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

SAN BERNARDINO COUNTY

Contract Number
24-596 A-1

SAP Number
4400025523

Department of Behavioral Health

Department Contract Representative	Shane Hibbard-Miller
Telephone Number	(909) 386-8264
Contractor	Riverside-San Bernardino County Indian Health, Inc.
Contractor Representative	Vernon Motschman
Telephone Number	(909) 864-1097
Contract Term	July 1, 2024 through December 31, 2027
Original Contract Amount	$2,000,000
Amendment Amount	$1,500,000
Total Contract Amount	$3,500,000
Cost Center	9203352200
Grant Number (if applicable)	N/A

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO. 1:

San Bernardino County (County) and Riverside-San Bernardino County Indian Health, Inc. (Contractor) hereby agree to amend Contract No. 24-596 as follows:

I. ARTICLE I Definition of Terminology, paragraph I, is hereby added to read as follows:

I. Behavioral Health Services Act (BHSA) - Proposition 1 Behavioral Health Services Act (BHSA): The BHSA, passed in 2024, replaces the Mental Health Services Act (MHSA) of 2004. The MHSA imposed a one percent (1%) tax on personal income over one million dollars ($1,000,000) to serve individuals with serious mental illness (SMI) and individuals that may be at risk of developing serious mental health conditions. The BHSA reforms funding to prioritize services for people with the most significant mental health needs, while adding the treatment of substance use disorders (SUD), expanding housing interventions, and increasing the behavioral health workforce. It also enhances oversight, transparency, and accountability at the state and local levels.

II. ARTICLE IV Performance, paragraph A.1, is hereby added and paragraph E, is hereby amended to read as follows:

1. National Curriculum and Training Institute (NCTI): DBH does not provide or fund the NCTI Crossroads Education program effective July 1, 2026. Providers who previously utilized NCTI due to a DBH program requirement may continue using NCTI at their own expense or may replace NCTI with a DBH approved, evidence based cognitive behavioral intervention practice.

E. Data Collection and Performance Outcome Requirements

Contractor shall comply with all local, State, and Federal regulations regarding local, State, and Federal Performance Outcomes measurement requirements and participate in the outcomes measurement process, as required by the State and/or DBH. For Mental Health Services Act (MHSA) programs and/or Behavioral Health Services Act (BHSA) programs, Contractor agrees to meet the goals and intention of the program as indicated in the related MHSA/BHSA Component Plan and most recent update.

Contractor shall comply with all requests regarding local, State, and Federal Performance Outcomes measurement requirements and participate in the outcomes measurement processes as requested.

MHSOAC, DHCS, OSHPD, DBH and other oversight agencies or their representatives have specific accountability and outcome requirements. Timely reporting is essential for meeting those expectations.

1. Contractor must collect, manage, maintain and update client, service and episode data as well as staffing data as required for local, State, and Federal reporting.
2. Contractor shall provide information by entering or uploading required data into:
    a. County's billing and transactional database system.
    b. DBH's client information system and, when available, its electronic health record system.
    c. The "Data Collection and Reporting" (DCR) system, which collects and manages Full Service Partnership (FSP) information.
    d. Individualized data collection applications as specified by DBH, such as Objective Arts and the Prevention and Early Intervention (PEI) Database.
    e. Any other data or information collection system identified by DBH, the MHSOAC, OSHPD or DHCS.
3. Contractor shall comply with all requirements regarding paper or online forms:
    a. Bi-Annual Client Perception Surveys (paper-based): twice annually, or as designated by DHCS. Contractor shall collect consumer perception data for clients served by the programs. The data to be collected includes, but not limited to, the client's perceptions of the quality and results of services provided by the Contractor.
    b. Client preferred language survey (paper-based), if requested by DBH.
    c. Intermittent services outcomes surveys.

d. Surveys associated with services and/or evidence-based practices and programs intended to measure strategy, program, component, or system level outcomes and/or implementation fidelity.

e. Network Adequacy Certification Tool (NACT) as required by DHCS and per DBH instructions.

4. Data must be entered, submitted and/or updated in a timely manner for:

a. All FSP and non-FSP clients: this typically means that client, episode and service-related data shall be entered into the County's billing and transactional database system.

b. All service, program, and survey data will be provided in accordance with all DBH established timelines.

c. Required information about FSP clients, including assessment data, quarterly updates and key events shall be entered into the DCR online system by the due date or within 48 hours of the event or evaluation, whichever is sooner.

5. Contractor will ensure that data are consistent with DBH's specified operational definitions, that data are in the required format, that data is correct and complete at time of data entry, and that databases are updated when information changes.

6. Data collection requirements may be modified or expanded according to local, State, and/or Federal requirements.

7. Contractor shall submit, monthly, its own analyses of the data collected for the prior month, demonstrating how well the contracted services or functions provided satisfied the intent of the Contract, and indicating, where appropriate, changes in operations that will improve adherence to the intent of the Contract. The format for this reporting will be provided by DBH.

8. Independent research involving clients shall not be conducted without the prior written approval of the Director of DBH. Any approved research must follow the guidelines in the DBH Research Policy.

Note: Independent research means a systematic investigation, including research development, testing and evaluation, designed to develop or contribute to generalizable knowledge. Activities which meet this definition constitute research for purposes of this policy, whether or not they are conducted or supported under a program which is considered research for other purposes. For example, some demonstration and service programs may include research activities.

III. ARTICLE V Funding and Budgetary Restrictions, paragraphs G, I, are hereby amended to read as follows:

G. The allowable funding sources for this Contract may include: Mental Health Services Act funds (MHSA), Behavioral Health Services Act funds (BHSA), and Federal funds used as match funds to draw down federal funds.

I. The contract amendment amount of $1,500,000 shall increase the total contract amount from $2,000,000 to $3,500,000 for the contract term.

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

A. The term of this Agreement shall be from July 1, 2024, through December 31, 2027, inclusive.

V. ARTICLE XVII Personnel, paragraph M, is hereby amended to read as follows:

M. 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 (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 $500 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.

VI. ARTICLE XIX Licensing, Certification and Accreditation, paragraph H.3.a is hereby amended to read as follows:

a. S&I List can be accessed at https://data.chhs.ca.gov/dataset/provider-suspended-and-ineligible-list-s-i-list.

VII. ADDENDUM I, ARTICLE III DESCRIPTION OF SPECIFIC SERVICES TO BE PROVIDED, paragraphs B.9., B.10., and B.10.e., are hereby amended to read as follows:

9. NCTI Crossroads Education and Training Institute (NCTI) may be offered to youth and TAY for providers who previously participated in providing NCTI.

10. Contract provider may provide cognitive behavioral change curriculum classes utilizing the National Curriculum and Training Institute® (NCTI®) Crossroads curriculum and Real Colors® Personality Instrument. Providers who previously utilized NCTI due to a DBH program requirement may continue using NCTI at their own expense or may replace NCTI with a DBH approved, evidence based cognitive behavioral intervention practice.

e. The contract provider is responsible for the costs associated with delivering NCTI® services.

VIII. SCHEDULE A Planning Estimates FY 2026-27 through 2027-28 and SCHEDULE B Program Budget FY 2026-27 through 2027-28 are hereby added as attached.

IX. ATTACHMENT III Campaign Contribution Disclosure (SB 1439) is hereby removed and replaced with Levine Act – Campaign Contribution Disclosure (formerly referred to as Senate Bill 1439) as attached.

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

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

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

SAN BERNARDINO COUNTY

► Dawn Rowe

Dawn Rowe, Chair, Board of Supervisors

Dated: JUN 09 2026

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 San Bernardino County

By _____
Deputy

Riverside-San Bernardino County Indian Health, Inc.
(Print or type name of corporation, company, contractor, etc.)

By ► Signed by: Mark LeBeau
5949EAC1A38478...
(Authorized signature - sign in blue ink)

Name Dr. Mark LeBeau
(Print or type name of person signing contract)

Title Chief Executive Officer
(Print or Type)

Dated: 5/27/2026

Address 11980 Mt. Vernon Ave.

Grand Terrace, CA 92313

FOR COUNTY USE ONLY

Approved as to Legal Form	Reviewed for Contract Compliance	Reviewed/Approved by Department
► Signed by: Dawn Martin	► Signed by: Michael Shin	► Signed by: Joshua Dugas
Dawn Martin, Deputy County Counsel	Michael Shin, Administrative Manager	Joshua Dugas, Acting Director
Date 5/27/2026	Date 5/27/2026	Date 5/28/2026

SCHEDULE A - Planning Estimates

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH

Family Resource Center

Actual Cost Contract (cost reimbursement)

Contractor Name: Riverside-San Bernardino County Indian Health, inc.
Region East Valley
Contract # 24-596
Address: 11980 Mount Vernon Avenue, Grand Terrace, Ca 92313

Prepared by: Vernon Motschman
Title: Program Coordintor

FY 2026 - 2027
July 1, 2026 - June 30, 2027

Date Form Completed: 05/04/2026
Updated 05/04/2026

#		Family Resource Center							TOTAL
		Distribution	15.00%	20.00%	30.00%	35.00%			
			Mode 15		Mode 45				
			Early Intervention Services		Prevention Services				
		COMPONENTS	**Case Management 01-09**	**Mental Health Services 10-19; 30-38; 40-48; 50-57**	**Mental Health Promotion 10-19**	**Community Client Services 20-29**			
1		**EXPENSES**							
2		SALARIES	$ 43,050	$ 57,400	$ 86,100	$ 100,450			$ 287,000
3		BENEFITS	$ 10,763	$ 14,350	$ 21,525	$ 25,113			$ 71,750
4		**(2+3 must equal total staffing costs)**	$ 53,813	$ 71,750	$ 107,625	$ 125,563			$ 358,750
5		OPERATING EXPENSES	$ 21,188	$ 28,250	$ 42,375	$ 49,438			$ 141,250
6		**TOTAL EXPENSES (2+3+5)**	$ 75,000	$ 100,000	$ 150,000	$ 175,000			$ 500,000
7		**AGENCY REVENUES**							
8		PATIENT FEES							$ -
9		PATIENT INSURANCE							$ -
10		GRANTS/OTHER							$ -
11		**TOTAL AGENCY REVENUES (8+9+10)**	$ -	$ -	$ -	$ -			$ -
12		**CONTRACT AMOUNT (6-11)**	$ 75,000	$ 100,000	$ 150,000	$ 175,000			$ 500,000
13		**FUNDING**							
14		MHSA	$ 75,000	$ 100,000	$ 150,000	$ 175,000			$ 500,000
15		**TOTAL FUNDING**	$ 75,000	$ 100,000	$ 150,000	$ 175,000			$ 500,000
16		TARGET COST PER UNIT OF SERVICE (Minutes)	$ 0.86	$ 0.86					
17		UNITS OF TIME (Minutes)	87,048	116,064					
18		**UNDUPLICATED PARTICIPANTS**							
19		TOTAL UNDUPLICATED PARTICIPANTS	480	300	1,000	1,120			2,900
20		COST PER UNDUPLICATED PARTICIPANT	$ 156.25	$ 333.33	$ 150.00	$ 156.25			$ 172.41
21		**SERVICES**							
22		TOTAL SERVICES	960	600	2,100	2,400			6,060
23		COST PER TOTAL SERVICES	$ 78.13	$ 166.67	$ 71.43	$ 72.92			$ 82.51

APPROVED:

Mo Zayed (May 20, 2026 09:11:03 PDT)	05/20/26	Thelma Rodriguez	05/20/26	Jeanine Wymer (May 20, 2026 11:15:46 PDT)	05/20/26
PROVIDER AUTHORIZED SIGNATURE	DATE	DBH PSAS	DATE	DBH PROGRAM MANAGER	DATE
Mo Zayed		Thelma Rodriguez		Jeanine Wymer	
PROVIDER AUTHORIZED SIGNER (PRINT NAME)		DBH PSAS (PRINT NAME)		DBH PROGRAM MANAGER (PRINT NAME)	

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH

Schedule B

STAFFING DETAIL
FY 2026 - 2027
July 1, 2026 - June 30, 2027 (12 months)

Contractor Name: Riverside-San Bernardino County Indian Health, Inc.
Contract # 24-596

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

CONTRACTOR NAME: Riverside-San Bernardino County Indian Health, Inc.

Name	Degree/ License	Position Title	Full Time Annual Salary	Full Time Fringe Benefits	Total Full Time Salaries & Benefits	% Time Spent on Contract Services	Total Salaries and Benefits Charged to Contract Services	Service Hours of Contract Services	Total Salaries Charged to Contract Services	Total Benefits Charged to Contract Services
Vernon Motschman	LAADAC	Program Coordinator	150,000	37,500	187,500	15.00%	28,125	312	22,500	5,625
Savannah Hull	LCSW	Mental Health Provider	75,000	18,750	93,750	100.00%	93,750	2,080	75,000	18,750
Robert Burns	CCAPP	Chemical Dependency Counselor	79,000	19,750	98,750	50.00%	49,375	1,040	39,500	9,875
Maria Ramirez	Diploma/Degree	Prevention Educator	50,000	12,500	62,500	100.00%	62,500	2,080	50,000	12,500
Lita Vicente	Diploma/Degree	Prevention Educator	50,000	12,500	62,500	100.00%	62,500	2,080	50,000	12,500
Jorge Ruiz	Diploma/Degree	Prevention Educator	50,000	12,500	62,500	100.00%	62,500	2,080	50,000	12,500
					0		0	0	0	0
					0		0	0	0	0
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					0		0	0	0	0
					0		0	0	0	0
						TOTAL COST A	358,750	9,672	287,000	71,750

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

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B

July 1, 2026 - June 30, 2027

Prepared by: Vernon Motschman
Title: Program Coordintor

Contractor Name: Riverside-San Bernardino County Indian Health, inc.
Region East Valley
Contract # 24-596
Address: 11980 Mount Vernon Avenue
Grand Terrace, Ca 92313
Date Form Completed: 05/04/2026
Updated 05/04/2026

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.

0

	ITEM	TOTAL COST TO ORGANIZATION	% CHARGED TO OTHER FUNDING SOURCE	TOTAL COST TO OTHER FUNDING SOURCE	PERCENT (%) CHARGED TO CONTRACT	TOTAL COST TO CONTRACT
1	Promotional Items	$22,000	0%	$0	100%	$22,000
2	Educational Items	$20,375	0%	$0	100%	$20,375
3	Transportation	$24,000	0%	$0	100%	$24,000
4	Office Equipement	$10,186	0%	$0	100%	$10,186
5	Staff Training	$10,000	0%	$0	100%	$10,000
6	Consultant	$13,000	0%	$0	100%	$13,000
7	Indirect Cost	$41,689	0%	$0	100%	$41,689
8			100%	$0		$0
9			100%	$0		$0
10			100%	$0		$0
11			100%	$0		$0
12			100%	$0		$0
13			100%	$0		$0
14			100%	$0		$0
15			100%	$0		$0

SUBTOTAL B:	$141,250		$0		$141,250
GROSS TOTAL STAFFING AND OPERATING COSTS					$500,000

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
BUDGET NARRATIVE

July 1, 2026 - June 30, 2027

Contractor Name:	**Riverside-San Bernardino County Indian Health, inc.**
Region	**East Valley**
Contract #	**24-596**
Address:	**11980 Mount Vernon Avenue Grand Terrace, Ca 92313**
Date Form Completed:	**05/04/2026**
Updated	**05/04/2026**

Prepared by: Vernon Motschman
Title: Program Coordintor

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.

0

	ITEM	Justification of Cost
1	Promotional Items	Purchase of pens, notepad, totbags, water bottles, etc during fiscal year July 1, 2026- June 30, 2027 in the amount of $ 22,000.00
2	Educational Items	Purchase of therapy material for group activities during fiscal year July 1, 2026 - June 30, 2027 in the amount of $20,375.00
3	Transportation	Leasing of GSA vehicle during the fiscal year July 1, 2026 - June 30, 2027 in the amount of $24,000.00
4	Office Equipement	Computer, cell phones, ink, paper supplies, printers, etc. during the fiscal year July 01, 2026 - June 30, 2027 in the amount of $
5	Staff Training	Staff development training including cultural competency during the fiscal year July 1, 2026 - June 30,3027 in the amount of $ 10,000.00.
6	Consultant	Job placement activities, wellness activies for program during fiscal year July 1, 2026 - June 30,2027 in the amount of $ 13,000.00
7	Indirect Cost	Indirect cost calculated at 10% $500,000.00/1.10 = $ 41,689.00 during the fiscal year July 01, 2026 - June 30, 2027.
8		
9		
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SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
FY 2026 - 2027

July 1, 2026 - June 30, 2027

Contractor Name: Riverside-San Bernardino County Indian Health, Inc.
Region East Valley
Contract # 24-596
Address: 11980 Mount Vernon Avenue
Grand Terrace, Ca 92313
Date Form Completed: 05/04/2026
Updated 05/04/2026

Year to Date **Unduplicated** Participant Count				
Early Intervention		Mental Health Promotion	Comm. Client Services	Program
Case Management	MHS			
480	300	1,000	1,120	2,900

Family Resource Center

0

Service Projections for:		Jul-26	Aug-26	Sep-26	Oct-26	Nov-26	Dec-26	Jan-27	Feb-27	Mar-27	Apr-27	May-27	Jun-27	TOTAL
Early Intervention Services	Case Management	80	80	80	80	80	80	80	80	80	80	80	80	960
	Mental Health Services	50	50	50	50	50	50	50	50	50	50	50	50	600
Mental Health Promotion		175	175	175	175	175	175	175	175	175	175	175	175	2100
Community Client Services		200	200	200	200	200	200	200	200	200	200	200	200	2400
TOTAL		505	505	505	505	505	505	505	505	505	505	505	505	6060
Hours Projections for:		Jul-26	Aug-26	Sep-26	Oct-26	Nov-26	Dec-26	Jan-27	Feb-27	Mar-27	Apr-27	May-27	Jun-27	TOTAL
Early Intervention Services	Case Management	121	121	121	121	121	121	121	121	121	121	121	121	1,451
	Mental Health Services	161	161	161	161	161	161	161	161	161	161	161	161	1,934
Mental Health Promotion		242	242	242	242	242	242	242	242	242	242	242	242	2,902
Community Client Services		282	282	282	282	282	282	282	282	282	282	282	282	3,385
TOTAL		806	806	806	806	806	806	806	806	806	806	806	806	9,672
Cost Projections for:		Jul-26	Aug-26	Sep-26	Oct-26	Nov-26	Dec-26	Jan-27	Feb-27	Mar-27	Apr-27	May-27	Jun-27	TOTAL
Early Intervention Services	Case Management	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 75,000
	Mental Health Services	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 100,000
Mental Health Promotion		$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 150,000
Community Client Services		$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 175,000
TOTAL		$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 500,000

SCHEDULE A - Planning Estimates

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH

Family Resource Center

Actual Cost Contract (cost reimbursement)

Contractor Name: Riverside-San Bernardino County Indian Health, Inc.
Region East Valley
Contract # 24-596
Address: 119880 Mount Vernon Avenue, Grand Terrace, Ca. 92313
Date Form Completed: 05/04/2026
Updated 05/04/2026

Prepared by: Vernon Motschman
Title: Program Coordinator

FY 2027 - 2028
July 1, 2027 - December 31, 2027

#		Family Resource Center							TOTAL
		Distribution	15.00%	20.00%	30.00%	35.00%			
			Mode 15 Early Intervention Services		Mode 45 Prevention Services				
		COMPONENTS	Case Management 01-09	Mental Health Services 10-19; 30-38; 40-48; 50-57	Mental Health Promotion 10-19	Community Client Services 20-29			
1		EXPENSES							
2		SALARIES	$ 21,525	$ 28,700	$ 43,050	$ 50,225			$ 143,500
3		BENEFITS	$ 5,381	$ 7,175	$ 10,763	$ 12,556			$ 35,875
4		(2+3 must equal total staffing costs)	$ 26,906	$ 35,875	$ 53,813	$ 62,781			$ 179,375
5		OPERATING EXPENSES	$ 10,594	$ 14,125	$ 21,188	$ 24,719			$ 70,625
6		TOTAL EXPENSES (2+3+5)	$ 37,500	$ 50,000	$ 75,000	$ 87,500			$ 250,000
7		AGENCY REVENUES							
8		PATIENT FEES							$ -
9		PATIENT INSURANCE							$ -
10		GRANTS/OTHER							$ -
11		TOTAL AGENCY REVENUES (8+9+10)	$ -	$ -	$ -	$ -			$ -
12		CONTRACT AMOUNT (6-11)	$ 37,500	$ 50,000	$ 75,000	$ 87,500			$ 250,000
13		FUNDING							
14		MHSA	$ 37,500	$ 50,000	$ 75,000	$ 87,500			$ 250,000
15		TOTAL FUNDING	$ 37,500	$ 50,000	$ 75,000	$ 87,500			$ 250,000
16		TARGET COST PER UNIT OF SERVICE (Minutes)	$ 0.86	$ 0.86					
17		UNITS OF TIME (Minutes)	43,524	58,032					
18		UNDUPLICATED PARTICIPANTS							
19		TOTAL UNDUPLICATED PARTICIPANTS	240	150	500	560			1,450
20		COST PER UNDUPLICATED PARTICIPANT	$ 156	$ 333	$ 150	$ 156			$ 172
21		SERVICES							
22		TOTAL SERVICES	480	300	1,050	1,200			3,030
23		COST PER TOTAL SERVICES	$ 78.13	$ 166.67	$ 71.43	$ 72.92			$ 82.51

APPROVED:

PROVIDER AUTHORIZED SIGNATURE	DATE	DBH PSAS	DATE	DBH PROGRAM MANAGER	DATE
Mo Zayed (May 19, 2026 13:57:34 PDT)	05/19/26	Thelma Rodriguez	05/19/26	Jeanine Wymer (May 19, 2026 15:00:52 PDT)	05/19/26
Mo Zayed		Thelma Rodriguez		Jeanine Wymer	
PROVIDER AUTHORIZED SIGNER (PRINT NAME)		DBH PSAS (PRINT NAME)		DBH PROGRAM MANAGER (PRINT NAME)	

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH

Schedule B

STAFFING DETAIL
FY 2027 - 2028
July 1, 2027 - December 31, 2027

Contractor Name: Riverside-San Bernardino County Indian Health, Inc.
Contract # ~~24-596~~

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

CONTRACTOR NAME: **Riverside-San Bernardino County Indian Health, Inc.**

Name	Degree/ License	Position Title	Full Time Annual Salary	Full Time Fringe Benefits	Total Full Time Salaries & Benefits	% Time Spent on Contract Services	Total Salaries and Benefits Charged to Contract Services	Service Hours of Contract Services	Total Salaries Charged to Contract Services	Total Benefits Charged to Contract Services
Vernon Motschman	LAADC	Program Coordinator	150,000	37,500	187,500	15.00%	28,125	156	11,250	2,813
Savannah Hull	LCSW	Mental Health Provider	75,000	18,750	93,750	100.00%	93,750	1,040	37,500	9,375
Robert Burns	CCAPP	Chemical Dependency Counselor	79,000	19,750	98,750	50.00%	49,375	520	19,750	4,938
Maria Ramirez	Diploma/Degree	Prevention Educator	50,000	12,500	62,500	100.00%	62,500	1,040	25,000	6,250
Lila Vicente	Diploma/Degree	Prevention Educator	50,000	12,500	62,500	100.00%	62,500	1,040	25,000	6,250
Jorge Ruiz	Diploma/Degree	Prevention Educator	50,000	12,500	62,500	100.00%	62,500	1,040	25,000	6,250
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
									143,500	35,875
						TOTAL COST A:	179,375	4,836		

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

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B

	Riverside-San Bernardino
Contractor Name:	**County Indian Health, Inc.**
Region	**East Valley**
July 1, 2027 - December 31, 2027 **Contract #**	**24-596**
Address:	**119880 Mount Vernon Avenue**
	Grand Terrace, Ca. 92313
Prepared by: Vernon Motschman	
Title: Program Coordinator	**Date Form Completed:** **05/04/2026**
Updated	**05/04/2026**

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.

0

	ITEM	TOTAL COST TO ORGANIZATIO	% CHARGED TO OTHER FUNDING SOURCE	TOTAL COST TO OTHER FUNDING SOURCE	PERCENT (%) CHARGED TO CONTRACT	TOTAL COST TO CONTRACT
1	Promotional Items	$11,000	0%	$0	100%	$11,000
2	Eductional Items	$12,280	0%	$0	100%	$12,280
3	Transportation	$10,000	0%	$0	100%	$10,000
4	Office Equipement	$6,000	0%	$0	100%	$6,000
5	Staff Training	$4,000	0%	$0	100%	$4,000
6	Consultant	$6,500	0%	$0	100%	$6,500
7	Indirect Rate	$20,845	0%	$0	100%	$20,845
8			100%	$0		$0
9			100%	$0		$0
10			100%	$0		$0
11			100%	$0		$0
12			100%	$0		$0
13			100%	$0		$0
14			100%	$0		$0
15			100%	$0		$0
SUBTOTAL B:		$70,625		$0		$70,625
GROSS TOTAL STAFFING AND OPERATING COSTS						$250,000

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
BUDGET NARRATIVE

July 1, 2027 - December 31, 2027

Riverside-San Bernardino
Contractor Name: County Indian Health, Inc.
Region East Valley
Contract # 24-596
Address: 119880 Mount Vernon Avenue
Grand Terrace, Ca. 92313
Date Form Completed: 05/04/2026
Updated 05/04/2026

Prepared by: Vernon Motschman
Title: Program Coordinator

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.

0

ITEM	Justification of Cost
1 Promotional Items	Purchase of pens, totbages, water bottles, etc during the fiscal July 01, 2027 - December 31, 2027 in the amount of $ 11,000.00
2 Eductional Items	Purchas of therapy materials activities during the fiscal year July 01, 2027 - December 31, 2027 in the amount of $ 12,280.00
3 Transportation	Leasing of GSA vehicles duirng the fiscal year of July 01, 2027 - December 31, 2027 in the amount of $ 10,000.00
4 Office Equipement	Computer, cell phones, ink, paper supplies, printers, etc dring the fiscal year of July 01, 2027 - December 31, 2027 in the amout of $ 6,000.00
5 Staff Training	Staff development training including cultural competency during the fical year of July 01, 2027 - December 31, 2027 in the amount of $ 4,000.00
6 Consultant	Job placement activities, wellness activities for program during the fiscal year of July 01, 2027 - December 31, 2027 in the amount of $ 6,500.00
7 Indirect Rate	Indirect cost calculated at 10%/1.10 = $ 20,845.00 during the fiscal year July 01, 2027- December 31,2027
8	
9	
10	
11	
12	
13	
14	
15	

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
FY 2027 - 2028

July 1, 2027 - December 31, 2027

Contractor Name: Riverside-San Bernardino County Indian Health, Inc.
Region East Valley
Contract # 24-596
Address: 119880 Mount Vernon Avenue
Grand Terrace, Ca. 92313
Date Form Completed: 05/04/2026
Updated 05/04/2026

Year to Date Unduplicated Participant Count				
Early Intervention		Mental Health Promotion	Comm. Client Services	Program
Case Management	MHS			
240	150	500	560	1,450

Family Resource Center

0

Service Projections for:		Jul-27	Aug-27	Sep-27	Oct-27	Nov-27	Dec-27	Jan-28	Feb-28	Mar-28	Apr-28	May-28	Jun-28	TOTAL
Early Intervention Services	Case Management	80	80	80	80	80	80							480
	Mental Health Services	50	50	50	50	50	50							300
Mental Health Promotion		175	175	175	175	175	175							1050
Community Client Services		200	200	200	200	200	200							1200
TOTAL		505	505	505	505	505	505	0	0	0	0	0	0	3030

Hours Projections for:		Jul-27	Aug-27	Sep-27	Oct-27	Nov-27	Dec-27	Jan-28	Feb-28	Mar-28	Apr-28	May-28	Jun-28	TOTAL
Early Intervention Services	Case Management	121	121	121	121	121	121							725
	Mental Health Services	161	161	161	161	161	161							967
Mental Health Promotion		242	242	242	242	242	242							1,451
Community Client Services		282	282	282	282	282	282							1,693
TOTAL		806	806	806	806	806	806	0	0	0	0	0	0	4,836

Cost Projections for:		Jul-27	Aug-27	Sep-27	Oct-27	Nov-27	Dec-27	Jan-28	Feb-28	Mar-28	Apr-28	May-28	Jun-28	TOTAL
Early Intervention Services	Case Management	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 6,250							$ 37,500
	Mental Health Services	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 8,333							$ 50,000
Mental Health Promotion		$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 12,500							$ 75,000
Community Client Services		$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 14,583							$ 87,500
TOTAL		$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ -	$ -	$ -	$ -	$ -	$ -	$ 250,000

SCHEDULE A - Planning Estimates

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
Family Resource Center

Actual Cost Contract (cost reimbursement)

Contractor Name: Riverside-San Bernardino County Indian Health, inc.
Region High Desert
Contract # 24-596
Address: 11980 Mount Vernon Avenue, Grand Terrace, Ca 92313

FY 2026 - 2027
July 1, 2026 - June 30, 2027

Prepared by: Vernon Motschman
Title: Program Coordintor

Date Form Completed: 05/04/2026
Updated 05/04/2026

#		Family Resource Center							TOTAL
		Distribution	15.00%	20.00%	30.00%	35.00%			
			Mode 15		Mode 45				
			Early Intervention Services		Prevention Services				
		COMPONENTS	**Case Management 01-09**	**Mental Health Services 10-19; 30-38; 40-48; 50-57**	**Mental Health Promotion 10-19**	**Community Client Services 20-29**			
1		**EXPENSES**							
2		SALARIES	$ 47,175	$ 62,900	$ 94,350	$ 110,075			$ 314,500
3		BENEFITS	$ 11,794	$ 15,725	$ 23,588	$ 27,519			$ 78,625
4		(2+3 must equal total staffing costs)	$ 58,969	$ 78,625	$ 117,938	$ 137,594			$ 393,125
5		OPERATING EXPENSES	$ 16,031	$ 21,375	$ 32,063	$ 37,406			$ 106,875
6		**TOTAL EXPENSES (2+3+5)**	$ 75,000	$ 100,000	$ 150,000	$ 175,000			$ 500,000
7		**AGENCY REVENUES**							
8		PATIENT FEES							$ -
9		PATIENT INSURANCE							$ -
10		GRANTS/OTHER							$ -
11		**TOTAL AGENCY REVENUES (8+9+10)**	$ -	$ -	$ -	$ -			$ -
12		**CONTRACT AMOUNT (6-11)**	$ 75,000	$ 100,000	$ 150,000	$ 175,000			$ 500,000
13		**FUNDING**							
14		MHSA	$ 75,000	$ 100,000	$ 150,000	$ 175,000			$ 500,000
15		**TOTAL FUNDING**	$ 75,000	$ 100,000	$ 150,000	$ 175,000			$ 500,000
16		TARGET COST PER UNIT OF SERVICE (Minutes)	$ 0.87	$ 0.87					
17		UNITS OF TIME (Minutes)	86,112	114,816					
18		**UNDUPLICATED PARTICIPANTS**							
19		TOTAL UNDUPLICATED PARTICIPANTS	480	300	1,000	1,120			2,900
20		COST PER UNDUPLICATED PARTICIPANT	$ 156.25	$ 333.33	$ 150.00	$ 156.25			$ 172.41
21		**SERVICES**							
22		TOTAL SERVICES	960	600	2,100	2,400			6,060
23		COST PER TOTAL SERVICES	$ 78.13	$ 166.67	$ 71.43	$ 72.92			$ 82.51

APPROVED:

Mo Zayed (May 20, 2026 09:10:37 PDT)	05/20/26	Thelma Rodriguez	05/20/26	Jeanine Wymer (May 20, 2026 11:15:37 PDT)	05/20/26
PROVIDER AUTHORIZED SIGNATURE	DATE	DBH PSAS	DATE	DBH PROGRAM MANAGER	DATE
Mo Zayed		Thelma Rodriguez		Jeanine Wymer	
PROVIDER AUTHORIZED SIGNER (PRINT NAME)		DBH PSAS (PRINT NAME)		DBH PROGRAM MANAGER (PRINT NAME)	

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH

Schedule B

STAFFING DETAIL
FY 2026 - 2027
July 1, 2026 - June 30, 2027 (12 months)

Contractor Name: Riverside-San Bernardino County Indian Health, Inc.
Contract # 24-696

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

CONTRACTOR NAME: Riverside-San Bernardino County Indian Health, Inc.

Name	Degree/ License	Position Title	Full Time Annual Salary	Full Time Fringe Benefits	Total Full Time Salaries & Benefits	% Time Spent on Contract Services	Total Salaries and Benefits Charged to Contract Services	Service Hours of Contract Services	Total Salaries Charged to Contract Services	Total Benefits Charged to Contract Services
Vernon Motschman	LAADAC	Program Coordinator	150,000	37,500	187,500	10.00%	18,750	208	15,000	3,750
Julie Andrews	LCSW	Mental Health Provider	110,000	27,500	137,500	100.00%	137,500	2,080	110,000	27,500
Robert Burns	CCAPP	Chemical Dependency Counselor	79,000	19,750	98,750	50.00%	49,375	1,040	39,500	9,875
TBD	Diploma/Degree	Prevention Educator	50,000	12,500	62,500	100.00%	62,500	2,080	50,000	12,500
Blence Vergara	Diploma/Degree	Prevention Educator	50,000	12,500	62,500	100.00%	62,500	2,080	50,000	12,500
Esthesy Vergara	Diploma/Degree	Clerk	50,000	12,500	62,500	100.00%	62,500	2,080	50,000	12,500
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
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					0		0	0	0	0
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					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
									314,500	78,625

TOTAL COST A:	393,125	0.500

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

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B

July 1, 2026 - June 30, 2027

Prepared by: Vernon Motschman
Title: Program Coordintor

Contractor Name: Riverside-San Bernardino County Indian Health, Inc.
Region High Desert
Contract # 24-596
Address: 11980 Mount Vernon Avenue
Grand Terrace, Ca 92313
Date Form Completed: 05/04/2026
Updated 05/04/2026

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.

0

	ITEM	TOTAL COST TO ORGANIZATION	% CHARGED TO OTHER FUNDING SOURCE	TOTAL COST TO OTHER FUNDING SOURCE	PERCENT (%) CHARGED TO CONTRACT	TOTAL COST TO CONTRACT
1	Promotional Items	$15,000	0%	$0	100%	$15,000
2	Educational Items	$15,000	0%	$0	100%	$15,000
3	Transportation	$12,000	0%	$0	100%	$12,000
4	Office Equipement	$7,186	0%	$0	100%	$7,186
5	Staff Training	$6,000	0%	$0	100%	$6,000
6	Consultant	$10,000	0%	$0	100%	$10,000
7	Indirect Cost	$41,689	0%	$0	100%	$41,689
8			100%	$0		$0
9			100%	$0		$0
10			100%	$0		$0
11			100%	$0		$0
12			100%	$0		$0
13			100%	$0		$0
14			100%	$0		$0
15			100%	$0		$0
SUBTOTAL B:		$106,875		$0		$106,875
GROSS TOTAL STAFFING AND OPERATING COSTS						$500,000

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
BUDGET NARRATIVE

July 1, 2026 - June 30, 2027

Contractor Name: Riverside-San Bernardino County Indian Health, inc.
Region High Desert
Contract # 24-596
Address: 11980 Mount Vernon Avenue
Grand Terrace, Ca 92313
Date Form Completed: 05/04/2026
Updated 05/04/2026

Prepared by: Vernon Motschman
Title: Program Coordintor

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.

0

ITEM	Justification of Cost
1 Promotional Items	Purchase of pens, notepad, totbags, water bottles, etc during fiscal year July 1, 2026- June 30, 2027 in the amount of $ 15,000.00
2 Educational Items	Purchase of therapy material for group activities during fiscal year July 1, 2026 - June 30, 2027 in the amount of $15,000.00
3 Transportation	Leasing of GSA vehicle during the fiscal year July 1, 2026 - June 30, 2027 in the amount of $12,000.00
4 Office Equipement	Computer, cell phones, ink, paper supplies, printers, etc. during the fiscal year July 01, 2026 - June 30, 2027 in the amount of $ 7,186.00.
5 Staff Training	Staff development training including cultural competency during the fiscal year July 1, 2026 - June 30,3027 in the amount of $ 6,000.00.
6 Consultant	Job placement activities, wellness activies for program during fiscal year July 1, 2026 - June 30,2027 in the amount of $ 10,000.00.
7 Indirect Cost	Indirect cost calculated at 10% $500,000.00/1.10 = $ 41,689.00 during the fiscal year July 01, 2026 - June 30, 2027.
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14	
15	

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
FY 2026 - 2027

July 1, 2026 - June 30, 2027

Contractor Name: Riverside-San Bernardino County Indian Health, Inc.
Region High Desert
Contract # 24-596
Address: 11980 Mount Vernon Avenue
Grand Terrace, Ca 92313
Date Form Completed: 05/04/2026
Updated 05/04/2026

Year to Date Unduplicated Participant Count				
Early Intervention		Mental Health Promotion	Comm. Client Services	Program
Case Management	MHS			
480	300	1,000	1,120	2,900

Family Resource Center

0

Service Projections for:		Jul-26	Aug-26	Sep-26	Oct-26	Nov-26	Dec-26	Jan-27	Feb-27	Mar-27	Apr-27	May-27	Jun-27	TOTAL
Early Intervention Services	Case Management	80	80	80	80	80	80	80	80	80	80	80	80	960
	Mental Health Services	50	50	50	50	50	50	50	50	50	50	50	50	600
Mental Health Promotion		175	175	175	175	175	175	175	175	175	175	175	175	2100
Community Client Services		200	200	200	200	200	200	200	200	200	200	200	200	2400
TOTAL		505	505	505	505	505	505	505	505	505	505	505	505	6060
Hours Projections for:		Jul-26	Aug-26	Sep-26	Oct-26	Nov-26	Dec-26	Jan-27	Feb-27	Mar-27	Apr-27	May-27	Jun-27	TOTAL
Early Intervention Services	Case Management	120	120	120	120	120	120	120	120	120	120	120	120	1,435
	Mental Health Services	159	159	159	159	159	159	159	159	159	159	159	159	1,914
Mental Health Promotion		239	239	239	239	239	239	239	239	239	239	239	239	2,870
Community Client Services		279	279	279	279	279	279	279	279	279	279	279	279	3,349
TOTAL		797	797	797	797	797	797	797	797	797	797	797	797	9,568
Cost Projections for:		Jul-26	Aug-26	Sep-26	Oct-26	Nov-26	Dec-26	Jan-27	Feb-27	Mar-27	Apr-27	May-27	Jun-27	TOTAL
Early Intervention Services	Case Management	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 75,000
	Mental Health Services	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 100,000
Mental Health Promotion		$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 150,000
Community Client Services		$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 175,000
TOTAL		$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 500,000

SCHEDULE A - Planning Estimates

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH

Family Resource Center

Actual Cost Contract (cost reimbursement)

FY 2027 - 2028
July 1, 2027 - December 31, 2027

Prepared by: Vernon Motschman
Title: Program Coordinator

Contractor Name: Riverside-San Bernardino County Indian Health, Inc.
Region: High Desert
Contract #: 24-596
Address: 11988D Mount Vernon Avenue, Grand Terrace, Ca. 92313
Date Form Completed: 05/04/2026
Updated: 05/04/2026

		Family Resource Center							
		Distribution	15.00%	20.00%	30.00%	35.00%			
			Mode 15 Early Intervention Services		Mode 45 Prevention Services				TOTAL
#		COMPONENTS	Case Management 01-09	Mental Health Services 10-19; 30-38; 40-48; 50-57	Mental Health Promotion 10-19	Community Client Services 20-29			
1		EXPENSES							
2		SALARIES	$ 20,963	$ 27,950	$ 41,925	$ 48,913			$ 139,750
3		BENEFITS	$ 5,241	$ 6,988	$ 10,481	$ 12,228			$ 34,938
4		(2+3 must equal total staffing costs)	$ 26,203	$ 34,938	$ 52,406	$ 61,141			$ 174,688
5		OPERATING EXPENSES	$ 11,297	$ 15,062	$ 22,594	$ 26,359			$ 75,312
6		TOTAL EXPENSES (2+3+5)	$ 37,500	$ 50,000	$ 75,000	$ 87,500			$ 250,000
7		AGENCY REVENUES							
8		PATIENT FEES							$ -
9		PATIENT INSURANCE							$ -
10		GRANTS/OTHER							$ -
11		TOTAL AGENCY REVENUES (8+9+10)	$ -	$ -	$ -	$ -			$ -
12		CONTRACT AMOUNT (6-11)	$ 37,500	$ 50,000	$ 75,000	$ 87,500			$ 250,000
13		FUNDING							
14		MHSA	$ 37,500	$ 50,000	$ 75,000	$ 87,500			$ 250,000
15		TOTAL FUNDING	$ 37,500	$ 50,000	$ 75,000	$ 87,500			$ 250,000
16		TARGET COST PER UNIT OF SERVICE (Minutes)	$ 0.87	$ 0.87					
17		UNITS OF TIME (Minutes)	43,056	57,408					
18		UNDUPLICATED PARTICIPANTS							
19		TOTAL UNDUPLICATED PARTICIPANTS	240	150	500	560			1,450
20		COST PER UNDUPLICATED PARTICIPANT	$ 156	$ 333	$ 150	$ 156			$ 172
21		SERVICES							
22		TOTAL SERVICES	480	300	1,050	1,200			3,030
23		COST PER TOTAL SERVICES	$ 78.12	$ 166.67	$ 71.43	$ 72.92			$ 82.51

APPROVED:

Mo Zayed (May 19, 2026 14:24:26 PDT)	05/19/26	Thelma Rodriguez	05/19/26	Jeanine Wymer (May 19, 2026 15:07 PDT)	05/19/26
PROVIDER AUTHORIZED SIGNATURE	DATE	DBH PSAS	DATE	DBH PROGRAM MANAGER	DATE
Mo Zayed		Thelma Rodriguez		Jeanine Wymer	
PROVIDER AUTHORIZED SIGNER (PRINT NAME)		DBH PSAS (PRINT NAME)		DBH PROGRAM MANAGER (PRINT NAME)	

DBH FISCAL SERVICES (PREPARED BY):

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH

Schedule B

STAFFING DETAIL
FY 2027 - 2028
July 1, 2027 - December 31, 2027

Contractor Name: Riverside-San Bernardino County Indian Health, Inc.
Contract # 24-596

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

CONTRACTOR NAME: Riverside-San Bernardino County Indian Health, Inc.

Name	Degree/ License	Position Title	Full Time Annual Salary	Full Time Fringe Benefits	Total Full Time Salaries & Benefits	% Time Spent on Contract Services	Total Salaries and Benefits Charged to Contract Services	Service Hours of Contract Services	Total Salaries Charged to Contract Services	Total Benefits Charged to Contract Services
Vernon Motschman	LAADC	Program Coordinator	150,000	37,500	187,500	10.00%	18,750	104	7,500	1,875
Julie Andrews	LCSW	Mental Health Provider	75,000	18,750	93,750	100.00%	93,750	1,040	37,500	9,375
Robert Burns	CCAPP	Chemical Dependency Counselor	79,000	19,750	98,750	50.00%	49,375	520	19,750	4,938
TBD	Diploma/Degree	Prevention Educator	50,000	12,500	62,500	100.00%	62,500	1,040	25,000	6,250
Bianca Vergara	Diploma/Degree	Prevention Educator	50,000	12,500	62,500	100.00%	62,500	1,040	25,000	6,250
Esthelsy Vergara	Diploma/Degree	Clerk	50,000	12,500	62,500	100.00%	62,500	1,040	25,000	6,250
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
					0		0	0	0	0
									139,750	34,938

	TOTAL COST A:	174,688	4,784

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

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B

July 1, 2027 - December 31, 2027

Prepared by: Vernon Motschman
Title: Program Coordinator

Contractor Name: Riverside-San Bernardino County Indian Health, Inc.
Region High Desert
Contract # 24-596
Address: 119880 Mount Vernon Avenue
Grand Terrace, Ca. 92313
Date Form Completed: 05/04/2026
Updated 05/04/2026

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.

0

	ITEM	TOTAL COST TO ORGANIZATION	% CHARGED TO OTHER FUNDING SOURCE	TOTAL COST TO OTHER FUNDING SOURCE	PERCENT (%) CHARGED TO CONTRACT	TOTAL COST TO CONTRACT
1	Promotional Items	$15,000	0%	$0	100%	$15,000
2	Eductional Items	$12,967	0%	$0	100%	$12,967
3	Transportation	$10,000	0%	$0	100%	$10,000
4	Office Equipement	$6,000	0%	$0	100%	$6,000
5	Staff Training	$4,000	0%	$0	100%	$4,000
6	Consultant	$6,500	0%	$0	100%	$6,500
7	Indirect Rate	$20,845	0%	$0	100%	$20,845
8			100%	$0		$0
9			100%	$0		$0
10			100%	$0		$0
11			100%	$0		$0
12			100%	$0		$0
13			100%	$0		$0
14			100%	$0		$0
15			100%	$0		$0
SUBTOTAL B:		$75,312		$0		$75,312
GROSS TOTAL STAFFING AND OPERATING COSTS						$250,000

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
BUDGET NARRATIVE

July 1, 2027 - December 31, 2027

Contractor Name: Riverside-San Bernardino County Indian Health, Inc.
Region High Desert
Contract # 24-596
Address: 119880 Mount Vernon Avenue
Grand Terrace, Ca. 92313
Date Form Completed: 05/04/2026
Updated 05/04/2026

Prepared by: Vernon Motschman
Title: Program Coordinator

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.

0

ITEM	Justification of Cost
1 Promotional Items	Purchase of pens, totbages, water bottles, etc during the fiscal July 01, 2027 - December 31, 2027 in the amount of $ 15,000.00
2 Eductional Items	Purchas of therapy materials activities during the fiscal year July 01, 2027 - December 31, 2027 in the amount of $ 12,967 00
3 Transportation	Leasing of GSA vehicles duirng the fiscal year of July 01, 2027 - December 31, 2027 in the amount of $ 10,000.00
4 Office Equipement	Computer, cell phones, ink, paper supplies, printers, etc dring the fiscal year of July 01, 2027 - December 31, 2027 in the amout of $ 6,000.00
5 Staff Training	Staff development training including cultural competency during the fical year of July 01, 2027 - December 31, 2027 in the amount of $ 4,000.00
6 Consultant	Job placement activities, wellness activities for program during the fiscal year of July 01, 2027 - December 31, 2027 in the amount of $ 6,500.00
7 Indirect Rate	Indirect cost calculated at 10%/1.10 = $ 20,845.00 during the fiscal year July 01, 2027- December 31,2027.
8	
9	
10	
11	
12	
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14	
15	

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
FY 2027 - 2028

July 1, 2027 - December 31, 2027

Contractor Name: Riverside-San Bernardino County Indian Health, Inc.
Region High Desert
Contract # 24-596
Address: 119880 Mount Vernon Avenue
Grand Terrace, Ca. 92313
Date Form Completed: 05/04/2026
Updated 05/04/2026

Year to Date Unduplicated Participant Count				
Early Intervention		Mental Health Promotion	Comm. Client Services	Program
Case Management	MHS			
240	150	500	560	1,450

Family Resource Center

0

Service Projections for:		Jul-27	Aug-27	Sep-27	Oct-27	Nov-27	Dec-27	Jan-28	Feb-28	Mar-28	Apr-28	May-28	Jun-28	TOTAL
Early Intervention Services	Case Management	80	80	80	80	80	80							480
	Mental Health Services	50	50	50	50	50	50							300
Mental Health Promotion		175	175	175	175	175	175							1050
Community Client Services		200	200	200	200	200	200							1200
TOTAL		505	505	505	505	505	505	0	0	0	0	0	0	3030

Hours Projections for:		Jul-27	Aug-27	Sep-27	Oct-27	Nov-27	Dec-27	Jan-28	Feb-28	Mar-28	Apr-28	May-28	Jun-28	TOTAL
Early Intervention Services	Case Management	120	120	120	120	120	120							718
	Mental Health Services	159	159	159	159	159	159							957
Mental Health Promotion		239	239	239	239	239	239							1,435
Community Client Services		279	279	279	279	279	279							1,674
TOTAL		797	797	797	797	797	797	0	0	0	0	0	0	4,784

Cost Projections for:		Jul-27	Aug-27	Sep-27	Oct-27	Nov-27	Dec-27	Jan-28	Feb-28	Mar-28	Apr-28	May-28	Jun-28	TOTAL
Early Intervention Services	Case Management	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 6,250	$ 6,250							$ 37,500
	Mental Health Services	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 8,333	$ 8,333							$ 50,000
Mental Health Promotion		$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 12,500	$ 12,500							$ 75,000
Community Client Services		$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 14,583	$ 14,583							$ 87,500
TOTAL		$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ 41,667	$ -	$ -	$ -	$ -	$ -	$ -	$ 250,000

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-subsidiary 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 pages. If a question does not apply respond N/A or Not Applicable.

ATTACHMENT III

1. Name of Contractor: Riverside-San Bernardino County Indian Health, Inc.

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)
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		

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 $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 ☒

Yes ☐ If **yes**, please provide the contribution information in Question 11.

10. Has an agent of Contractor made a campaign contribution of any amount to any member of the San Bernardino County Board of Supervisors or other elected officer involved with this Contract while award of this Contract is being considered?

    No ☒

    Yes ☐ If **yes**, please provide the contribution information in Question 11.

11. 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 acknowledges that agents are prohibited from making any campaign contributions, regardless of amount, to any member of the Board of Supervisors or other County elected officer involved with this Contract, while award of this Contract is being considered and for 12 months after a final decision by the County. Contractor understands that the other individuals and entities (excluding agents) 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 involved with this Contract, while award of this Contract is being considered and for 12 months after a final decision by the County.