



Contract Number

17-423 A-1

SAP Number

10006004

Department of Behavioral Health

Department Contract Representative	Deborah Forthun
Telephone Number	(909) 388-0862
Contractor	Mental Health System, Inc.
Contractor Representative	James Callaghan
Telephone Number	(885)-573-2600
Contract Term	July 1, 2017 – March 31, 2021
Original Contract Amount	\$565,089
Amendment Amount	\$141,272
Total Contract Amount	\$706,361
Cost Center	1018521000

THIS CONTRACT is entered into in the State of California by and between the County of San Bernardino, hereinafter called the County, and Mental Health Systems, Inc. referenced above, hereinafter called Contractor.

IT IS HEREBY AGREED AS FOLLOWS:

WITNESSETH:

IN THAT CERTAIN **Contract No. 17-423** by and between the County of San Bernardino, a political subdivision of the State of California, and Contractor provision of Substance Use Disorder Services, California Work Opportunity and Responsibility to Kids Life Skills program, which Contract first became effective July 1, 2017 the following changes are hereby made and agreed to, effective July 1, 2020:

- I. ARTICLE IV Funding paragraph H is hereby added to read as follows:
 - H. The maximum financial obligation under this contract shall not exceed \$188,363 annually. This contract is increased by \$141,272 for the period of July 1, 2020- March 31, 2021. This amendment shall increase the total contract amount from \$565,089 to \$706,361.
- II. 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, 2016 through March 31, 2021 inclusive. The County may, but is not obligated to, extend awarded contract(s) for up to one additional one-year periods contingent on the availability of funds and Contractor performance.

- III. This amendment hereby adds Schedules A and B for July 1, 2020 – March 31, 2021. All previously approved schedules remain in effect.
- IV. All other terms, conditions and covenants in the basic agreement remain in full force and effect.

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

COUNTY OF SAN BERNARDINO

Mental Health Systems, Inc.

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

Curt Hagman, Chairman, Board of Supervisors

By  _____
(Authorized signature - sign in blue ink)

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

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

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

Title _____
(Print or Type)

By _____
Deputy

Dated: _____


Address _____


FOR COUNTY USE ONLY

Approved as to Legal Form

Reviewed for Contract Compliance

Reviewed/Approved by Department


Dawn Martin, Deputy County Counsel


Natalie Kessee, Contracts Manager


Veronica Kelley, Director

Date _____

Date _____

Date _____

San Bernardino County Department of Behavioral Health
 SUDRS - SUBSTANCE USE DISORDER & RECOVERY SERVICES
 CalWORKs Life Skills Program
SCHEDULE A - Planning Budget
FISCAL PERIOD: 7/1/2020 - 3/31/2021

Prepared by: <u>Lindsay Santino</u> Title: <u>PFM Controller</u> Date Form Completed: <u>May 18, 2020</u>	Contractor Name: <u>Mental Health Systems, Inc.</u> Address: <u>9465 Farnham Street</u> <u>San Diego, CA 92123</u> Provider Number: <u>8630 and 3608</u>
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	8630-Yucca Valley	3608-Needles		TOTAL
Annual Budget	\$ 48,750	\$ 92,522		\$ 141,272
Service Hours	952	2,215		3,167
CPU	\$ 51	\$ 42		\$ 45

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH
ADS - ALCOHOL AND DRUG SERVICES
SUD SERVICES: CalWORKs LIFE SKILLS PROGRAM
BUDGET PROPOSAL - SALARY & BENEFITS

PROVIDER NAME	Mental Health Systems, Inc.
LOCATION/SITE	300 H Street Needles, CA 92363
Provider # (36xx):	8630
BUDGET PERIOD	7/1/20 - 3/31/21
PREPARED BY	Jackelyn Coreas

POSITION TITLE	HOURLY RATE	TOTAL SERVICE HOURS	TOTAL SALARIES	TOTAL EMPLOYEE BENEFITS	TOTAL SALARY & BENEFITS
				Benefit Rate: 23%	
Program Manager	\$31.00	78	\$ 2,418	\$ 558	\$ 2,976
Employment Specialist	\$20.00	468	\$ 9,360	\$ 2,162	\$ 11,522
Program Supervisor	\$25.00	1,248	\$ 31,200	\$ 7,206	\$ 38,406
Office Manager	\$18.00	156	\$ 2,808	\$ 648	\$ 3,456
Program Analyst	\$31.25	109	\$ 3,413	\$ 788	\$ 4,201
Vice President	\$50.00	109	\$ 5,460	\$ 1,261	\$ 6,721
Compliance Specialist	\$28.00	47	\$ 1,310	\$ 303	\$ 1,613
			\$ -	\$ -	\$ -
			\$ -	\$ -	\$ -
TOTAL		2,215	\$ 55,969	\$ 12,926	\$ 68,895

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH

ADS - ALCOHOL AND DRUG SERVICES

SUD SERVICES: CalWORKs LIFE SKILLS PROGRAM

BUDGET PROPOSAL

PROVIDER:	Mental Health Systems, Inc.
LOCATION/SITE:	300 H Street Needles, CA 92363
Provider # (36xx):	8630
BUDGET PERIOD:	7/1/20 - 3/31/21
PREPARED BY:	Jackelyn Coreas

TOTAL SALARY & BENEFITS (pg 1)	\$	68,895
SERVICES AND SUPPLIES	Annual Cost	
COMMUNICATIONS	\$	1,378
INSURANCE	\$	1,303
OFFICE EXPENSES	\$	546
PRINTING/PUBLICATIONS	\$	188
RENTS & LEASES – STRUCTURES	\$	900
EQUIPMENT RENTAL/LEASE	\$	180
EQUIPMENT REPAIR AND MAINTENANCE	\$	306
TRAVEL	\$	3,864
TRAINING	\$	120
OTHER: Building Repair/Maint & Utilities	\$	1,872
OTHER: Minor Equipment		\$38
OTHER: Other Business Services		\$764
OTHER: Participant Costs		\$173
INDIRECT COSTS (ADMIN COST)		\$11,998
TOTAL SERVICES & SUPPLIES	\$	23,627
TOTAL PROGRAM EXPENDITURES	\$	92,522

SUMMARY OF SERVICE HOURS & HOURLY COST:		
PROGRAM COST	\$	92,522
SERVICE HOURS		2,215
NET COST PER HOUR:	\$	41.77

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH

ADS - ALCOHOL AND DRUG SERVICES

SUD SERVICES: CalWORKs LIFE SKILLS PROGRAM

BUDGET PROPOSAL - SALARY & BENEFITS

Budget Narrative *

Line-Item Budget	Budget Amount	Description of Expenditure
OTHER: Minor Equipment	\$38	This amount represents the shared cost of minor equipment for shared employee
OTHER: Other Business Services	\$764	This amount represents the costs of the Live scan, drug test, and TB test new employees. The benefit of these costs can be directly traced to the cost objective of the program; therefore, they are charged directly to the program. Also, the program's share of applicable license and taxes from the program's operational space as well as the program's share of associated bank fees.
INDIRECT COSTS (ADMIN COST)	\$11,998	<p>Indirect Costs represent costs that are incurred that benefit more than one cost objective and are not easily assignable directly to the multiple cost objectives. The indirect cost pool is made up of the following Home Office Departments: Executive Management, General Accounting, Payroll, Accounts Payable, Accounts Receivable, Human Resources, Facilities & Property Management, Information Technology, and Office Administration.</p> <p>MHS records direct expense as charged to each contract. Indirect costs, which by nature cannot be identified to a specific cost objective or easily allocated directly to multiple cost objectives based on a causal-beneficial relationship, are accumulated in detailed operating expense accounts. Indirect costs are generally allocated each month from the detailed operating expense accounts to each applicable contract/program at a rate of 14.9% of the actual direct cost base in the contract/program. MHS submits for a Federally Approved Indirect Rate on an annual basis.</p>
OTHER: Participant Costs	\$173	This amount represents the cost of recreational & occupational therapy supplies used in the facilitation of classes. This amount also includes the cost of providing snacks to participants to encourage involvement/participation as well as curriculum used in the facilitation of classes.

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH

ADS - ALCOHOL AND DRUG SERVICES

SUD SERVICES: CalWORKs LIFE SKILLS PROGRAM

BUDGET PROPOSAL - SALARY & BENEFITS

PROVIDER NAME	Mental Health Systems, Inc.
LOCATION/SITE	58945 Business Center Drive, J, P, N Yucca Valley, CA 92284
Provider # (36xx):	8630
BUDGET PERIOD	7/1/20 - 3/31/21
PREPARED BY	Jackelyn Coreas

POSITION TITLE	HOURLY RATE	TOTAL SERVICE HOURS	TOTAL SALARIES	TOTAL EMPLOYEE BENEFITS	TOTAL SALARY & BENEFITS
				Benefit Rate: 19%	
Program Manager	\$35.39	202.8	\$ 7,176	\$ 1,345	\$ 8,521
Life Skills Facilitator	\$21.00	390	\$ 8,190	\$ 1,535	\$ 9,725
Administrative Assistant	\$18.00	78	\$ 1,404	\$ 263	\$ 1,667
Program Analyst	\$31.25	78	\$ 2,438	\$ 457	\$ 2,895
Vice President	\$55.00	78	\$ 4,290	\$ 804	\$ 5,094
Counselor-Other	\$21.00	78	\$ 1,638	\$ 307	\$ 1,945
Compliance Specialist	\$28.33	46.8	\$ 1,326	\$ 249	\$ 1,575
			\$ -	\$ -	\$ -
TOTAL		952	\$ 26,462	\$ 4,960	\$ 31,422

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH
ADS - ALCOHOL AND DRUG SERVICES
SUD SERVICES: CalWORKs LIFE SKILLS PROGRAM
BUDGET PROPOSAL

PROVIDER:	Mental Health Systems, Inc.
LOCATION/SITE:	58945 Business Center Drive, J, P, N Yucca Valley, CA 92284
Provider # (36xx):	8630
BUDGET PERIOD:	7/1/20 - 3/31/21
PREPARED BY:	Jackelyn Coreas

TOTAL SALARY & BENEFITS (pg 1)	\$	31,422
SERVICES AND SUPPLIES	Annual Cost	
COMMUNICATIONS	\$	1,010
INSURANCE	\$	615
OFFICE EXPENSES	\$	521
RENTS & LEASES – STRUCTURES	\$	5,788
EQUIPMENT RENTAL/LEASE	\$	113
EQUIPMENT REPAIR AND MAINTENANCE	\$	375
TRAVEL	\$	179
TRAINING	\$	48
PROFESSIONAL SERVICES	\$	150
OTHER: Building Repair/Maint & Utilities	\$	1,500
OTHER: Minor Equipment	\$	11
OTHER: Other Business Services	\$	698
INDIRECT COSTS (ADMIN COST)	\$	6,322
TOTAL SERVICES & SUPPLIES	\$	17,328
TOTAL PROGRAM EXPENDITURES	\$	48,750

SUMMARY OF SERVICE HOURS & HOURLY COST:		
PROGRAM COST	\$	48,750
SERVICE HOURS		952
NET COST PER HOUR:	\$	51.23

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH

ADS - ALCOHOL AND DRUG SERVICES

SUD SERVICES: CalWORKs LIFE SKILLS PROGRAM

BUDGET PROPOSAL - SALARY & BENEFITS

Budget Narrative *

Line-Item Budget	Budget Amount	Description of Expenditure
RENTS & LEASES – STRUCTURES	\$5,788	This amount represents the cost of the rent/lease for office space
TRAINING	\$48	This amount represents budget funds to provide contractually required training(s) for the facilitator.
OTHER: Minor Equipment	\$11	This amount represents a small share of cost of minor equipment for a shared employee.
OTHER: Other Business Services	\$698	This amount represents the costs of the Live scan, drug test, and TB test new employees. The benefit of these costs can be directly traced to the cost objective of the program; therefore, they are charged directly to the program. Also, the program's share of applicable license and taxes from the program's operational space, user fees for IT threat solutions, HIPAA compliant shredding services.
INDIRECT COSTS (ADMIN COST)	\$6,322	<p>Indirect Costs represent costs that are incurred that benefit more than one cost objective and are not easily assignable directly to the multiple cost objectives. The indirect cost pool is made up of the following Home Office Departments: Executive Management, General Accounting, Payroll, Accounts Payable, Accounts Receivable, Human Resources, Facilities & Property Management, Information Technology, and Office Administration.</p> <p>MHS records direct expense as charged to each contract. Indirect costs, which by nature cannot be identified to a specific cost objective or easily allocated directly to multiple cost objectives based on a causal-beneficial relationship, are accumulated in detailed operating expense accounts. Indirect costs are generally allocated each month from the detailed operating expense accounts to each applicable contract/program at a rate of 14.9% of the actual direct cost base in the contract/program. MHS submits for a Federally Approved Indirect Rate on an annual basis.</p>