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

SAN BERNARDINO COUNTY

Contract Number

16-403 A-4

SAP Number
4400009483

Department of Behavioral Health

Department Contract Representative	Tammi Phillips
Telephone Number	(909) 388-0860
Contractor	Lutheran Social Services of Southern California
Contractor Representative	LaSharnda Beckwith
Telephone Number	(714) 244-4270
Contract Term	July 1, 2016 – December 31, 2021
Original Contract Amount	$10,950,000
Amendment Amount	$1,275,000
Total Contract Amount	$12,225,000
Cost Center	9206352200 and 9206362200

THIS CONTRACT is entered into in the State of California by and between the County of San Bernardino, hereinafter called the County, and Lutheran Social Services of Southern California referenced above, hereinafter called Contractor.

IT IS HEREBY AGREED AS FOLLOWS:

WITNESSETH:

IN THAT CERTAIN **Contract No. 16-403** by and between the County of San Bernardino, a political subdivision of the State of California, and Contractor for wraparound mental health services, which Contract first became effective July 1, 2016, the following changes are hereby made and agreed to, effective July 1, 2021:

I. ARTICLE IV Funding and Budgetary Restrictions, paragraph K is hereby amended to read as follows:

K. The maximum financial obligation under this contract shall not exceed $1,950,000 per fiscal year for fiscal years 2016-17, 2017-18, and 2018-19 and shall not exceed $2,550,000 for fiscal year 2019-20 and shall not exceed $3,825,000 for fiscal year 2020-21. This amendment shall increase the total contract by 1,275,000, from $10,950,000 to $12,225,000 for fiscal year 2021-

2022. This amendment hereby adds the Comprehensive Children and Family Support Services (CCFSS) Schedules A and B for fiscal year 2021-22. All previously approved schedules remain in effect.

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

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

- REMAINDER OF PAGE INTENTIONALLY LEFT BLANK -

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

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

COUNTY OF SAN BERNARDINO

►

Curt Hagman, Chairman, Board of Supervisors

Dated: MAY 18 2021

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

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

By

Deputy

SAN BERNARDINO COUNTY, CA

Lutheran Social Services of Southern California

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

DocuSigned by:

By

CE4BD7A300A2484

(Authorized signature - sign in blue ink)

Name Lasharnda Beckwith

(Print or type name of person signing contract)

Title President and CEO

(Print or Type)

Dated: 5/6/2021

Address Address

City, State, Zip Code

FOR COUNTY USE ONLY

Approved as to Legal Form	Reviewed for Contract Compliance	Reviewed/Approved by Department
DocuSigned by: Dawn Martin	DocuSigned by: Natalie Kessee	DocuSigned by: Veronica Kelley
Dawn Martin, Deputy County Counsel	Natalie Kessee, Contracts Manager	Veronica Kelley, Director
Date 5/6/2021	Date 5/6/2021	Date 5/6/2021

SCHEDULE A

SCHEDULE A - Planning Estimates

Actual Cost Contract (cost reimbursement)

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH

CCFSS/ Success First Wraparound

FY 2021 - 2022 - Barstow
July 1, 2021 - December 31, 2021

(6 Months)

Contractor Name: Lutheran Social Services
Provider # 00829
Contract/RFP# 16-403 A-3
Address: PO Box 1927
Big Bear Lake, CA 92315
Date Form Completed: 3/9/2021
Date Form Revised:

Prepared by: Eileen Hofer
Title: Senior Director

LINE #		MODE OF SERVICE / SERVICE FUNCTION	15- Case Management (01-06,08-09)	15-Outpatient Intensive Care Coordination (07)	15-Outpatient Mental Health Services (10-50)	15-Outpatient Intensive Home Based Services (57)	15-Outpatient TBS (58)	15-Outpatient Medication Support (60)	15-Outpatient Crisis Intervention (70)	60- Support Client Flexible Support (72)	60 - Support Other Non-Medi-Cal Client Support (78)	TOTAL
1	100%	Distribution %	6.73%	0.60%	62.90%	0.60%	4.02%	0.58%	0.20%	5.16%	19.21%	
		EXPENSES										
2		SALARIES	13,915	1,239	130,011	1,232	8,305	1,201	410		39,699	196,012
3		BENEFITS	4,126	367	38,548	365	2,462	356	122		11,771	58,117
		(2+3 must equal total staffing costs)	18,040	1,607	168,559	1,597	10,767	1,558	532	0	51,469	254,129
4		OPERATING EXPENSES	4,544	405	42,455	402	2,712	392	134	3,485	12,963	67,493
5		TOTAL EXPENSES (2+3+4)	22,584	2,012	211,015	2,000	13,479	1,950	666	3,485	64,433	321,622
		AGENCY REVENUES										
6		PATIENT FEES										0
7		PATIENT INSURANCE										0
8		MEDI-CARE										0
9		GRANTS/OTHER										0
10		TOTAL AGENCY REVENUES (6+7+8+9)	0	0	0	0	0	0	0	0	0	0
11		CONTRACT AMOUNT (5-10)	22,584	2,012	211,015	2,000	13,479	1,950	666	3,485	64,433	321,622
	Mix %	**FUNDING** Share %										
12	70.00%	MEDI-CAL (FFP) 50.00%	7,904	704	73,855	700	4,718	682	233	0	0	88,796
13	53.82%	EPSDT (2011 Realignment) 36.03%	3,066	273	28,643	271	1,830	265	90	0	0	34,438
14		MHSA MATCH 13.97%	4,839	431	45,212	429	2,887	418	143			54,359
15		MHSA FUNDING	6,775	604	63,304	600	4,044	585	200	3,485	64,433	144,029
16	0.00%	AB2726	0	0	0	0	0	0	0	0	0	0
17	0.00%	REALIGNMENT - NET COUNTY	0	0	0	0	0	0	0	0	0	0
18												0
19		FUNDING TOTAL	22,584	2,012	211,015	2,000	13,479	1,950	666	3,485	64,433	321,622
20		NET COUNTY FUNDS (Local Cost) MUST = ZERO	0	0	0	0	0	0	0	0	0	0
21		STATE FUNDING (Including Realignment)	14,680	1,308	137,160	1,300	8,761	1,268	433	3,485	64,433	232,826
22		FEDERAL FUNDING	7,904	704	73,855	700	4,718	682	233	0	0	88,796
23		TOTAL FUNDING	22,584	2,012	211,015	2,000	13,479	1,950	666	3,485	64,433	321,622
24		SCHEDULE OF MAXIMUM ALLOWANCES (CCR)	2.20	2.20	2.99	2.99	2.99	5.56	4.20	1.00	1.00	
25		TARGET COST PER UNIT OF SERVICE	2.20	2.20	2.99	2.99	2.99	5.56	4.20	1.00	1.00	
26		UNITS OF TIME (Minutes)	10,266	914	70,573	669	4,508	351	158			87,440

SCHEDULE B

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH
STAFFING DETAIL
FY 2021 - 2022 - Barstow
July 1, 2021 - December 31, 2021 (6 months)

Schedule B

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

CONTRACTOR NAME: **Lutheran Social Services**

Name	Degree/ License	Position Title	Full Time Annual Salary*	Full Time Fringe Benefits*	Total Full Time Salaries & Benefits*	% Cost Allocated Contract Services	(6 months) Total Salaries and Benefits Charged to Contract Services	Budgeted Hours of Contract Services	(6 months) Total Salaries Charged to Contract Services	(6 months) Total Benefits Charged to Contract Services
Barstow										
Donna Clark	LMFT/LCSW	Clinic Supervisor LCSW, MFT, or Ph.D.	70,000	21,000	91,000	14%	6,370	291	4,900	1,470
To be determined	ASW/AMFTem	Therapist, Associate	50,000	15,000	65,000	100%	32,500	2,080	25,000	7,500
To be determined	Masters	EW Facilitator	50,000	15,000	65,000	100%	32,500	2,080	25,000	7,500
To be determined	Masters	EW Facilitator	50,000	15,000	65,000	100%	32,500	2,080	25,000	7,500
To be determined	BA or BS	EW Specialist	45,000	13,500	58,500	100%	29,250	2,080	22,500	6,750
To be determined	BA or BS	EW Specialist	45,000	13,500	58,500	100%	29,250	2,080	22,500	6,750
To be determined		EW Parent Partner	40,000	12,000	52,000	100%	26,000	2,080	20,000	6,000
To be determined		EW Parent Partner	40,000	12,000	52,000	75%	19,500	1,560	15,000	4,500
To be determined	LVN or Psych Tech	Licensed Vocational Nurse	45,760	13,728	59,488	0.5%	149	10	115	34
Dr. Malik**	M.D.	Psychiatrist	250,000	0	250,000	0.5%	625	10	625	0
Felix Hallig	BS/BA	Area Manager	55,000	16,500	71,500	60%	21,450	1,248	16,500	4,950
Allison Lamm		Office Manager (QAR/Data Entry/Reception)	35,880	10,764	46,644	50%	11,661	1,040	8,970	2,691
Karam Hopi-wong		Assistant Office Manager	29,952	8,986	38,938	50%	9,735	1,040	7,488	2,247
Hofer, Eileen	RN, BSPA	Senior Director	90,000	27,000	117,000	1%	704	25	542	163
Tawanda Counts	LCSW	Clinical Area Director	82,500	15,900	98,400	3%	1,578	67	1,323	255
Trish White		QAR	55,000	16,500	71,500	1%	358	21	550	[illegible]
					0			0	0	0
					0			0	0	0
									196,012	58,117

** Not a W-2 employee, independent contractor! Placed here because this position does units!

TOTAL COST:	254,129

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

SCHEDULE B

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B

FY 2021 - 2022 - Barstow

Contractor Name: **Lutheran Social Services**
Provider # **00829**
Contract/RFP# **16-403 A-3**
Address: **PO Box 1927**
Big Bear Lake, CA 92315
Date Form Completed: **3/9/2021**

Prepared by: Eileen Hofer
Title: Senior Director

Operating Expenses - Please list all operating costs charged to this program, including administrative support costs and management fees along with a detail explanation of the categories below.

July 1, 2021 - December 31, 2021

	ITEM	TOTAL COST TO ORGANIZATION (6 months)	% CHARGED TO OTHER FUNDING SOURCE	TOTAL COST TO OTHER FUNDING SOURCE	PERCENT CHARGED TO PROGRAM	TOTAL COST TO PROGRAM
1	External Database Fee (.26% of Contract)	836	0%	$0	100%	$836
2	Supportive Services	41,706	0%	$0	100%	$41,706
3	Emergency Assistance	1,250	0%	$0	100%	$1,250
4	Equipment Rental	500	0%	$0	100%	$500
5	Information Tech Costs	7,930	0%	$0	100%	$7,930
6	Insurance	183	0%	$0	100%	$183
7	Maintenance	255	0%	$0	100%	$255
8	Misc - Adv, Bank, Printing, Postage, Employee Exp	325	0%	$0	100%	$325
9	Office Supplies	425	0%	$0	100%	$425
9.5	Program Supplies	75	0%	$0	100%	$75
10	Professional/Contract Costs	163	0%	$0	100%	$163
11	Rent	3,750	0%	$0	100%	$3,750
12	Staff Travel/Meetings/ Trainings & Mileage	3,506	0%	$0	100%	$3,506
13	Taxes & Licenses, Dues & Subscriptions	250	0%	$0	100%	$250
14	Telephone & Utilities	2,632	0%	$0	100%	$2,632
15	Vehicle Expense	3,709	0%	$0	100%	$3,709
16	Depreciation	-	0%	$0	100%	$0
SUBTOTAL B:		$67,493		$0		$67,493
GROSS COSTS TOTAL STAFFING AND OPERATING EXPENSES:						$321,621

SCHEDULE B

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
BUDGET NARRATIVE
FY 2021 - 2022 - Barstow

Contractor Name: **Lutheran Social Services**
Provider # **00829**
Contract/RFP# **16-403 A-3**
Address: **PO Box 1927**
Big Bear Lake, CA 92315
Date Form Completed: **3/9/2021**

Prepared by: Eileen Hofer
Title: Senior Director

Budget Narrative for Operating Expenses. Explain each expense by line item. Provide an explanation for determination of all figures (rate, duration, quantity, Benefits, FTE's, etc.) for example explain how overhead or indirect cost were calculated.

July 1, 2021 - December 31, 2021

ITEM	Justification of Cost
1 External Database Fee (.26% of Contract)	Participation in external database is a required aspect of program to facilitate focus of treatment servicesand reporting of outcomes.
2 Supportive Services	Federal allowable indirect admin costs. The federal allowable indirect cost rate is determined between LSS corporate and the federal governement. Costs in this categoary will include the corporate share of audit and legal costs, HR costs, CEO/CFO costs, non-specific SBC accounting (such as payroll), and other corporate expenses that support San Bernardino operations. This will never be more than 15%.of direct costs
3 Emergency Assistance	Client flex funds - any expenses spent on behalf of a client or client's family.
4 Equipment Rental	FTE Allocations: This includes operating lease payments for any kind of rented equipment such as copiers, phones, postage meters, etc. It will not include auto lease payments (see vehicle expense).
5 Information Tech Costs	FTE Allocations This includes all IT related costs including costs associated with Electronic Health Record, maintenece of servers, trouble tickets for computer & laptop issues, web hosting fees, software and hardware upgrades/maintenance, etc.
6 Insurance	FTE Allocations:This includes insurance for professional liablility, commercial, directors and officers, volunteer, auto, and excess/umbrella, insurance. It excludes health insurance and other employee insurances.
7 Maintenance	FTE AllocationsThis includes all building maintenance costs & expenses. It can include parts for buildings, cleaning services, contracted fees for independent labor to fix/maintain building property and premises, etc. Building maintenance to individual programs is determined based upon the programs square footage/usage it occupies, which can vary from month to month.
8 Misc - Adv, Bank, Printing, Postage, Employee Exp	FTE and Direct Allocations:This includes costs for advertising (cost of being in yellow pages, advertising for vacant positions, or advertising for achievement of program specific goals (if applicable)), bank charges, interest on loans (if allowable under OMB), printing (flyers/brochures, etc), postage, pre-employment costs (livescan and TB testing), employee morale & safety expenses, and food expenses. Food expenses include food for staff while traveling and food for meetings if deemed necessary.
9 Office Supplies	FTE Allocations: This includes expendable office, janitorial, and household suplies such as pens, paper, folders, cleaners, bleaches, TP, papertowels, etc. This also includes equipment, furniture & fixtures, etc. that individually do not meet LSS capitalization policy requirements of $5,000 and an estimated useful life of 1 year or more
9.5 Program Supplies	Direct Allocations:This includes expendable program suplies such as videos, testing materials, books, toys for therapy, craft supplies, etc. This also includes any program supplies that individually do not meet LSS capitalization policy requirements of $5,000 and an estimated useful life of 1 year or more.
10 Professional/Contract Costs	Direct Allocations: This includes costs for specific contract items such sub-contracts or independent contractors. This line item is necesary for LSS G/L (since this is where non-payroll employees will land). However, independent contractors who are necessary for units production (such as doctors or other contracted unit-producing staff) will be listed on staffing tab on DBH budgets (and specifically identified) so that units/hours on that page can be captured correctly for this staff.
11 Rent	FTE Allocations This includes rent expense for real property. Rent for tangible property will be in equipment rental. Rent to individual programs is determined based upon the program which can vary from month to month.
12 Staff Travel/Meetings/ Trainings & Mileage	Direct Allocation: This includes costs for training of staff, travel to get to meetings/trainings, motels if necessary for a training, and the cost of education/seminars. This also includes mileage reimbursement at no more than the current, in effect IRS rates at time of mileage charged.
13 Taxes & Licenses, Dues & Subscriptions	FTE Allocation: This includes costs such as monthly subscriptions, property taxes and other governmental non-penalty fees assessed, and membership & association dues.
14 Telephone & Utilities	FTE Allication: This includes costs for utilities & telephone, such as cable, electric, gas, internet, phone & T1 lines, etc. Utilities & telephone to individual programs is determined based upon the programs square footage/usage it occupies, which can vary from month to month.
15 Vehicle Expense	Direct Allocations: This includes all vehicle related expenses such as leases, R&M, gas, car washes, etc.
16 Depreciation	This includes costs for depreciation expense. Items depreciated include furniture & fixtures, vehicles, equipment, etc.

Note: Specific items are mentioned to give an idea of the types of expenses included, but specific items mentioned are not intended to be restrictive or all inclusive.

SCHEDULE B

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

Contractor Name:	Lutheran Social Services
Provider #	00829
Contract/RFP#	16-403 A-3
Address:	PO Box 1927
	Big Bear Lake, CA 92315
Date Form Completed:	3/9/2021
Date Form Revised:	

MONTH	Estimated Units of Service (Minutes)	Planned Clinical FTE's	Required Productivity (based on 168 hours per month per FTE)	Projected Revenue Generated by Service Type							Clients Served		
											Starting Census		2
				Case Mgmt (01-09)	Intensive Care Coordination (07)	Mental Health Services (10-50)	Intensive Home Based Services (57)	TBS (58)	Medication Support (60)	Crisis Intervention (70)	Admissions (Episodes Opened)	Discharges (Episodes Closed)	Monthly Census
Jul-21	14,573	6.90	21%	$3,764	$335	$35,169	$333	$2,246	$325	$111	10	1	11
Aug-21	14,573	6.90	21%	$3,764	$335	$35,169	$333	$2,246	$325	$111	10	1	20
Sep-21	14,573	6.90	21%	$3,764	$335	$35,169	$333	$2,246	$325	$111	8	1	27
Oct-21	14,573	6.90	21%	$3,764	$335	$35,169	$333	$2,246	$325	$111	7	3	31
Nov-21	14,573	6.90	21%	$3,764	$335	$35,169	$333	$2,246	$325	$111	6	2	35
Dec-21	14,573	6.90	21%	$3,764	$335	$35,169	$333	$2,246	$325	$111	3	1	37
TOTAL	87,440			$22,584	$2,012	$211,015	$2,000	$13,479	$1,950	$666	44	9	
				Total Revenue					$253,705	Unduplicated Clients Served			46

Est. Medi-Cal Cost Per Client:	$5,515
Est. Non-Medi-Cal Cost Per Client:	$1,476
Est. Total Cost Per Client:	$6,992

SCHEDULE A

SCHEDULE A - Planning Estimates

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH

Actual Cost Contract (cost reimbursement)

CCFSS/ Success First Wraparound

FY 2021 - 2022 - Big Bear
July 1, 2021 - December 31, 2021
(6 Months)

Prepared by: Eileen Hofer
Title: Senior Director

Contractor Name: Lutheran Social Services
Provider # 00829
Contract/RFP# #16-403 A-3
Address: PO Box 1927
Big Bear Lake, CA 92315
Date Form Completed: 3/9/2021
Date Form Revised:

LINE		MODE OF SERVICE		15-	15-Outpatient	15-Outpatient	15-Outpatient	15-Outpatient	15-Outpatient	15-Outpatient	60- Support	60 - Support	
#		SERVICE FUNCTION		Case Management (01-06,08-09)	Intensive Care Coordination (07)	Mental Health Services (10-50)	Intensive Home Based Services (57)	TBS (58)	Medication Support (60)	Crisis Intervention (70)	Client Flexible Support (72)	Other Non-Medi-Cal Client Support (78)	TOTAL
1	100%	Distribution %		3.73%	3.60%	62.90%	0.60%	4.02%	0.58%	0.20%	5.16%	19.21%	
		EXPENSES											
2		SALARIES		3,864	3,726	65,120	617	4,160	602	205		19,884	98,179
3		BENEFITS		1,146	1,105	19,309	183	1,233	178	61		5,896	29,112
		(2+3 must equal total staffing costs)		5,010	4,831	84,430	800	5,393	780	266	0	25,780	127,291
4		OPERATING EXPENSES		1,304	1,257	21,974	208	1,404	203	69	1,804	6,710	34,933
5		TOTAL EXPENSES (2+3+4)		6,314	6,089	106,404	1,008	6,797	983	335	1,804	32,491	162,224
		AGENCY REVENUES											
6		PATIENT FEES											0
7		PATIENT INSURANCE											0
8		MEDI-CARE											0
9		GRANTS/OTHER											0
10		TOTAL AGENCY REVENUES (6+7+8+9)		0	0	0	0	0	0	0	0	0	0
11		CONTRACT AMOUNT (5-10)		6,314	6,089	106,404	1,008	6,797	983	335	1,804	32,491	162,224
	Mix %	FUNDING	Share %										
12	70.00%	MEDI-CAL (FFP)	50.00%	2,210	2,131	37,241	353	2,379	344	117	0	0	44,775
13	100.00%	EPSDT (2011 Realignment)	36.03%	1,592	1,536	26,836	254	1,714	248	85	0	0	32,265
14		MHSA MATCH	13.97%	617	595	10,406	99	665	96	33			12,511
15		MHSA FUNDING		1,894	1,827	31,921	303	2,039	295	101	1,804	32,491	72,673
16	0.00%	AB2726		0	0	0	0	0	0	0	0	0	0
17	0.00%	REALIGNMENT - NET COUNTY		0	0	0	0	0	0	0	0	0	0
18													0
19		FUNDING TOTAL		6,314	6,089	106,404	1,008	6,797	983	335	1,804	32,491	162,224
20		NET COUNTY FUNDS (Local Cost) MUST = ZERO		0	0	0	0	0	0	0	0	0	0
21		STATE FUNDING (Including Realignment)		4,104	3,958	69,163	655	4,418	639	218	1,804	32,491	117,449
22		FEDERAL FUNDING		2,210	2,131	37,241	353	2,379	344	117	0	0	44,775
23		TOTAL FUNDING		6,314	6,089	106,404	1,008	6,797	983	335	1,804	32,491	162,224
24		SCHEDULE OF MAXIMUM ALLOWANCES (CCR)		2.20	2.20	2.99	2.99	2.99	5.56	4.20	1.00	1.00	
25		TARGET COST PER UNIT OF SERVICE		1.96	1.96	2.53	2.53	2.53	5.06	3.76	1.00	1.00	
26		UNITS OF TIME (Minutes)		3,219	3,105	41,992	398	2,681	194	89			51,678

SCHEDULE B

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH

Schedule B

STAFFING DETAIL

FY 2021 - 2022 - Big Bear

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

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

CONTRACTOR NAME: Lutheran Social Services

Name	Degree/ License	Position Title	Full Time Annual Salary*	Full Time Fringe Benefits*	Total Full Time Salaries & Benefits*	% Cost Allocated Contract Services	(6 month) Total Salaries and Benefits Charged to Contract Services	Budgeted Hours of Contract Services	(6 month) Total Salaries Charged to Contract Services	(6 month) Total Benefits Charged to Contract Services
Big Bear										
Christina Deaton	LMFT/LCSW	Clinic Supervisor .	66,560	19,968	86,528	15%	6,490	312	4,992	1,498
TBD	ASW /AMFT	Therapist, Associate	45,760	13,728	59,488	25%	7,436	520	5,720	1,716
To be determined	BA or BS	TBS Coach/EW Specialist	41,080	12,324	53,404	10%	2,670	208	2,054	616
TBD	Masters	EW Facilitator	44,200	13,260	57,460	100%	28,730	2,080	22,100	6,630
TBD	BA or BS	EW Specialist	41,080	12,324	53,404	100%	26,702	2,080	20,540	6,162
TBD		EW Parent Partner	37,960	11,388	49,348	100%	24,674	2,080	18,980	5,694
TBD	LVN or Psych Tech	Licensed Vocational Nurse	45,760	13,728	59,488	1%	298	21	229	69
Dr. Malik	M.D.	Psychiatrist**	250,000	0	250,000	1%	1,250	21	1,250	0
TBD		Receptionist	31,200	9,360	40,560	25%	5,070	520	3,900	1,170
Alfreda Wright	BS/BA	Area Manager	49,500	14,850	64,350	20%	6,435	416	4,950	1,485
Tawanda Counts	LCSW	Clinical Area Director	82,500	24,750	107,250	7%	3,754	146	2,888	867
Eileen Hofer	BSPA/RN	Senior Director	90,000	27,000	117,000	21%	12,285	437	9,450	2,835
River Bilton		Billing Clerk (SBC AVATAR)	40,500	12,150	52,650	3%	1,498	59	576	922
Trish White		QAR	55,000	16,500	71,500	1%		21	550	(550)
				0	0			0	0	0
					0			0	0	0
									98,179	29,112

** Not a W-2 employee, independent contractor! Placed here because this position does units!

TOTAL COST:	127,291

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

SCHEDULE B

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B

FY 2021 - 2022 - Big Bear

Contractor Name: **Lutheran Social Services**
Provider # **00829**
Contract/RFP# **#16-403 A-3**
Address: **PO Box 1927**
Big Bear Lake, CA 92315
Date Form Completed: **3/9/2021**

Prepared by: Eileen Hofer
Title: Senior Director

Operating Expenses - Please list all operating costs charged to this program, including administrative support costs and management fees along with a detail explanation of the categories below.

July 1, 2021 - December 31, 2021

	ITEM	TOTAL COST TO ORGANIZATION (6 month)	% CHARGED TO OTHER FUNDING SOURCE	TOTAL COST TO OTHER FUNDING SOURCE	PERCENT CHARGED TO PROGRAM	TOTAL COST TO PROGRAM
1	External Database Fee (.26% of Contract)	422	0%	$0	100%	$422
2	Supportive Services	19,528	0%	$0	100%	$19,528
3	Emergency Assistance	1,000	0%	$0	100%	$1,000
4	Equipment Rental	500	0%	$0	100%	$500
5	Information Tech Costs	2,114	0%	$0	100%	$2,114
6	Insurance	175	0%	$0	100%	$175
7	Maintenance	250	0%	$0	100%	$250
8	Misc - Adv, Bank, Printing, Postage, Employee Exp	325	0%	$0	100%	$325
9	Office Supplies	750	0%	$0	100%	$750
9.5	Program Supplies	108	0%	$0	100%	$108
10	Professional/Contract Costs	250	0%	$0	100%	$250
11	Rent	4,363	0%	$0	100%	$4,363
12	Staff Travel/Meetings/ Trainings & Mileage	500	0%	$0	100%	$500
13	Taxes & Licenses, Dues & Subscriptions	149	0%	$0	100%	$149
14	Telephone & Utilities	1,500	0%	$0	100%	$1,500
15	Vehicle Expense	3,000	0%	$0	100%	$3,000
16	Depreciation	-	0%	$0	100%	$0
SUBTOTAL B:		$34,933		$0		$34,933
GROSS COSTS TOTAL STAFFING AND OPERATING EXPENSES:						$162,224

SCHEDULE B

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
BUDGET NARRATIVE
FY 2021 - 2022 - Big Bear

Contractor Name: **Lutheran Social Services**
Provider # **00829**
Contract/RFP# **#16-403 A-3**
Address: **PO Box 1927**
Big Bear Lake, CA 92315

Prepared by: Eileen Hofer
Title: Senior Director

Date Form Completed: **3/9/2021**

Budget Narrative for Operating Expenses. Explain each expense by line item. Provide an explanation for determination of all figures (rate, duration, quantity, Benefits, FTE's, etc.) for example explain how overhead or indirect cost were calculated.

July 1, 2021 - December 31, 2021

ITEM	Justification of Cost
1 External Database Fee (.26% of Contract)	Participation in external database is a required aspect of program to facilitate focus of treatment servicesand reporting of outcomes.
2 Supportive Services	Federal allowable indirect admin costs. The federal allowable indirect cost rate is determined between LSS corporate and the federal governement. Costs in this categoary will include the corporate share of audit and legal costs, HR costs, CEO/CFO costs, non-specific SBC accounting (such as payroll), and other corporate expenses that support San Bernardino operations. This will never be more than 15%.of direct costs
3 Emergency Assistance	Direct Allocations: Client flex funds - any expenses spent on behalf of a client or client's family.
4 Equipment Rental	FTE allocations: This includes operating lease payments for any kind of rented equipment such as copiers, phones, postage meters, etc. It will not include auto lease payments (see vehicle expense)
5 Information Tech Costs	FTE Allocation: This includes all IT related costs including costs associated with Electronic Health Record, maintenece of servers, trouble tickets for computer & laptop issues, web hosting fees, software and hardware upgrades/maintenance, etc.
6 Insurance	FTE Allocation:This includes insurance for professional liability, commercial, directors and officers, volunteer, auto, and excess/umbrella, insurance. It excludes health insurance and other employee insurances.
7 Maintenance	FTE allocation: This includes all building maintenance costs & expenses. It can include parts for buildings, cleaning services, contracted fees for independent labor to fix/maintain building property and premises, etc. Building maintenance to individual programs is determined based upon the programs square footage/usage it occupies, which can vary from month to month
8 Misc - Adv, Bank, Printing, Postage, Employee Exp	FTE and Direct Allocation:This includes costs for advertising (cost of being in yellow pages, advertising for vacant positions, or advertising for achievement of program specific goals (if applicable)), bank charges, interest on loans (if allowable under OMB), printing (flyers/brochures, etc), postage, pre-employment costs (livescan and TB testing), employee morale & safety expenses, and food expenses. Food expenses include food for staff while traveling and food for meetings if deemed necessary.
9 Office Supplies	FTE Allocation:This includes expendable office, janitorial, and household suplies such as pens, paper, folders, cleaners, bleaches, TP, papertowels, etc. This also includes equipment, furniture & fixtures, etc. that individually do not meet LSS capitalization policy requirements of $5,000 and an estimated useful life of 1 year or more.
9.5 Program Supplies	Dirrect Allocation:This includes expendable program suplies such as videos, testing materials, books, toys for therapy, craft supplies, etc. This also includes any program supplies that individually do not meet LSS capitalization policy requirements of $5,000 and an estimated useful life of 1 year or more.
10 Professional/Contract Costs	FTE and Direct Allocation: This includes costs for specific contract items such sub-contracts or independent contractors. This line item is necesary for LSS G/L (since this is where non-payroll employees will land). However, independent contractors who are necessary for units production (such as doctors or other contracted unit-producing staff) will be listed on staffing tab on DBH budgets (and specifically identified) so that units/hours on that page can be captured correctly for this staff.
11 Rent	FTE Allocation:This includes rent expense for real property. Rent for tangible property will be in equipment rental. Rent to individual programs is determined based upon the programs which can vary from month to month.
12 Staff Travel/Meetings/ Trainings & Mileage	Direct Allocation:This includes costs for training of staff, travel to get to meetings/trainings, motels if necessary for a training, and the cost of education/seminars. This also includes mileage reimbursement at no more than the current, in effect IRS rates at time of mileage charged.
13 Taxes & Licenses, Dues & Subscriptions	Direct Allocation: This includes costs such as monthly subscriptions, property taxes and other governmental non-penalty fees assessed, and membership & association dues.
14 Telephone & Utilities	FTE Allocation: This includes costs for utilities & telephone, such as cable, electric, gas, internet, phone & T1 lines, etc. Utilities & telephone to individual programs is determined based upon the programs square footage/usage it occupies, which can vary from month to month.
15 Vehicle Expense	Direct Allocation: This includes all vehicle related expenses such as leases, R&M, gas, car washes, etc.
16 Depreciation	This includes costs for depreciation expense. Items depreciated include furniture & fixtures, vehicles, equipment, etc.

Note: Specific items are mentioned to give an idea of the types of expenses included, but specific items mentioned are not intended to be restrictive or all inclusive.

SCHEDULE B

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

Contractor Name:	Lutheran Social Services
Provider #	00829
Contract/RFP#	#16-403 A-3
Address:	PO Box 1927
	Big Bear Lake, CA 92315
Date Form Completed:	3/9/2021
Date Form Revised:	

MONTH	Estimated Units of Service (Minutes)	Planned Clinical FTE's	Required Productivity (based on 168 hours per month per FTE)	Projected Revenue Generated by Service Type: Case Mgmt (01-09)	Intensive Care Coordination (07)	Mental Health Services (10-50)	Intensive Home Based Services (57)	TBS (58)	Medication Support (60)	Crisis Intervention (70)	Clients Served: Starting Census: Admissions (Episodes Opened)	Discharges (Episodes Closed)	Monthly Census (Starting Census: 8)
Jul-21	8,613	3.78	23%	$1,052	$1,015	$17,734	$168	$1,133	$164	$56	2	2	8
Aug-21	8,613	3.78	23%	$1,052	$1,015	$17,734	$168	$1,133	$164	$56	2	3	7
Sep-21	8,613	3.78	23%	$1,052	$1,015	$17,734	$168	$1,133	$164	$56	2	1	8
Oct-21	8,613	3.78	23%	$1,052	$1,015	$17,734	$168	$1,133	$164	$56	2	3	7
Nov-21	8,613	3.78	23%	$1,052	$1,015	$17,734	$168	$1,133	$164	$56	2	2	7
Dec-21	8,613	3.78	23%	$1,052	$1,015	$17,734	$168	$1,133	$164	$56	2	1	8
TOTAL	51,678			$6,314	$6,089	$106,404	$1,008	$6,797	$983	$335	12	12	

Total Revenue	$127,930	Unduplicated Clients Served	20

Est. Medi-Cal Cost Per Client:	$6,396
Est. Non-Medi-Cal Cost Per Client:	$1,715
Est. Total Cost Per Client:	$8,111

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SCHEDULE A

SCHEDULE A - Planning Estimates

Actual Cost Contract (cost reimbursement)

Prepared by: Eileen Hofer
Title: Senior Director

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH

CCFSS/ Success First Wraparound

FY 2021 - 2022 - Yucca Valley
July 1, 2021 - December 31, 2021

(6 Months)

Contractor Name: Lutheran Social Services
Provider # 00829
Contract/RFP# 16-403 A-3
Address: PO Box 1927
Big Bear Lake, CA 92315
Date Form Completed: 3/9/2021
Date Form Revised:

LINE #	Mix %	MODE OF SERVICE / SERVICE FUNCTION	Share %	15- Case Management (01-06,08-09)	15-Outpatient Intensive Care Coordination (07)	15-Outpatient Mental Health Services (10-50)	15-Outpatient Intensive Home Based Services (57)	15-Outpatient TBS (58)	15-Outpatient Medication Support (60)	15-Outpatient Crisis Intervention (70)	60- Support Client Flexible Support (72)	60 - Support Other Non-Medi-Cal Client Support (78)	TOTAL
1	100%	Distribution %		6.73%	0.60%	62.90%	0.60%	4.02%	0.58%	0.20%	5.16%	19.21%	
		EXPENSES											
2		SALARIES		13,404	1,194	125,243	1,187	8,000	1,157	395		38,243	188,823
3		BENEFITS		3,876	345	36,211	343	2,313	335	114		11,057	54,593
		(2+3 must equal total staffing costs)		17,280	1,539	161,453	1,530	10,313	1,492	509	0	49,299	243,416
4		OPERATING EXPENSES		4,896	436	45,742	434	2,922	423	144	3,755	13,967	72,718
5		TOTAL EXPENSES (2+3+4)		22,176	1,975	207,196	1,964	13,235	1,915	654	3,755	63,267	316,134
		AGENCY REVENUES											
6		PATIENT FEES											0
7		PATIENT INSURANCE											0
8		MEDI-CARE											0
9		GRANTS/OTHER											0
10		TOTAL AGENCY REVENUES (6+7+8+9)		0	0	0	0	0	0	0	0	0	0
11		CONTRACT AMOUNT (5-10)		22,176	1,975	207,196	1,964	13,235	1,915	654	3,755	63,267	316,134
	Mix %	FUNDING	Share %										
12	70.00%	MEDI-CAL (FFP)	50.00%	7,761	691	72,518	687	4,632	670	229	0	0	87,188
13	52.00%	EPSDT (2011 Realignment)	36.03%	2,908	259	27,174	258	1,736	251	86	0	0	32,672
14		MHSA MATCH	13.97%	4,854	433	45,345	430	2,896	419	143			54,519
15		MHSA FUNDING		6,653	593	62,159	589	3,970	574	196	3,755	63,267	141,755
16	0.00%	AB2726		0	0	0	0	0	0	0	0	0	0
17	0.00%	REALIGNMENT - NET COUNTY		0	0	0	0	0	0	0	0	0	0
18													0
19		FUNDING TOTAL		22,176	1,975	207,196	1,964	13,235	1,915	654	3,755	63,267	316,134
20		NET COUNTY FUNDS (Local Cost) MUST = ZERO		0	0	0	0	0	0	0	0	0	0
21		STATE FUNDING (Including Realignment)		14,415	1,284	134,678	1,277	8,603	1,245	425	3,755	63,267	228,946
22		FEDERAL FUNDING		7,761	691	72,518	687	4,632	670	229	0	0	87,188
23		TOTAL FUNDING		22,176	1,975	207,196	1,964	13,235	1,915	654	3,755	63,267	316,134
24		SCHEDULE OF MAXIMUM ALLOWANCES (CCR)		2.20	2.20	2.99	2.99	2.99	5.56	4.20	1.00	1.00	
25		TARGET COST PER UNIT OF SERVICE		2.20	2.20	2.99	2.99	2.99	5.56	4.20	1.00	1.00	
26		UNITS OF TIME (Minutes)		10,080	898	69,296	657	4,426	344	156			85,857

SCHEDULE B

Schedule B

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH
STAFFING DETAIL

FY 2021 - 2022 - Yucca Valley
July 1, 2021 - December 31, 2021 (6 months)

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

CONTRACTOR NAME: Lutheran Social Services

Name	Degree/ License	Position Title	Full Time Annual Salary*	Full Time Fringe Benefits*	Total Full Time Salaries & Benefits*	% Cost Allocated Contract Services	(6 months) Total Salaries and Benefits Charged to Contract Services	Budgeted Hours of Contract Services	(6 months) Total Salaries Charged to Contract Services	(6 months) Total Benefits Charged to Contract Services
Yucca Valley										
True, Paul**	LMFT	Clinic Supervisor LCSW, MFT, or Ph.D.	124,800	6,240	131,040	10%	6,552	208	6,240	312
TBD	ASW/AMFT	Therapist, Associate	52,000	15,600	67,600	100%	33,800	2,080	26,000	7,800
TBD	Masters	EW Facilitator	50,000	15,000	65,000	100%	32,500	2,080	25,000	7,500
TBD	Masters	EW Facilitator	50,000	15,000	65,000	100%	32,500	2,080	25,000	7,500
TBD	BA or BS	EW Specialist	45,000	13,500	58,500	100%	29,250	2,080	22,500	6,750
TBD	BA or BS	EW Specialist	45,000	13,500	58,500	100%	29,250	2,080	22,500	6,750
TBD		EW Parent Partner	40,000	12,000	52,000	100%	26,000	2,080	20,000	6,000
TBD		EW Parent Partner	40,000	12,000	52,000	100%	26,000	2,080	20,000	6,000
TBD	LVN or Psych Tech	Licensed Vocational Nurse	52,000	15,600	67,600	2%	676	42	520	156
Asifk Malik	M.D.	Psychiatrist**	250,000	0	250,000	1%	1,250	21	1,250	0
Alfreda Wright	BS	Area Manager	55,000	16,500	71,500	16%	5,720	333	4,400	1,320
Stacy Streaval		Office Manager (QAR/Data Entry/Reception)	40,000	12,000	52,000	25%	6,500	520	5,000	1,500
Melissa Collard		Assistant Office Manager	35,000	9,547	44,547	25%	5,568	520	4,375	1,193
Hofer, Eileen		Senior Director	90,000	27,000	117,000	7%	4,095	146	3,150	945
Tawanda Counts		Clinical Area Director	82,500	24,750	107,250	7%	3,754	146	2,888	866
					0			0	0	0
					0			0	0	0
					0			0	0	0
									188,823	54,593

TOTAL COST:	243,415

** Not a W-2 employee, independent contractor! Placed here because this position does units!

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

SCHEDULE B

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B

FY 2021 - 2022 - Yucca Valley

Prepared by: Eileen Hofer
Title: Senior Director

Contractor Name: **Lutheran Social Services**
Provider # **00829**
Contract/RFP# **16-403 A-3**
Address: **PO Box 1927**
Big Bear Lake, CA 92315
Date Form Completed: **3/9/2021**

Operating Expenses - Please list all operating costs charged to this program, including administrative support costs and management fees along with a detail explanation of the categories below.

July 1, 2021 - December 31, 2021

	ITEM	TOTAL COST TO ORGANIZATION (6 months)	% CHARGED TO OTHER FUNDING SOURCE	TOTAL COST TO OTHER FUNDING SOURCE	PERCENT CHARGED TO PROGRAM	TOTAL COST TO PROGRAM
1	External Database Fee (.26% of Contract)	822	0%	$0	100%	$822
2	Supportive Services	41,008	0%	$0	100%	$41,008
3	Emergency Assistance	1,697	0%	$0	100%	$1,697
4	Equipment Rental	550	0%	$0	100%	$550
5	Information Tech Costs	7,805	0%	$0	100%	$7,805
6	Insurance	750	0%	$0	100%	$750
7	Maintenance	425	0%	$0	100%	$425
8	Misc - Adv, Bank, Printing, Postage, Employee Exp	359	0%	$0	100%	$359
9	Office Supplies	1,500	0%	$0	100%	$1,500
9.5	Program Supplies	175	0%	$0	100%	$175
10	Professional/Contract Costs	250	0%	$0	100%	$250
11	Rent	5,534	0%	$0	100%	$5,534
12	Staff Travel/Meetings/ Trainings & Mileage	3,901	0%	$0	100%	$3,901
13	Taxes & Licenses, Dues & Subscriptions	250	0%	$0	100%	$250
14	Telephone & Utilities	1,900	0%	$0	100%	$1,900
15	Vehicle Expense	5,794	0%	$0	100%	$5,794
16	Depreciation	-	0%	$0	100%	$0
SUBTOTAL B:		$72,718		$0		$72,718
GROSS COSTS TOTAL STAFFING AND OPERATING EXPENSES:						$316,133

SCHEDULE B

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
BUDGET NARRATIVE

FY 2021 - 2022 - Yucca Valley

Contractor Name: Lutheran Social Services
Provider # 00829
Contract/RFP# 16-403 A-3
Address: PO Box 1927
Big Bear Lake, CA 92315

Prepared by: Eileen Hofer
Title: Senior Director

Date Form Completed: 3/9/2021

Budget Narrative for Operating Expenses. Explain each expense by line item. Provide an explanation for determination of all figures (rate, duration, quantity, Benefits, FTE's, etc.) for example explain how overhead or indirect cost were calculated.

July 1, 2021 - December 31, 2021

ITEM	Justification of Cost
1 External Database Fee (.26% of Contract)	Participation in external database is a required aspect of program to facilitate focus of treatment servicesand reporting of outcomes.
2 Supportive Services	Federal allowable indirect admin costs. The federal allowable indirect cost rate is determined between LSS corporate and the federal governement. Costs in this category will include the corporate share of audit and legal costs, HR costs, CEO/CFO costs, non-specific SBC accounting (such as payroll), and other corporate expenses that support San Bernardino operations. This will never be more than 15%. of direct costs
3 Emergency Assistance	Client flex funds - any expenses spent on behalf of a client or client's family.
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5 Information Tech Costs	This includes all IT related costs including costs associated with maintenece of servers, trouble tickets for computer & laptop issues, web hosting fees, software and hardware upgrades/maintenance, etc.
6 Insurance	This includes insurance for professional liablility, commercial, directors and officers, volunteer, auto, and excess/umbrella, insurance. It excludes health insurance and other employee insurances.
7 Maintenance	This includes all building maintenance costs & expenses. It can include parts for buildings, cleaning services, contracted fees for independent labor to fix/maintain building property and premises, etc. Building maintenance to individual programs is determined based upon the programs square footage/usage it occupies, which can vary from month to month.
8 Misc - Adv, Bank, Printing, Postage, Employee Exp	This includes costs for advertising (cost of being in yellow pages, advertising for vacant positions, or advertising for achievement of program specific goals (if applicable)), bank charges, interest on loans (if allowable under OMB), printing (flyers/brochures, etc), postage, pre-employment costs (livescan and TB testing), employee morale & safety expenses, and food expenses. Food expenses include food for staff while traveling and food for meetings if deemed necessary.
9 Office Supplies	This includes expendable office, janitorial, and household suplies such as pens, paper, folders, cleaners, bleaches, TP, papertowels, etc. This also includes equipment, furniture & fixtures, etc. that individually do not meet LSS capitalization policy requirements of $5,000 and an estimated useful life of 1 year or more.
9.5 Program Supplies	This includes expendable program suplies such as videos, testing materials, books, toys for therapy, craft supplies, etc. This also includes any program supplies that individually do not meet LSS capitalization policy requirements of $5,000 and an estimated useful life of 1 year or more.
10 Professional/Contract Costs	This includes costs for specific contract items such sub-contracts or independent contractors. This line item is necesary for LSS G/L (since this is where non-payroll employees will land). However, independent contractors who are necessary for units production (such as doctors or other contracted unit-producing staff) will be listed on staffing tab on DBH budgets (and specifically identified) so that units/hours on that page can be captured correctly for this staff.
11 Rent	This includes rent expense for real property. Rent for tangible property will be in equipment rental. Rent to individual programs is determined based upon the programs square footage/usage it occupies, which can vary from month to month.
12 Staff Travel/Meetings/ Trainings & Mileage	This includes costs for training of staff, travel to get to meetings/trainings, motels if necessary for a training, and the cost of education/seminars. This also includes mileage reimbursement at no more than the current, in effect IRS rates at time of mileage charged.
13 Taxes & Licenses, Dues & Subscriptions	This includes costs such as monthly subscriptions, property taxes and other governmental non-penalty fees assessed, and membership & association dues.
14 Telephone & Utilities	This includes costs for utilities & telephone, such as cable, electric, gas, internet, phone & T1 lines, etc. Utilities & telephone to individual programs is determined based upon the programs square footage/usage it occupies, which can vary from month to month.
15 Vehicle Expense	This includes all vehicle related expenses such as leases, R&M, gas, car washes, etc.
16 Depreciation	This includes costs for depreciation expense. Items depreciated include furniture & fixtures, vehicles, equipment, etc.

Note: Specific items are mentioned to give an idea of the types of expenses included, but specific items mentioned are not intended to be restrictive or all inclusive.

SCHEDULE B

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

Contractor Name:	Lutheran Social Services
Provider #	00829
Contract/RFP#	16-403 A-3
Address:	PO Box 1927
	Big Bear Lake, CA 92315
Date Form Completed:	3/9/2021
Date Form Revised:	

MONTH	Estimated Units of Service (Minutes)	Planned Clinical FTE's	Required Productivity (based on 168 hours per month per FTE)	Projected Revenue Generated by Service Type: Case Mgmt (01-09)	Intensive Care Coordination (07)	Mental Health Services (10-50)	Intensive Home Based Services (57)	TBS (58)	Medication Support (60)	Crisis Intervention (70)	Clients Served: Starting Census: Admissions (Episodes Opened)	Discharges (Episodes Closed)	Monthly Census (Starting Census: 8)
Jul-21	14,309	7.04	20%	$3,696	$329	$34,533	$327	$2,206	$319	$109	10	2	16
Aug-21	14,309	7.04	20%	$3,696	$329	$34,533	$327	$2,206	$319	$109	10	3	23
Sep-21	14,309	7.04	20%	$3,696	$329	$34,533	$327	$2,206	$319	$109	6	1	28
Oct-21	14,309	7.04	20%	$3,696	$329	$34,533	$327	$2,206	$319	$109	5	3	30
Nov-21	14,309	7.04	20%	$3,696	$329	$34,533	$327	$2,206	$319	$109	5	2	33
Dec-21	14,309	7.04	20%	$3,696	$329	$34,533	$327	$2,206	$319	$109	4	1	36
TOTAL	85,857			$22,176	$1,975	$207,196	$1,964	$13,235	$1,915	$654	40	12	

Total Revenue	$249,113	Unduplicated Clients Served	48
Est. Medi-Cal Cost Per Client:	$5,190		
Est. Non-Medi-Cal Cost Per Client:	$1,396		
Est. Total Cost Per Client:	$6,586		

SCHEDULE A

SCHEDULE A - Planning Estimates

Actual Cost Contract (cost reimbursement)

Prepared by: Eileen Hofer
Title: Sr Director

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH

CCFSS/ SB163 Wraparound Mental Health

FY 2021 - 2022 Big Bear Lake (AKA Runing Springs)
July 1, 2021 - December 31, 2021 (6 month)

Contractor Name: Lutheran Social Services
Provider # **N/A**
Contract/RFP# **#16-403 A-3**
Address: PO Box 1927
Big Bear Lake, CA 92315
Date Form Completed:
Date Form Revised:

LINE #		MODE OF SERVICE / SERVICE FUNCTION		15-Outpatient Case Management (01-06,08-09)	15-Outpatient Intensive Care Coordination (07)	15-Outpatient Mental Health Services (10-50)	15-Outpatient Intensive Home Based Services (57)	15-Outpatient TBS (58)	15-Outpatient Medication Support (60)	15-Outpatient Crisis Intervention (70)	TOTAL
1	100%	**Distribution %**		15.00%	15.00%	43.00%	20.00%	5.00%	1.00%	1.00%	
		EXPENSES									
2		SALARIES		15,229	15,229	43,657	20,306	5,076	1,015	1,015	101,528
3		BENEFITS		4,258	4,258	12,206	5,677	1,419	284	284	28,387
		(2+3 must equal total staffing costs)		19,487	19,487	55,863	25,983	6,496	1,299	1,299	129,915
4		OPERATING EXPENSES		9,013	9,013	25,837	12,017	3,004	601	601	60,086
5		TOTAL EXPENSES (2+3+4)		28,500	28,500	81,700	38,000	9,500	1,900	1,900	190,000
		AGENCY REVENUES									
6		PATIENT FEES									0
7		PATIENT INSURANCE									0
8		MEDI-CARE									0
9		GRANTS/OTHER									0
10		TOTAL AGENCY REVENUES (6+7+8+9)		0	0	0	0	0	0	0	0
11		CONTRACT AMOUNT (5-10)		28,500	28,500	81,700	38,000	9,500	1,900	1,900	190,000
	Mix %	**FUNDING**	Share %								
12	100.00%	MEDI-CAL (FFP)	50.00%	14,250	14,250	40,850	19,000	4,750	950	950	95,000
13	100.00%	EPSDT (2011 Realignment)	36.03%	10,269	10,269	29,437	13,691	3,423	685	685	68,459
14	13.97%	CFS FUNDING up to	$9,406	1,411	1,411	4,045	1,881	470	94	94	9,406
15		MHSA FUNDING		2,570	2,570	7,369	3,428	857	171	171	17,136
16	0.00%	AB2726		0	0	0	0	0	0	0	0
17	0.00%	REALIGNMENT - NET COUNTY		0	0	0	0	0	0	0	0
18											0
19		FUNDING TOTAL		28,500	28,500	81,700	38,000	9,500	1,900	1,900	190,000
20		NET COUNTY FUNDS (Local Cost) MUST = ZERO		0	0	0	0	0	0	0	0
21		STATE FUNDING (Including Realignment)		12,839	12,839	36,806	17,119	4,280	856	856	85,595
22		FEDERAL FUNDING		15,661	15,661	44,895	20,881	5,220	1,044	1,044	104,406
23		TOTAL FUNDING		28,500	28,500	81,700	38,000	9,500	1,900	1,900	190,000
24		SCHEDULE OF MAXIMUM ALLOWANCES (CCR)		2.20	2.20	2.99	2.99	2.99	5.56	4.20	
25		TARGET COST PER UNIT OF SERVICE		2.20	2.20	2.99	2.99	2.99	5.56	4.20	
26		UNITS OF TIME (Minutes)		12,955	12,955	27,325	12,709	3,177	342	452	69,914

SCHEDULE B

Schedule B

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH
STAFFING DETAIL

FY 2021 - 2022 Big Bear Lake (AKA Runing Springs)

July 1, 2021 - December 31, 2021 (6 month) (6 months)

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

CONTRACTOR NAME: Lutheran Social Services

Name	Degree/ License	Position Title	Full Time Annual Salary*	Full Time Fringe Benefits*	Total Full Time Salaries & Benefits*	% Cost Allocated Contract Services	(6 Months) Total Salaries and Benefits Charged to Contract Services	1040 Budgeted Hours of Contract Services	(6 Months) Total Salaries Charged to Contract Services	(6 Months) Total Benefits Charged to Contract Services
Big Bear					0	100%	0	1,040	0	0
Christina Deaton	LMFT	Clinical Supervisor/ Therapist	69,738	20,921	90,659	24%	10,879	250	8,369	2,511
To be determined	Licensed or	Clinician	52,281	15,684	67,965	100%	8,156	1,040	26,141	7,842
To be determined	BA/BS, Mast Pr	Family Facilitator	49,192	14,758	63,950	15%	4,796	156	3,690	1,107
To be determined	BA/BS, Mast Pr	Family Facilitator	49,192	14,758	63,950	15%	4,796	156	3,690	1,107
To be determined	BA/BS, Mast Pr	Family Facilitator	49,192	14,758	63,950	15%	4,796	156	3,690	1,107
To be determined	BA/BS, Mast Pr	Family Facilitator	49,192	14,758	63,950	15%	4,796	156	3,690	1,107
To be determined	BA/BS, Mast Pr	Family Specialist	45,760	13,728	59,488	15%	4,462	156	3,432	1,030
To be determined	BA or BS	Family Specialist	45,760	13,728	59,488	15%	4,462	156	3,432	1,030
To be determined	BA or BS	Family Specialist	45,760	13,728	59,488	15%	4,462	156	3,432	1,030
To be determined	BA or BS	Family Specialist	45,760	13,728	59,488	15%	4,462	156	3,432	1,030
To be determined		Parent Partner	42,328	12,698	55,026	10%	2,751	104	2,117	635
To be determined		Parent Partner	42,328	12,698	55,026	10%	2,751	104	2,117	635
To be determined		Parent Partner	42,328	12,698	55,026	10%	2,751	104	2,117	635
To be determined	BA or BS	TBS Coach	45,760	13,728	59,488	20%	5,949	208	4,576	1,373
					0		0	0	0	0
Alfreda Wright	BS	Area Manager	55,000	15,840	70,840	21%	7,293	214	5,663	1,631
Nancy Butterworth		Assistant Office Manager	32,032	9,610	41,642	50%	10,411	520	8,008	1,431
To be determined		receptionist	29,744	8,923	38,667	20%	3,867	208	2,975	893
River Bilton		Avatar Data Entry	40,500	11,840	52,340	5%	1,283	51	993	290
Tawanda Counts	LMFT	Clinical Area Director	82,500	15,900	98,400	14%	6,890	146	5,777	1,114
Eileen Hofer		Senior Director	90,000	24,750	114,750	6%	3,432	62	2,692	740
To be determined	LVN or Psyc	Site Coordiantor	50,336	15,101	65,437	1%	524	10	252	76
Dr Mallik**	M.D.	Psychiatric Practitioner**	250,000	7,382	257,382	1%	3,304	10	1,250	37
Trish White		QAR	55,000		55,000	0%	0	0	0	0
									101,528	28,387

TOTAL COST: 129,915

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

SCHEDULE B

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B

2021 - 2022 Big Bear Lake (AKA Runing Sprinç

Contractor Name: Lutheran Social Services
Region: N/A
Contract #: #16-403 A-3
Address: PO Box 1927
Big Bear Lake, CA 92315
Date Form Completed:
Updated

Prepared by:
Title:

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.

6 Months

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

	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	Internal Database fee (.26% of Contract)	$494	0%	$0	100%	$494
2	Supportive Services	$23,334	0%	$0	100%	$23,334
3	Emergency Assistance	$0	0%	$0	100%	$0
4	Respite Care Costs	$0	0%	$0	100%	$0
5	Equipment Rental	$1,000	0%	$0	100%	$1,000
6	Information Tech Costs	$13,000	0%	$0	100%	$13,000
7	Insurance	$782	0%	$0	100%	$782
8	Maintenance	$1,000	0%	$0	100%	$1,000
9	Misc - Adv, Bank, Printing, Postage, Employee Exp	$478	0%	$0	100%	$478
10	Office Supplies	$693	0%	$0	100%	$693
11	Program Supplies	$250	0%	$0	100%	$250
12	Professional/Contract Costs	$50	0%	$0	100%	$50
13	Rent	$6,000	0%	$0	100%	$6,000
14	Staff Travel/Meetings/ Trainings & Mileage	$3,250	0%	$0	100%	$3,250
15	Taxes & Licenses, Dues & Subscriptions	$1,205	0%	$0	100%	$1,205
16	Telephone & Utilities	$1,000	0%	$0	100%	$1,000
17	Vehicle Expense	$7,500	0%	$0	100%	$7,500
18	Depreciation	$51	0%	$0	100%	$51
19			0%	$0	100%	$0
SUBTOTAL B:		$60,086		$0		$60,086
GROSS TOTAL STAFFING AND OPERATING COSTS						$190,000

SCHEDULE B

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
BUDGET NARRATIVE
FY 2021 - 2022 Big Bear Lake (AKA Runing Springs)

Contractor Name: Lutheran Social Services
Provider # N/A
Contract/RFP# #16-403 A-3
Address: PO Box 1927
Big Bear Lake, CA 92315
Date Form Completed:

Prepared by: Eileen Hofer
Title: Sr Director

Budget Narrative for Operating Expenses. Explain each expense by line item. Provide an explanation for determination of all figures (rate, duration, quantity, Benefits, FTE's, etc.) for example explain how overhead or indirect cost were calculated.

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

	ITEM	Justification of Cost
1	Internal Database fee (.26% of Contract)	Participation in external database is a required aspect of program to facilitate focus of treatment services and reporting of outcomes.
2	Supportive Services	Federal allowable indirect admin costs. The federal allowable indirect cost rate is determined between LSS corporate and the federal governement. Costs in this category will include the corporate share of audit and legal costs, HR costs, CEO/CFO costs, non-specific SBC accounting (such as payroll), and other corporate expenses that support San Bernardino operations. This will never be more than 15%.
3	Emergency Assistance	Client flex funds - any expenses spent on behalf of a client or client's family.
4	Respite Care Costs	Amounts needed for respite care provider agreements and to be in compliance with contract for providing respite care.
5	Equipment Rental	This includes operating lease payments for any kind of rented equipment such as copiers, phones, postage meters, etc. It will not include auto lease payments (see vehicle expense).
6	Information Tech Costs	This includes all IT related costs including costs associated with maintenece of servers, trouble tickets for computer & laptop issues, web hosting fees, software and hardware upgrades/maintenance, etc.
7	Insurance	This includes insurance for professional liability, commercial, directors and officers, volunteer, auto, and excess/umbrella, insurance. It excludes health insurance and other employee insurances.
8	Maintenance	This includes all building maintenance costs & expenses. It can include parts for buildings, cleaning services, contracted fees for independent labor to fix/maintain building property and premises, etc. Building maintenance to individual programs is determined based upon the programs square footage/usage it occupies, which can vary from month to month.
9	Misc - Adv, Bank, Printing, Postage, Employee Exp	This includes costs for advertising (cost of being in yellow pages, advertising for vacant positions, or advertising for achievement of program specific goals (if applicable)), bank charges, interest on loans (if allowable under OMB), printing (flyers/brochures, etc), postage, pre-employment costs (livescan and TB testing), employee morale & safety expenses, and food expenses. Food expenses include food for staff while traveling and food for meetings if deemed necessary.
10	Office Supplies	This includes expendable office, janitorial, and household suplies such as pens, paper, folders, cleaners, bleaches, TP, papertowels, etc. This also includes equipment, furniture & fixtures, etc. that individually do not meet LSS capitalization policy requirements of $5,000 and an estimated useful life of 1 year or more.
11	Program Supplies	This includes expendable program suplies such as videos, testing materials, books, toys for therapy, craft supplies, etc. This also includes any program supplies that individually do not meet LSS capitalization policy requirements of $5,000 and an estimated useful life of 1 year or more.
12	Professional/Contract Costs	This includes costs for specific contract items such sub-contracts or independent contractors. This line item is necesary for LSS G/L (since this is where non-payroll employees will land). However, independent contractors who are necessary for units production (such as doctors or other contracted unit-producing staff) will be listed on staffing tab on DBH budgets (and specifically identified) so that units/hours on that page can be captured correctly for this staff.
13	Rent	This includes rent expense for real property. Rent for tangible property will be in equipment rental. Rent to individual programs is determined based upon the programs square footage/usage it occupies, which can vary from month to month.
14	Staff Travel/Meetings/ Trainings & Mileage	This includes costs for training of staff, travel to get to meetings/trainings, motels if necessary for a training, and the cost of education/seminars. This also includes mileage reimbursement at no more than the current, in effect IRS rates at time of mileage charged.
15	Taxes & Licenses, Dues & Subscriptions	This includes costs such as monthly subscriptions, property taxes and other governmental non-penalty fees assessed, and membership & association dues.
16	Telephone & Utilities	This includes costs for utilities & telephone, such as cable, electric, gas, internet, phone & T1 lines, etc. Utilities & telephone to individual programs is determined based upon the programs square footage/usage it occupies, which can vary from month to month.
17	Vehicle Expense	This includes all vehicle related expenses such as leases, R&M, gas, car washes, etc.
18	Depreciation	This includes costs for depreciation expense. Items depreciated include furniture & fixtures, vehicles, equipment, etc.

SCHEDULE B

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
FY 2021 - 2022 Big Bear Lake (AKA Runing Springs)

Contractor Name:	Lutheran Social Services
Provider #	N/A
Contract/RFP#	#16-403 A-3
Address:	PO Box 1927
	Big Bear Lake, CA 92315
Date Form Completed:	
Date Form Revised:	

MONTH	Estimated Units of Service (Minutes)	Planned Clinical FTE's	Required Productivity (based on 168 hours per month per FTE)	Projected Revenue Generated by Service Type: Case Mgmt (01-09)	Intensive Care Coordination (07)	Mental Health Services (10-50)	Intensive Home Based Services (57)	TBS (58)	Medication Support (60)	Crisis Intervention (70)	Clients Served: Starting Census: Admissions (Episodes Opened)	Discharges (Episodes Closed)	Monthly Census (Starting Census: 29)
Jul-21	11,652	2.70	43%	$4,750	$4,750	$13,617	$6,333	$1,583	$317	$317	1		30
Aug-21	11,652	2.70	43%	$4,750	$4,750	$13,617	$6,333	$1,583	$317	$317	2	1	31
Sep-21	11,652	2.70	43%	$4,750	$4,750	$13,617	$6,333	$1,583	$317	$317	1		32
Oct-21	11,652	2.70	43%	$4,750	$4,750	$13,617	$6,333	$1,583	$317	$317	2		34
Nov-21	11,652	2.70	43%	$4,750	$4,750	$13,617	$6,333	$1,583	$317	$317	1	2	33
Dec-21	11,652	2.70	43%	$4,750	$4,750	$13,617	$6,333	$1,583	$317	$317	2		35
TOTAL	69,914			$28,500	$28,500	$81,700	$38,000	$9,500	$1,900	$1,900	9	3	
				Total Revenue					$190,001	Unduplicated Clients Served			38
									Est. Total Cost Per Client:	$5,000			

SCHEDULE A

SCHEDULE A - Planning Estimates

Actual Cost Contract (cost reimbursement)

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH

CCFSS/ SB163 Wraparound Mental Health

FY 2021 - 2022 - Yucca Valley
July 1, 2021 - December 31, 2021 (6 month)

Contractor Name: Lutheran Social Services
Provider # N/A
Contract/RFP# #16-403 A-3
Address: PO Box 1927
Big Bear Lake, CA 92315
Date Form Completed:
Date Form Revised:

Prepared by: Eileen Hofer
Title: Senior Director

LINE		MODE OF SERVICE		15-Outpatient	15-Outpatient	15-Outpatient	15-Outpatient	15-Outpatient	15-Outpatient	15-Outpatient	
#		SERVICE FUNCTION		Case Management (01-06,08-09)	Intensive Care Coordination (07)	Mental Health Services (10-50)	Intensive Home Based Services (57)	TBS (58)	Medication Support (60)	Crisis Intervention (70)	TOTAL
1	100%	Distribution %		15.00%	15.00%	43.00%	20.00%	5.00%	1.00%	1.00%	
		EXPENSES									
2		SALARIES		21,291	21,291	61,033	28,388	7,097	1,419	1,419	141,938
3		BENEFITS		6,994	6,994	20,049	9,325	2,331	466	466	46,625
		(2+3 must equal total staffing costs)		28,284	28,284	81,082	37,713	9,428	1,886	1,886	188,563
4		OPERATING EXPENSES		14,466	14,466	41,467	19,288	4,822	964	964	96,438
5		TOTAL EXPENSES (2+3+4)		42,750	42,750	122,549	57,000	14,250	2,850	2,850	285,001
		AGENCY REVENUES									
6		PATIENT FEES									0
7		PATIENT INSURANCE									0
8		MEDI-CARE									0
9		GRANTS/OTHER									0
10		TOTAL AGENCY REVENUES (6+7+8+9)		0	0	0	0	0	0	0	0
11		CONTRACT AMOUNT (5-10)		42,750	42,750	122,549	57,000	14,250	2,850	2,850	285,000
	Mix %	FUNDING	Share %								
12	100.00%	MEDI-CAL (FFP)	50.00%	21,375	21,375	61,275	28,500	7,125	1,425	1,425	142,500
13	100.00%	EPSDT (2011 Realignment)	36.03%	15,403	15,403	44,155	20,537	5,134	1,027	1,027	102,686
14	13.97%	CFS FUNDING up to	$14,109	2,116	2,116	6,067	2,822	705	141	141	14,109
15		MHSA FUNDING		3,856	3,856	11,053	5,141	1,286	257	257	25,705
16	0.00%	AB2726		0	0	0	0	0	0	0	0
17	0.00%	REALIGNMENT - NET COUNTY		0	0	0	0	0	0	0	0
18											0
19		FUNDING TOTAL		42,750	42,750	122,549	57,000	14,250	2,850	2,850	285,000
20		NET COUNTY FUNDS (Local Cost) MUST = ZERO		0	0	0	0	0	0	0	0
21		STATE FUNDING (Including Realignment)		19,259	19,259	55,208	25,678	6,420	1,284	1,284	128,391
22		FEDERAL FUNDING		23,491	23,491	67,342	31,322	7,830	1,566	1,566	156,609
23		TOTAL FUNDING		42,750	42,750	122,549	57,000	14,250	2,850	2,850	285,000
24		SCHEDULE OF MAXIMUM ALLOWANCES (CCR)		2.20	2.20	2.99	2.99	2.99	5.56	4.20	
25		TARGET COST PER UNIT OF SERVICE		2.20	2.20	2.99	2.99	2.99	5.56	4.20	
26		UNITS OF TIME (Minutes)		19,432	19,432	40,986	19,064	4,766	513	679	104,871

SCHEDULE B

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH

Schedule B

STAFFING DETAIL

FY 2021 - 2022 - Yucca Valley

July 1, 2021 - December 31, 2021 (6 month) (6 months)

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

CONTRACTOR NAME: Lutheran Social Services

Name	Degree/ License	Position Title	Full Time Annual Salary*	Full Time Fringe Benefits*	Total Full Time Salaries & Benefits*	% Cost Allocated Contract Services	(6 Months) Total Salaries and Benefits Charged to Contract Services	1040 Budgeted Hours of Contract Services	(6 Months) Total Salaries Charged to Contract Services	(6 Months) Total Benefits Charged to Contract Services
Yucca Valley					0	100%	0	1,040	0	0
Paul True	LMFT	Clinical Supervisor/ Therapist**	137,280	41,184	178,464	27.0%	24,093	281	18,533	5,560
To be Determined	LMFT or Ass	Clinician	52,281	15,684	67,965	100.0%	33,982	1,040	26,141	7,842
To be Determined	BA/BS, Mast Pr	Family Facilitator	49,192	14,758	63,950	15.0%	4,796	156	3,690	1,107
To be Determined	BA/BS, Mast Pr	Family Facilitator	49,192	14,758	63,950	15.0%	4,796	156	3,690	1,107
To be Determined	BA/BS, Mast Pr	Family Facilitator	49,192	14,758	63,950	15.0%	4,796	156	3,690	1,107
To be determined	BA/BS, Mast Pr	Family Facilitator	49,192	14,758	63,950	15.0%	4,796	156	3,690	1,107
To be Determined	BA/BS, Mast Pr	Family Facilitator	49,192	14,758	63,950	15.0%	4,796	156	3,690	1,107
To be determined	BA/BS, Mas	Family Facilitator	49,192	14,758	63,950	15.0%	4,796	156	3,690	1,107
To be Determined	BA/BS, Mas	Family Specialist	45,760	13,728	59,488	15.0%	4,462	156	3,432	1,030
To be Determined	BA or BS	Family Specialist	45,760	13,728	59,488	15.0%	4,462	156	3,432	1,030
To be Determined	BA or BS	Family Specialist	45,760	13,728	59,488	15.0%	4,462	156	3,432	1,030
To be Determined	BA or BS	Family Specialist	45,760	13,728	59,488	15.0%	4,462	156	3,432	1,030
To be determined	BA or BS	Family Specialist	45,760	13,728	59,488	15.0%	4,462	156	3,432	1,030
To be Determined	BA or BS	Family Specialist	45,760	13,728	59,488	15.0%	4,462	156	3,432	1,030
To be Determined		Parent Partner	42,328	12,698	55,026	10.0%	2,751	104	2,117	635
To be Determined		Parent Partner	42,328	12,698	55,026	10.0%	2,751	104	2,117	635
To be Determined		Parent Partner	42,328	12,698	55,026	10.0%	2,751	104	2,117	635
To be determined		Parent Partner	42,328	12,698	55,026	10.0%	2,751	104	2,117	635
To be determined		Parent Partner	42,328	12,698	55,026	10.0%	2,751	104	2,117	635
To be determined		Parent Partner	42,328	12,698	55,026	10.0%	2,751	104	2,117	635
To be Determined	BA or BS	TBS Coach	45,760	13,728	59,488	60.0%	17,847	624	13,728	4,119
Kellie Newton	LVN or Psyc	LVN	50,336	15,101	65,437	1.0%	785	10	252	534
Dr.Malik	M.D.	Psychiatric Practitioner**	25,000	7,382	32,382	1.0%	4,956	10	125	4,831
Alfreda Wright	BA/BS,	Area Manager	55,000	15,840	70,840	24.2%	8,580	252	6,662	1,919
Stacy Streavel		Office Manager	40,040	12,012	52,052	25.0%	6,507	260	5,005	1,502
Melissa Collard		Assistant Office Manager	39,468	11,840	51,308	25.0%	6,414	260	4,934	1,480
Trish White		QAR	55,000	15,840	70,840	5.0%	1,771	52	1,375	396
Tawanda Counts	LCSW	Clinical Area Director	82,500	12,355	94,855	13.5%	6,425	141	5,588	837
Eileen Hofer	RN	Senior Director	90,000	21,120	111,120	9.3%	5,148	96	4,170	979
									141,938	46,625

TOTAL COST: 188,563

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

SCHEDULE B

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B

FY 2021 - 2022 - Yucca Valley

Contractor Name: Lutheran Social Services
Region N/A
Contract # #16-403 A-3
Address: PO Box 1927
Big Bear Lake, CA 92315
Date Form Completed:
Updated

Prepared by:
Title:

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.

6 Months

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

	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	Internal Database fee (.26% of Contract)	$741	0%	$0	100%	$741
2	Supportive Services	$35,000	0%	$0	100%	$35,000
3	Emergency Assistance	$0	0%	$0	100%	$0
4	Respite Care Costs	$0	0%	$0	100%	$0
5	Equipment Rental	$1,500	0%	$0	100%	$1,500
6	Information Tech Costs	$20,000	0%	$0	100%	$20,000
7	Insurance	$2,000	0%	$0	100%	$2,000
8	Maintenance	$750	0%	$0	100%	$750
9	Misc - Adv, Bank, Printing, Postage, Employee Exp	$938	0%	$0	100%	$938
10	Office Supplies	$2,251	0%	$0	100%	$2,251
11	Program Supplies	$1,000	0%	$0	100%	$1,000
12	Professional/Contract Costs	$2,500	0%	$0	100%	$2,500
13	Rent	$10,000	0%	$0	100%	$10,000
14	Staff Travel/Meetings/ Trainings & Mileage	$7,344	0%	$0	100%	$7,344
15	Taxes & Licenses, Dues & Subscriptions	$259	0%	$0	100%	$259
16	Telephone & Utilities	$4,557	0%	$0	100%	$4,557
17	Vehicle Expense	$7,500	0%	$0	100%	$7,500
18	Depreciation	$99	0%	$0	100%	$99
19			0%	$0	100%	$0
SUBTOTAL B:		$96,438		$0		$96,438
GROSS TOTAL STAFFING AND OPERATING COSTS						$285,001

SCHEDULE B

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
BUDGET NARRATIVE
FY 2021 - 2022 - Yucca Valley

Contractor Name: Lutheran Social Services
Provider # N/A
Contract/RFP# #16-403 A-3
Address: PO Box 1927
Big Bear Lake, CA 92315
Date Form Completed:

Prepared by: Eileen Hofer
Title: Senior Director

Budget Narrative for Operating Expenses. Explain each expense by line item. Provide an explanation for determination of all figures (rate, duration, quantity, Benefits, FTE's, etc.) for example explain how overhead or indirect cost were calculated.

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

	ITEM	Justification of Cost
1	Internal Database fee (.26% of Contract)	Participation in external database is a required aspect of program to facilitate focus of treatment services and reporting of outcomes.
2	Supportive Services	Federal allowable indirect admin costs. The federal allowable indirect cost rate is determined between LSS corporate and the federal governement. Costs in this categoary will include the corporate share of audit and legal costs, HR costs, CEO/CFO costs, non-specific SBC accounting (such as payroll), and other corporate expenses that support San Bernardino operations. This will never be more than 15%.
3	Emergency Assistance	Client flex funds - any expenses spent on behalf of a client or client's family.
4	Respite Care Costs	Amounts needed for respite care provider agreements and to be in compliance with contract for providing respite care.
5	Equipment Rental	FTE and Direct Allocation. This includes operating lease payments for any kind of rented equipment such as copiers, phones, postage meters, etc. It will not include auto lease payments (see vehicle expense).
6	Information Tech Costs	Direct and FTE allocation: This includes all IT related costs including costs associated with Electronic Health record, maintenece of servers, trouble tickets for computer & laptop issues, web hosting fees, software and hardware upgrades/maintenance, etc.
7	Insurance	FTE Allocation: This includes insurance for professional liablility, commercial, directors and officers, volunteer, auto, and excess/umbrella, insurance. It excludes health insurance and other employee insurances.
8	Maintenance	Direct Allocation:This includes all building maintenance costs & expenses. It can include parts for buildings, cleaning services, contracted fees for independent labor to fix/maintain building property and premises, etc. Building maintenance to individual programs is determined based upon the programs square footage/usage it occupies, which can vary from month to month.
9	Misc - Adv, Bank, Printing, Postage, Employee Exp	Direct adn FTE allocation:This includes costs for advertising (cost of being in yellow pages, advertising for vacant positions, or advertising for achievement of program specific goals (if applicable)), bank charges, interest on loans (if allowable under OMB), printing (flyers/brochures, etc), postage, pre-employment costs (livescan and TB testing), employee morale & safety expenses, and food expenses. Food expenses include food for staff while traveling and food for meetings if deemed necessary.
10	Office Supplies	Direct and FTW Allocation: This includes expendable office, janitorial, and household suplies such as pens, paper, folders, cleaners, bleaches, TP, papertowels, etc. This also includes equipment, furniture & fixtures, etc. that individually do not meet LSS capitalization policy requirements of $5,000 and an estimated useful life of 1 year or more.
11	Program Supplies	Dirrect Allocation:This includes expendable program suplies such as videos, testing materials, books, toys for therapy, craft supplies, etc. This also includes any program supplies that individually do not meet LSS capitalization policy requirements of $5,000 and an estimated useful life of 1 year or more.
12	Professional/Contract Costs	Direct and FTE allocation: This includes costs for specific contract items such sub-contracts or independent contractors. This line item is necesary for LSS G/L (since this is where non-payroll employees will land). However, independent contractors who are necessary for units production (such as doctors or other contracted unit-producing staff) will be listed on staffing tab on DBH budgets (and specifically identified) so that units/hours on that page can be captured correctly for this staff.
13	Rent	This includes rent expense for real property. Rent for tangible property will be in equipment rental. Rent to individual programs is determined based upon the programs FTE allocation which can vary from month to month.
14	Staff Travel/Meetings/ Trainings & Mileage	Dirrect Allocation:This includes costs for training of staff, travel to get to meetings/trainings, motels if necessary for a training, and the cost of education/seminars. This also includes mileage reimbursement at no more than the current, in effect IRS rates at time of mileage charged.
15	Taxes & Licenses, Dues & Subscriptions	FTE and Dirrect Allocation:This includes costs such as monthly subscriptions, property taxes and other governmental non-penalty fees assessed, and membership & association dues.
16	Telephone & Utilities	FTE and IDrrect Allocation: This includes costs for utilities & telephone, such as cable, electric, gas, internet, phone & T1 lines, etc. Utilities & telephone to individual programs is determined based upon the programs square footage/usage it occupies, which can vary from month to month.
17	Vehicle Expense	Dirrect Allocation: This includes all vehicle related expenses such as leases, R&M, gas, car washes, etc.
18	Depreciation	This includes costs for depreciation expense. Items depreciated include furniture & fixtures, vehicles, equipment, etc.

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

Contractor Name:	Lutheran Social Services
Provider #	N/A
Contract/RFP#	#16-403 A-3
Address:	PO Box 1927
	Big Bear Lake, CA 92315
Date Form Completed:	
Date Form Revised:	

MONTH	Estimated Units of Service (Minutes)	Planned Clinical FTE's	Required Productivity (based on 168 hours per month per FTE)	Projected Revenue Generated by Service Type: Case Mgmt (01-09)	Intensive Care Coordination (07)	Mental Health Services (10-50)	Intensive Home Based Services (57)	TBS (58)	Medication Support (60)	Crisis Intervention (70)	Clients Served: Admissions (Episodes Opened)	Discharges (Episodes Closed)	Monthly Census
											Starting Census		45
Jul-21	17,478	4.40	39%	$7,125	$7,125	$20,425	$9,500	$2,375	$475	$475	2		47
Aug-21	17,478			$7,125	$7,125	$20,425	$9,500	$2,375	$475	$475	2	3	46
Sep-21	17,478			$7,125	$7,125	$20,425	$9,500	$2,375	$475	$475	2		48
Oct-21	17,478			$7,125	$7,125	$20,425	$9,500	$2,375	$475	$475	2	3	47
Nov-21	17,478			$7,125	$7,125	$20,425	$9,500	$2,375	$475	$475	2		49
Dec-21	17,478			$7,125	$7,125	$20,425	$9,500	$2,375	$475	$475	2	1	50
TOTAL	104,871			$42,750	$42,750	$122,549	$57,000	$14,250	$2,850	$2,850	12	7	
				Total Revenue					$285,000	Unduplicated Clients Served			57
									Est. Total Cost Per Client:		$5,000		