ Masters	MS/LMFT	LMFT/LCSW	LMFT/LCSW	LMFT/LCSW	LMFT/LCSW	LMFT/LCSW	LMFT/LCSW	LMFT/LCSW	GED/HS Diploma	Bachelors/ Masters	MS/LMFT	RN	GED/HS Diploma	Bachelors	Bachelors	Bachelors	Bachelors							
Name		TBD	TBD	TBD	TBD	TBD		TBD		TBD					TBD	TBD				TBD	TBD	TBD	TBD	TBD		

Detail of Fringe Benefits: Employer FICA/Medicare, Workers Compensation, Unemployment, Vacation Pay, Sick Pay, Pension and Health Benefits

785,042

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

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH SCHEDULE B

FY 2023/2024 December 19, 2023 - June 30, 2024

Prepared by: Sabina Waweru Title: Senior Accountant

Contractor Name: Valley Star Behavioral Health, Inc

Address: 12240 Hesperia Road, Suite A Victorville, CA 92395

Date Form Completed: 2/29/2024 Updated

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.

December 19, 2023 - June 30, 2024

	ITEM	TOTAL COST TO ORGANIZATION	PERCENT CHARGED TO OTHER FUNDING	TOTAL COST TO OTHER FUNDING SOURCE	PERCENT CHARGED TO CONTRACT	TOTAL COST TO CONTRACT
-	1 Centralized Services-Admin	\$92,425	%00.0	0\$	100%	\$92,425
2	2 Centralized Services- Program	\$26,382	0.00%	0\$	100%	\$26,382
3	3 Depreciation Expense	\$20,000	0.00%	0\$	100%	\$20,000
4	4 Education/Training	85,900	%00 ⁰	0\$	100%	\$5,900
5	5 Equipment IT	\$25,390	%00'0	0\$	100%	\$25,390
9	6 Insurance	83,970	%00'0	\$0	100%	\$3,970
7	7 Licenses	\$143	%00'0	0\$	100%	\$143
8	8 Maintenance	\$5,717	0.00%	\$0	100%	\$5,717
6	Office Supplies	\$2,500	0.00%	0\$	100%	\$2,500
10	Professional Fees	\$953	%00'0	80	100%	\$953
11	11 Purchased Services	\$4,791	%00'0	0\$	100%	\$4,791
12	12 Recruiting	\$5,800	%00'0	0\$	100%	\$5,800
13	Rent	\$27,596	%00'0	0\$	100%	\$27,596
14	14 Telephone	\$1,000	%00'0	0\$	100%	\$1,000
15	15 Transportation Expense	\$3,000	%00'0	0\$	100%	000'8\$
16	16 Travel	\$2,500	%00'0	0\$	100%	\$2,500
17	17 Office Furniture	\$6,534	%00'0	0\$	100%	\$6,534
18	18 Client Support	\$1,861	%00'0	0\$	100%	\$1,861
19	19 Profit Margin	\$46,432	%00'0	0\$	100%	\$46,432
SUBT	SUBTOTAL B:	\$282,892		0\$		\$282,893

\$236,460 (\$46,432) Less: Operating Income Operating expenses less flex funds

DEPARTMENT OF BEHAVIORAL HEALTH SAN BERNARDINO COUNTY

FY 2023/2024 December 19, 2023 - June 30, 2024 SCHEDULE B BUDGET NARRATIVE

Contractor Name: Valley Star Behavioral Health, Inc

Address: 12240 Hesperia Road, Suite A Victorville, CA 92395

Date Form Completed: 2/29/2024

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. Updated

Title: Senior Accountant

Prepared by: Sabina Waweru

December 19, 2023 - June 30, 2024

ITEM	Justification of Cost
1 Centralized Services-Admin	This is an allocation from SBHG of Administration, Information Technology, Human Resources, Communications, Finance, and associated fringe benefits and expense. Cost(Plus Operating Income) can be up to 15% of total direct costs based on historical costs.
2 Centralized Services- Program	This is a program allocation from Stars Behavioral Health Group of training, outcome research and programs practices, electronic medical records, quality assurance, and associated employee benefits and expenses based on historical costs.
3 Depreciation Expense	Depreciation of company 4 vans at \$833 per month each.
4 Education/Training	Continuing education for employees and required DBH trainings based on historical costs. Plus \$4,000 of start up costs for training.
5 Equipment IT	Includes: laptops, desktops, printers, network switch and software for staff. Based on historical costs.
6 Insurance	Costs of general liability, malpractice, fiduciary, director & officers, property insurance, auto, crime, sexual misconduct and umbrella coverage based on historical costs.
7 Licenses	Business license, and DMH fees based on historical costs.
8 Maintenance	Building maintenance and repairs based on historical costs.
9 Office Supplies	General office supplies such as printing (paper/toner), presentation materials, pens & envelopes and other items that the staff need to perform their functions based on historical costs.
10 Professional Fees	Audit fees based on historial cost.
11 Purchased Services	Dayforce payroll services, shredding, medical waste service, and program expense (Training/Outcomes/EMR) based on historical costs.
12 Recruiting	Job advertising, background checks, and physical exams for new employees based on historical cost.
13 Rent	Est cost of sharing a facility at \$2,164/month (1,133sq. ft. at 1.91 per sq. ft)
14 Telephone	Phone system equipment and installation expense, monthly facility telephone charges and staff celiphone reimbursement based on historical costs.
15 Transportation Expense	Client bus pass, cab fare, gasoline and routine maintenance expense for van.
16 Travel	Employee mileage reimbursement and parking.
17 Office Furniture	Office furniture for the office.
18 Client Support	To cover for Covid Supplies.
19 Profit Margin	5% of Direct Cost (The total of Indirect Admin, and Operating Income cannot exceed 15% of direct costs)

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAMORAL HEALTH SCHEDULE B FY 2023/2024 December 19, 2023 - June 30, 2024

Docusign Envelope ID: 1ED5BD96-2918-445C-8775-F7B0E2F1D360

					FY 2023/2024	3/2024			Contr	actor Name:	Valley Star Ber	Contractor Name: Valley Star Behavioral Health, Inc	4
				ă ă	cernber 19, 20,	December 19, 2023 - June 30, 2024	024			Contract # Address:	12240 Hesperi	onfract # Address: 12240 Hesperia Road, Suite A	
									Date For	Victorville, C. Date Form Completed: 2/29/2024	Victorville, CA 92395 2/29/2024	92395	
Client Service Projections for:	ns for:	December	December 19, 2023 - Ju	June 30, 2024	-					Updated			
	July	August	September	October	November	December	January	February	March	April	May	June	Total
Units of Time (Hours) Mode 15		0	0 0	0	0	0	0	0	0	0	0	0	0
			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			The same of the sa					The second secon	
Projected Cost per Month of Service	of Service			the second second									
15-Mobile Crisis						\$138,632	\$138,632	\$138,632	\$138,632	\$138,632	\$138,632	\$138,632	\$970,427
15-Crisis Intervention						\$5,837	\$5,837	\$5,837	\$5,837	\$5,837	\$5,837	\$5,837	\$40.860
15-Transportation						\$1,459	\$1,459	\$1,459	\$1,459	\$1,459	\$1,459	\$1,459	\$10,215
Number of Clients Served	ъ					32	32	32	32	32	32	32	224

Note: Total Units of time must equal total units of time reported on Schedule A

SCHEDULE A - Planning Estimates

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH

Actual Cost Contract (cost reimbursement)

Senior Accountant Sabina Waweru

Title:

Prepared by:

Mobile Crisis Response

July 1, 2024 - March 31, 2025

Contractor Name: Valley Star Behavioral Health, Inc. Address: 12240 Hesperia Road, Suite A Victorville, CA 92395 Date Form Completed 2/29/2024 Date Form Revised RFP #/Contract #

	CISHIDAHOH /8	93.00 %	4.00%	1.00%			
LINE	MODE OF SERVICE	15-Mobile Crisis	15-Crisis Intervention	15-Transportation			
#	SERVICE FUNCTION	Mobile Crisis	Crisis Intervention	Transporation	Profit Margin	TOTAL	
	EXPENSES						
_	SALARIES	840,590	35,393	8,848		88	884,832
2	BENEFITS	214,939	9,050	2,263		22	226,252
	(1+2 must equal total staffing costs)	1,055,530	44,443	11,111	0	1,11	111,084
က	OPERATING EXPENSES	309,921	13,049	3,262	65,333	36	391,565
4	TOTAL EXPENSES (1+2+3)	1,365,451	57,493	14,373	65,333	1,50	.502,649
	AGENCY REVENUES						all states
2	PATIENT FEES						0
9	PATIENT INSURANCE						0
7	MEDI-CARE						0
∞	GRANTS/OTHER						0
ത	TOTAL AGENCY REVENUES (5+6+7+8)	0	0	0	0		0
10	CONTRACT AMOUNT (4-9)	1,365,451	57,493	14,373	65,333	1,50	.502,649
	Mix % FUNDING Share %	9 The Residence of the Party of					
11	100 00% MHSA 100 00%	1,365,451	57,493	14,373	65,333	1,50	,502,649
12							0
13							0
14							0
15							0
16							0
17	FUNDING TOTAL	1,365,451	57,493	14,373	65,333	1,50	1,502,649
18	NET COUNTY FUNDS (Local Cost) MUST = ZERO	0	0	0	0		0
19	STATE FUNDING (Including Realignment)	0	0	0	0		0
20	FEDERAL FUNDING	1,365,451	57,493	14,373	65,333	1,50	,502,649
21	TOTAL FUNDING	1,365,451	57,493	14,373	65,333	1,50	1,502,649

APPROVED:

GALU BALNES
GARY BATTAGES (MAY 9), 2024 09:13 PDT)
PROVIDER AUTHORIZED SIGNATURE

May 9, 2024

Anthony Altamirano (May 9, 2024 09:23 PDT)
DBH FISCAL SERVICES

May 9, 2024 Christina ent (May 9, 2024 11:00 PDT)
DATE DBH PROGRAM MANAGER

May 9, 2024

Christina Entz

Gary Barnes

Anthony Altamirano

PROVIDER AUTHORIZED SIGNER (Print Name)

DBH FISCAL SERVICES (Print Name)

DBH PROGRAM MANAGER (Print Name)

Schedule B

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

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH

(12 months)

STAFFING DETAIL FY 2023/2024 July 1, 2024 - March 31, 2025

Total Benefits Charged to Contract Services Total Salaries Charged to Contract Services 36,664 79,802 67,192 67,192 67,192 67,192 67,192 67,193 46,033 46,033 46,033 46,033 6,784 13,158 13,745 100,206 84,372 84,372 84,372 84,372 67,803 57,803 57,803 57,803 57,803 8 142,236 109,763 100,206 14,372 14,372 15,803 15,803 15,803 17,803 Total Full Time Salaries & Benefits* Full
Time
Armual
Salary* Position Title Mental Health Specialist II
Peer and Family Advocate
Human Resource Manager
Clinical Director Director of Nursing CONTRACTOR NAME: Valley Star Behavioral Health, Inc Bachelors/ Masters Bachelors MS/LMFT Name

Detail of Fringe Benefits: Employer FICA/Medicare, Workers Compensation, Unemployment, Vacation Pay, Sick Pay, Pension and Health Benefits

1,111,084

TOTAL COST:

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

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH SCHEDULE B

FY 2023/2024 July 1, 2024 - March 31, 2025

Prepared by: Sabina Waweru Title: Senior Accountant

Contractor Name: Valley Star Behavioral Health, Inc

Address: 12240 Hesperia Road, Suite A Victorville, CA 92395

Date Form Completed: 2/29/2024

Updated

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 - March 31, 2025

	ITEM	TOTAL COST TO ORGANIZATION	PERCENT CHARGED TO OTHER FUNDING	TOTAL COST TO OTHER FUNDING SOURCE	PERCENT CHARGED TO CONTRACT	TOTAL COST TO CONTRACT
-	1 Centralized Services-Admin	\$130,665	0.00%	0\$	100%	\$130,665
2	2 Centralized Services- Program	257,667	%00'0	0\$	100%	257,667
က	Depreciation Expense	\$30,000	%00'0	0\$	100%	\$30,000
4	4 Education/Training	\$4,000	%00'0	0\$	100%	\$4,000
သ	5 Equipment IT	\$6,000	%00'0	0\$, 100%	000'9\$
9	6 Insurance	\$7,000	%00'0	0\$	100%	000'2\$
7	7 Licenses	\$250	%00'0	0\$	100%	\$250
80	8 Maintenance	\$10,735	0.00%	0\$	100%	\$10,735
6	9 Office Supplies	\$5,105	%00'0	0\$	100%	\$5,105
10	10 Professional Fees	\$850	%00'0	0\$	100%	\$850
1	11 Purchased Services	\$8,370	%00'0	0\$	100%	\$8,370
12	12 Recruiting	\$5,000	0.00%	0\$	100%	\$5,000
13	13 Rent	838,090	%00'0	0\$	100%	060'82\$
14	14 Telephone	\$2,000	%00'0	0\$	100%	\$2,000
15	15 Transportation Expense	86,000	0.00%	0\$	100%	000'9\$
16	16 Travel	\$8,000	%00'0	0\$	100%	88,000
17	17 Office Furniture	\$2,000	0.00%	0\$	4001	\$2,000
18	18 Client Support	\$3,500	%00'0	0\$	100%	\$3,500
19	19 Food	\$1,000	%00'0	0\$	4001	\$1,000
20	20 Profit Margin	\$65,333	%00'0	0\$	100%	\$65,333
SUB	SUBTOTAL B:	\$391,565		0\$		\$391,565

\$326,232 (\$65,333) \$0 Less: Operating Income Operating expenses less flex funds

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH SCHEDULE B

SCHEDULE B BUDGET NARRATIVE FY 2023/2024 July 1, 2024 - March 31, 2025

Contractor Name: Valley Star Behavioral Health, Inc

Address: 12240 Hesperia Road, Suite A Victorville, CA 92395

Date Form Completed: 2/29/2024

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. Updated

Title: Senior Accountant

Prepared by: Sabina Waweru

July 1, 2024 - March 31, 2025

	Cary 1, 2027 - march 01, 2020
ITEM	Justification of Cost
1 Centralized Services-Admin	This is an allocation from SBHG of Administration, Information Technology, Human Resources, Communications, Finance, and associated fringe benefits and expense. Cost(Plus Operating Income) can be up to 15% of total direct costs based on historical costs.
2 Centralized Services- Program	This is a program allocation from Stars Behavioral Health Group of training, outcome research and programs practices, electronic medical records, quality assurance, and associated employee benefits and expenses based on historical costs.
3 Depreciation Expense	Depreciation of company 4 vans at \$833 per month each.
4 Education∕Training	Continuing education for employees and required DBH trainings based on historical costs.
5 Equipment IT	Includes: laptops, desktops, printers, network switch and software for staff. Based on historical costs.
6 Insurance	Costs of general liability, malpractice, fiduciary, director & officers, property insurance, auto, crime, sexual misconduct and umbrella coverage based on historical costs.
7 Licenses	Business license, and DMH fees based on historical costs.
8 Maintenance	Building maintenance and repairs based on historical costs.
9 Office Supplies	General office supplies such as printing (paper/toner), presentation materials, pens & envelopes and other items that the staff need to perform their functions based on historical costs.
10 Professional Fees	Audit fees based on historcial cost.
11 Purchased Services	Dayforce payroll services, shredding, medical waste service, and program expense (Training/Outcomes/EMR) based on historical costs.
12 Recruiting	Job advertising, background checks, and physical exams for new employees based on historical cost.
13 Rent	Est cost of sharing a facility at \$2,164/month (1,133sq. ft. at 1,91 per sq. ft)
14 Telephone	Phone system equipment and installation expense, monthly facility telephone charges and staff celiphone reimbursement based on historical costs.
15 Transportation Expense	Client bus pass, cab fare, gasoline and routine maintenance expense for van.
16 Travel	Employee mileage reimbursement and parking.
17 Office Furniture	Office furniture for the office.
18 Client Support	To cover for Covid Supplies.
19 Food	Client Food
20 Profit Margin	2.4% of Direct Cost (The total of Indirect Admin. and Operating Income cannot exceed 15% of direct costs)

SAN BERNARDINO COUNTY	DEPARTMENT OF BEHAVIORAL HEALTH	SCHEDOLE B

FY 2023/2024 July 1, 2024 - March 31, 2025

				7	SCHEDOLE B FY 2023/2020 Iuly 1, 2024 - March S	SCHEUULE B FY 2023/2024 July 1, 2024 - March 31, 2025			Contr Date Forn	Contractor Name: Valley Star B Contract # Address: 12240 Hesp	or Name: Valley Star Behavioral Health, I contract # Address: 12240 Hesperia Road, Suite A Victorville, CA 92395 Impleted: 2/29/2024	Contractor Name: Valley Star Behavioral Health, Inc Contract # Address: 12240 Hesperia Road, Suite A Victorville, CA 92395 e Form Completed: 2/29/2024	
Client Service Projections for:	s for:	July 1, 2024 - March	- March 31,	31, 2025						Updated			
	July	August	September	October	November	November December	January	February	March	April	May	June	Total
Units of Time (Hours) Mode 15	0	0	0	0	0	0	0	0	0				0
Projected Cost per Month of Service	f Service						ı						
15-Mobile Crisis	\$151,717	\$151,717	\$151,717	\$151,717	\$151,717	\$151,717	\$151,717	\$151,717	\$151,717				\$1,365,451
15-Crisis Intervention	\$6,388	\$6,388	\$6,388	\$6,388	\$6,388	\$6,388	\$6,388	\$6,388	\$6,388				\$57.493
15-Transportation	\$1,597	\$1,597	\$1,597	\$1,597	\$1,597	\$1,597	\$1,597	\$1,597	\$1,597				\$14,373
Number of Clients Served	35	35	35	35	35	35	35	35	35				314

Note: Total Units of time must equal total units of time reported on Schedule A

DESCRIPTION OF PROGRAM SERVICES OVERNIGHT MOBILE CRISIS RESPONSE

Valley Star Behavioral Health, Inc. 1585 South "D" Street, STE 101 San Bernardino, CA 92408 (510) 635-9705

I. <u>DEFINITION OF RECOVERY, WELLNESS, AND RESILIENCE AND REHABILITATIVE MENTAL</u> HEALTH SERVICES

- Α. Mental Health Recovery, Wellness, and Resilience (RWR) is an approach to helping the individual to live a healthy, satisfying, and hopeful life according to the individual's own values and cultural framework despite limitations and/or continuing effects caused by the individual's mental illness. RWR focuses on client strengths, skills, and possibilities, rather than on illness, deficits, and limitations, to encourage hope (in staff and clients) and progress toward the life the client desires. RWR involves collaboration with clients and their families, support systems and involved others to help take control of major life decisions and client care. RWR encourages involvement or reinvolvement of clients in family, social, and community roles that are consistent with their values, culture, and preferred language; it facilitates hope and empowerment with the goal of counteracting internal and external "stigma"; it improves self-esteem; it encourages client self-management of the client's life and the making of the client's own choices and decisions, it re-integrates clients back into their communities as contributing members; and it achieves a satisfying and fulfilling life for the individual. It is believed that all clients can recover, even if that recovery is not complete. This may at times involve risks as clients move to new levels of functioning. The individual is ultimately responsible for his or her own recovery choices.
- B. For children, the goal of the RWR philosophy of care is to help children (hereinafter used to refer to both children and adolescents) to recover from mistreatment and trauma, to learn more adaptive methods of coping with environmental demands and with their own emotions, and to joyfully discover their potential and their place in the world. RWR focuses on a child's strengths, skills, and possibilities rather than on illness, deficits, and limitations. RWR encourages children to take increasing responsibility for their choices and their behavior, since these choices can lead either in the direction of recovery and growth or in the direction of stagnation and unhappiness. RWR encourages children to assume and to regain family, social, and community roles in which they can learn and grow toward maturity and that are consistent with their values and culture. RWR promotes acceptance by parents and other caregivers and by the community of all children, regardless of developmental level, illness, or disability, and it addresses issues of stigma and prejudice that are related to this. This may involve interacting with the community group's or cultural group's way of viewing mental and emotional problems and differences.
- C. Contractor's Mobile Crisis Response program will provide mobile mental health crisis response from 6:00 p.m. 8:00 a.m. 365 days per year to individuals, their family members, and/or caregivers at the location where the crisis is occurring. Mobile crisis teams shall arrive at the community-based location where a crisis occurs in a timely manner in alignment with the <u>Description of Specific Services to Be Provided</u> article of this Addendum, section B.

II. PERSONS TO BE SERVED

- A. Contractor shall provide mobile crisis response to any individual of any age, gender, ethnicity, or race who is experiencing a mental health crisis and who has been determined by DBH's Crisis Contact Center (CCC) triage staff to require a field response.
- B. Mobile crisis response is available to all cities within the East/Central/West Valleys, and in most High Desert cities.
- C. Telehealth services may be provided to individuals in any city within San Bernardino County which includes East, Central and West Valleys, High Desert, Low Desert, and Mountain regions in accordance with the <u>Description of Specific Services to Be Provided</u> article of this Addendum, section C.

III. PROGRAM DESCRIPTION

- A. Contractor shall provide services as mandated and outlined in the Department of Health Care Services (DHCS) Behavioral Health Information Notice (BHIN) 23-025 or most current guidance issued by DHCS.
- B. Contractor shall have specially trained clinical and paraprofessional staff who provide mobile crisis response in the East/Central Valley, High Desert, and West Valley regions of the County.
- C. Department of Behavioral Health's (DBH) Community Crisis Services (CCS) Crisis Contact Center (CCC) will refer calls that require a mobile response between the hours of 6:00 p.m. and 8:00 a.m. to Contractor.
- D. Contractor shall receive mobile crisis field response call transfers from the CCC. Field responders will provide mobile response to community-based locations that include but are not limited to, schools, DBH clinics, group homes, long-term care facilities except those specified below, Board and Care facilities, parking lots, encampments, private residences, and any other safe location where the crisis is occurring.
 - Mobile crisis services shall not be provided in the following setting due to restrictions in federal law and/or because these facilities and settings are already required to provide other crisis services:
 - a. Emergency Department
 - b. Inpatient Hospital
 - c. Inpatient Psychiatric Hospital
 - d. Intermediate Care Facility
 - e. Mental Health Rehabilitation Center
 - f. Psychiatric Health Facility (PHF)
 - g. Residential SUD treatment and withdrawal management facility
 - h. Special Treatment Program
 - i. Skilled Nursing Facility

- j. Settings subject to the inmate exclusion such as jails, prisons, and juvenile detention facilities
- k. Other crisis stabilization and receiving facilities (e.g., sobering centers, crisis respite, crisis stabilization units, psychiatric inpatient hospitals, crisis residential treatment programs, etc.)
- E. Contractor shall provide mental health services to San Bernardino County residents in the least restrictive manner by providing services on site where the individual is experiencing the mental health crisis.

IV. DESCRIPTION OF SPECIFIC SERVICES TO BE PROVIDED

- A. Contractor shall provide mobile crisis response to individuals experiencing a behavioral health crisis. Hours of operation are 6:00 p.m. to 8:00 a.m., 7 days per week, 365 days per year. Contractor will receive referrals directly from the DBH's Crisis Contact Center (CCC).
- B. Contractor is expected to answer each call and respond via mobile within timeframes outlined in BHIN 23-025 or most current guidance issued by DHCS. Pursuant to BHIN 23-025, mobile crisis teams shall arrive:
 - i. Within 60 minutes of the individual being determined to require mobile crisis services in urban areas, and
 - ii. Within 120 minutes of the individual being determined to require mobile crisis services in rural areas.
 - a. A rural area is defined as an area with less than 50 people per square mile.
- C. Services include crisis intervention via field response or telehealth, as appropriate.
 - There may be situations in which DBH CCC determines that a field response is safe and appropriate; the consumer agrees to the response; the call is routed to the CWIC; and the nature of the call, needs of the consumer, or other situational factors change after the CCC provides a warm handoff to the CWIC. In these instances, Contractor may provide telehealth services. Such instances may include:
 - a. If the individual requests telehealth services only, or
 - b. If the location of the crisis is not within a service area, or
 - c. A team is not available to respond to a service location, or
 - d. For the safety of the team or individual, the most appropriate level of service is via telehealth.
 - 2. One (1) of the required mobile crisis responders may participate in a field response via telehealth in accordance with the "Staffing" chapter of this Addendum.
- D. Additionally, follow-up services must be provided within 72 hours of the initial crisis response to support the individual and/or family.

- 1. If Contractor is unable to provide follow-up services, DBH must be notified within 48 hours of the response so that follow-up may be provided in the remaining 24 hours and ensure appropriate billing. In these instances, Contractor must notate in the chart that DBH provided the follow-up check-in.
- E. Crisis intervention services include but are not limited to conducting a crisis assessment, deescalation and intervention strategies, stabilization, W&I Code §5150/5585 application, safety planning, referrals and linkages, transportation to hospital, psychiatric facility, Crisis Stabilization Unit facility, or Crisis Walk-In Clinic, hospital sits, and follow-up supportive services.

1. Transportation:

- a. Transportation determination is based on staff and consumer safety and is taken into consideration before each transport.
- b. A mobile crisis team shall arrange for or provide transportation to an appropriate level of care or treatment setting. The mobile crisis team may transport the beneficiary directly as part of providing the mobile crisis service. If the mobile crisis team cannot provide transportation itself, or if there are outstanding medical or safety concerns, the mobile crisis steam shall coordinate with non-medical transportation (NMT) providers, emergency medical services (EMS), or law enforcement, if necessary, to arrange transportation and ensure the beneficiary is connected with appropriate care. If EMS, NMT, or law enforcement is utilized to transport the beneficiary directly to a higher level of care, the mobile crisis team shall remain onsite until the transportation provider arrives. At its discretion, the mobile crisis team may have one or more team members accompany the beneficiary inside the vehicle to the higher level of care.

2. Hospital Sits:

- a. Hospital sits consist of sitting with an individual who has been placed on an involuntary psychiatric hold pursuant to WIC sections 5150 or 5585 and is awaiting admittance to an inpatient psychiatric unit or to Arrowhead Regional Medical Center's Psychiatric Emergency Services Unit.
- b. The Contractor is expected to stay with the individual until admitted to the psychiatric unit. The length of each stay is unique; therefore, there is no specific amount of time allocated to the expectation of each sit. Hospital sits may occur:
 - i. when providing relief to law enforcement so they can return to the community to provide public safety services, or
 - ii. when Contractor staff has completed a 5150/5585 application and the individual is awaiting admittance to a psychiatric unit.
- c. If Contractor is on a sit at 8:00 a.m., Contractor may contact DBH CCS for relief and provide a warm hand-off to CCS staff. If no CCS staff are available to relieve Contractor staff at the hospital, Contractor will remain on the sit for the full needed duration. CCS will contact the Contractor as soon as CCS staff become available to take over the sit. It will then be determined if CCS will take over the sit or if the Contractor will remain.

V. BILLING UNIT

For Medi-Cal eligible mobile crisis responses meeting specified criteria, the billing unit is by the encounter. Services may be billed by the encounter for Medi-Cal beneficiaries only. Each encounter must include at minimum, and associated chart documentation must reflect:

- A. Initial face-to-face crisis assessment
- B. Mobile crisis response
- C. Crisis planning
- D. Follow-up check-ins

For those mobile crisis responses that do not meet the above criteria, Contractor shall provide crisis intervention services, for which the billing unit is by the minute. Each unit of crisis intervention service reflects an increment of fifteen (15) minutes.

If the mobile crisis team provides transportation or accompanies a Medi-Cal beneficiary who is being transported by a non-medical transportation (NMT) provider, emergency medical services (EMS), or law enforcement, Contractor shall bill transportation minutes as an add-on service to reflect the expanded nature of the mobile crisis encounter in such circumstances. In these instances, the billing unit is by the minute, where each unit of service reflects an increment of fifteen (15) minutes.

VI. FACILITY LOCATION

Services will be provided in the field, with CWIC field response teams stationed at appropriate locations to enable prompt dispatch, pursuant to section IV.B. of this contract, with primary operations occurring at:

Crisis Walk-In Clinic 12240 Hesperia Road, Suite A Victorville, CA 92395 (760) 245-8837 Open 24 hours a day

- A. Contractor shall obtain the prior written consent of the Director of DBH or designee before terminating mobile crisis services dispatched from the above primary facility location.
- B. Contractor shall notify DBH of all satellite/co-location/alternate dispatch sites.
- C. Changes in sites must be communicated to DBH in writing prior to implementation of the change.
- D. Contractor shall comply with all requirements of the State to maintain Medi-Cal certification for the provision of Mode 15 outpatient services.
- E. Contractor shall have enough vehicles to adequately respond to each mobile crisis field response within the mandated 60 minutes for urban responses and 120 minutes for rural responses.

VII. STAFFING

A. All mobile crisis staff shall be employed by, or contracted for, by the Contractor. Subcontracted agencies are subject to the provisions in the "Subcontractor Status" chapter of this Agreement.

- B. Staff described will work the designated number of hours per week in full time equivalents (FTEs), perform the job functions specified, and meet California Code of Regulations requirements.
- C. All treatment staff providing services with DBH funding shall be licensed, registered, or waivered by the State, according to DBH's policy, and reflect the ethnic population of the community served.
- D. Licensed clinical staff (e.g., Licensed Clinical Social Worker, Licensed Marriage and Family Therapist, Licensed Professional Clinical Counselor), paraprofessional staff (e.g., Social Worker, Mental Health Specialist), and Peer Specialists may provide telehealth (phone or video), or field-based services.

A list of staff who may provide mobile crisis response, as authorized by DHCS, includes:

Q	ualified Mobile Crisis Team Membe	ers to have been a constitution of
Physician	Licensed Marriage and Family Therapist	Psychiatric Technician
Psychologist	Waivered Marriage and Family Therapist	Mental Health Rehabilitation Specialist
Waivered Psychologist	Registered Marriage and Family Therapist	Physician Assistant
Licensed Clinical Social Worker	Registered Nurse	Nurse Practitioner
Waivered Clinical Social Worker	Certified Nurse Specialist	Pharmacist
Registered Clinical Social Worker	Licensed Vocational Nurse	Occupational Therapist
Licensed Professional Clinical Counselor	Community Health Worker	Peer Support Specialist
Waivered Professional Clinical Counselor	Emergency Medical Technician	Other Qualified Provider
Registered Professional Clinical Counselor	Advanced Emergency Medical Technician	

Mobile crisis teams shall meet the following standards:

- A. At least two (2) providers listed in the table above shall be available for the duration of the initial mobile crisis response. It is a best practice for at least two (2) providers to be physically present onsite, but one of the two (2) required team members may participate via telehealth, which includes both synchronous audio-only (e.g., telephone) and video interactions. Telehealth participation in a field response is allowable only when this arrangement:
 - 1. Is necessary because it otherwise would result in a marked delay in a mobile crisis team's response time; and
 - 2. The use of such an arrangement poses no safety concerns for the beneficiary or the single mobile crisis team member who is physically onsite during the initial mobile crisis response.

- B. At least one (1) onsite mobile crisis team member shall be carrying, trained, and able to administer naloxone. Contractor may request naloxone from DBH.
- C. At least one (1) onsite mobile crisis team members shall be able to conduct a crisis assessment.
- D. The mobile crisis team providing the initial mobile crisis response shall include or have access to a Licensed Practitioner of the Healing Arts (LPHA) as defined in the "SUD (Substance Use Disorder) Treatment Services" or "Expanded SUD Treatment Services" section of Supplement 3 to Attachment 3.1-A of the <u>State Plan</u>, or a Licensed Mental Health Professional, including a licensed physician, licensed psychologist, licensed clinical social worker, licensed professional clinical counselor, licensed marriage and family therapist, registered nurse, licensed vocational nurse, or licensed psychiatric technician. For example, a mobile crisis team could consist of one LPHA and one peer support specialist. It also could consist of two peer support specialists who have access to a LPHA via telehealth, which includes both synchronous audio-only (e.g., telephone) and video interactions.
- E. Contractor's mobile crisis response staff will participate in mandatory trainings conducted by the DBH, State of California, or other approved third-party entities.

VIII. ADMINISTRATIVE AND PROGRAMMATIC REQUIREMENTS

Billing requirements:

- A. Contractor must meet Medi-Cal certification requirements to provide Mode 15 outpatient services.
- B. Contractor to utilize DBH's myAvatar Electronic Health Record (EHR) and record all mobile or telehealth responses utilizing applicable billing codes and requirements provided by DBH.

Reporting Requirements:

- A. Contractor is required to upload ROIs within 24 hours of the end of the crisis call to a designated location provided by DBH.
- B. Contractor is required to complete a Progress Note within 24 hours of the mobile/telehealth response.
- C. Contractor shall track and report all mandatory trainings Contractor's mobile crisis response staff attend.
- D. Contractor shall provide reports and/or data applicable to the provision of mobile crisis response as requested by DBH.
- E. In all applicable instances, Contractor shall abide by protocols related to Community Crisis Services (CCS) response procedures, placements and referrals, special consideration responses, legal issues and reporting, and other applicable components of the CCS Program Guide. DBH will provide Contractor with all applicable protocols.
- F. Contractor shall submit two (2) chart audits on a monthly basis to demonstrate compliance with chart documentation requirements. One (1) chart shall be for a documented mobile crisis service (meeting federal benefit criteria), and one (1) chart shall be for a documented crisis intervention service (not meeting federal benefit criteria). In the event that one of these services was not

provided within the given month, two (2) chart audits of the other service will be accepted. The tool to be used for these chart audits shall be provided by DBH.

Other Requirements

A. Contractor acknowledges that the requirements outlined herein are consistent with BHIN 23-025 and may be updated at any time to align with the most current guidance issued by DHCS. Updates to these requirements will be communicated to Contractor in writing by DBH.

IX. COUNTY DEPARTMENT OF BEHAVIORAL HEALTH RESPONSIBILITIES

- A. DBH will provide standardized mobile crisis response tools.
- B. DBH shall provide Contractor with a list of mandatory mobile crisis response trainings.
- C. DBH shall provide Contractor with the Record of Intervention (ROI) which shall be used to capture required consumer related information. The ROI captures data-specific details of the crisis response, which may be used to prepare reports for DBH, and the State.
- D. DBH shall provide Contractor with training on how to complete the ROI.
- E. DBH shall provide Contractor with location of where to upload ROIs.
- F. DBH shall provide Contractor with training on how to determine which billing code to utilize.
- G. DBH shall provide any additional reporting tools, as needed, for capture of necessary data to comply with local, state, federal, and other reporting requirements of the department.
- H. DBH shall provide the Annual Review tool prior to the annual review.
- I. DBH shall provide an approved list of Medi-Cal billing codes.
- J. DBH shall provide training on the use of Naloxone.
- K. DBH shall monitor Contractor annually regarding compliance with the requirements outlined herein.
- L. DBH shall provide technical assistance to Contractor regarding service delivery and documentation requirements.
- M. DBH will provide training material as well as ongoing coaching to Contractor on best practices in partnering with agencies who interact frequently with DBH CCS.

X. SPECIAL PROVISIONS

- A. Contractor shall provide services from 6:00 p.m. to 8:00 a.m., 7 days per week, 365 days per year.
- B. Contractor is responsible for ensuring there is an adequate number of teams available to respond to each mobile crisis throughout the service regions of San Bernardino County.
- C. Contractor and DBH will work jointly to monitor outcome measurements.
- D. Contractor must comply with California Vehicle Restraint Laws which state children transported in motor vehicles must be restrained in the rear seat until they are eight years old or are at least 4 feet, 9 inches in height.

E. Contractor staff who respond to and/or witness medical emergencies involving the administration of intranasal naloxone must document details of the incident in the Unusual Occurrence/Incident Report form or other incident reporting form approved by DBH. Reports must be submitted immediately, but no later than within 24 hours, to the DBH contract monitor or designee.

Staff should attempt to capture elements such as, but not limited to:

- 1. Individual's respiration rate;
- 2. Quality of their respiration;
- 3. Individual's pulse;
- 4. Individual's pupil dilation;
- 5. Individual's level of consciousness;
- 6. Condition the individual was found in:
- 7. Times events transpired; and
- 8. Name/accounts of any witnesses to the medical emergency

XI. OUTCOME MEASURES AND DATA REPORTING REQUIREMENTS

Performance-Based Criteria: DBH shall evaluate Contractor on process and outcomes criteria related to program and operational measures indicative of quality mental health services.

- A. Outcome Data Requirements:
 - 1. Contractor shall be responsible for collecting and entering data via the data collection instrument developed by the County and the State on all clients served. Contractor shall ensure the data is entered electronically and submitted to DBH.
 - 2. Data is captured on the Record of Intervention Form.

DATA INSTRUMENT	DATA SUBMISSION/TIMELINE
County's billing and transactional database system	All CWIC mobile crisis client, episode, and service-related data shall be entered into the County's billing and transactional database system, by the seventh (7 th) day of the month for the previous month's services.
Record of Intervention Form	The Record of Intervention Form shall be submitted to DBH within 24 hours of the end of the crisis call.

- B. <u>Performance-Based Criteria</u>: DBH shall evaluate Contractor on process and outcomes criteria related to program and operational measures indicative of quality mental health services.
 - The following criteria are consistent with the requirements outlined in BHIN 23-025 and may be updated at any time via written notification from DBH to align with the most current guidance issued by DHCS.

BHIN 23-025 Requirement	Performance Target
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ADDENDUM II

Mobile crisis encounter shall, at minimum, include:	 Initial face-to-face crisis assessment Mobile crisis response Complete crisis planning, as appropriate. Follow-up check-in within 72 hours of crisis call.
Mobile crisis response to urban areas	Arrived on scene of crisis within 60 minutes
Mobile crisis response to rural areas	Arrived on scene of crisis within 120 minutes
Required State training	Staff has completed all required State training

2. The following criteria are consistent with DBH's Systemwide Performance Outcomes Framework.

MHSA Goals	Key Outcomes
Reduce unnecessary psychiatric hospitalizations	 Increased use of crisis intervention alternatives (e.g., CRT, CSU) Increase in number of individuals diverted from
	hospitalization