

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

**Contract Number**

16-409 A-4

SAP Number

4400002836

Department of Behavioral Health

Department Contract Representative	Paul Lindenberg
Telephone Number	(909) 386-8264
Contractor	High Desert Child, Adolescent and Family Services, Inc.
Contractor Representative	Shannon Baird
Telephone Number	(760) 243-7157
Contract Term	July 1, 2016 – December 31, 2021
Original Contract Amount	\$2,280,615
Amendment Amount	\$228,062
Total Contract Amount	\$2,508,677
Cost Center	1018511000

THIS CONTRACT is entered into in the State of California by and between the County of San Bernardino, hereinafter called the County, and High Desert Child, Adolescent and Family Services, Inc. referenced above, hereinafter called Contractor.

IT IS HEREBY AGREED AS FOLLOWS:

WITNESSETH:

IN THAT CERTAIN **Contract No. 16-409** by and between the County of San Bernardino, a political subdivision of the State of California, and Contractor for Substance Use Disorder Perinatal 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 paragraph K is hereby amended and paragraph L is hereby added to read as follows:
 - K. The contract amendment amount of \$228,062 shall increase the total contract amount from \$2,280,615 to \$2,508,677 for the contract term.
 - L. This amendment hereby adds Schedules A and B for fiscal year 2021-22. All previously approved Budget Schedules remain in effect.
- II. ARTICLE XV 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.

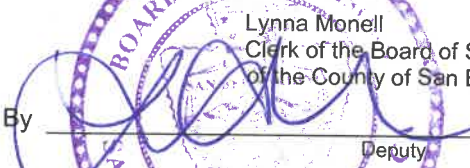
III. All other terms, conditions and covenants in the basic agreement remain in full force and effect.

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

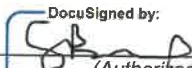
Dated: **MAY 04 2021**
SIGNED AND CERTIFIED THAT A COPY OF THIS
DOCUMENT HAS BEEN DELIVERED TO THE
CHAIRMAN OF THE BOARD


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

By  Deputy

High Desert Child, Adolescent and Family
Services, Inc.

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

By 
(Authorized signature - sign in blue ink)
03536C3087B34F2...

Name **Shannon Baird**
(Print or type name of person signing contract)

Title **Executive Director**
(Print or Type)

4/12/2021

Dated: _____

Address **16248 Victor St.**
Victorville, Ca. 92395

FOR COUNTY USE ONLY

Approved as to Legal Form


Dawn Martin, Deputy County Counsel

Date **4/9/2021**

Reviewed for Contract Compliance


Natalie Kessee, Contracts Manager

Date **4/12/2021**

Reviewed/Approved by Department


Veronica Kelley, Director

Date **4/12/2021**

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SUBSTANCE USE DISORDER & RECOVERY SERVICES - PERINATAL CONTRACT
SCHEDULE A - Proposed Budget

BUDGET PERIOD: July 1, 2021- December 31, 2021

Contractor Name: High Desert Center
Facility Address: 16248 Victor Street
Victorville, Ca 92395
Provider Number (36xx): 3634

Prepared by: Shannon Baird
Title: Executive Director
Date Prepared: 3/10/2021

Service Level	FUNDING SOURCE	Drug Medi-Cal	CalWORKs	CFS	Perinatal	TOTAL
2.1	Intensive Outpatient Treatment (IOT)					
	Cost- Individual IOT	\$ 45,707				\$ 45,707
	Units of Service (15 minute increment)	2,005				2,005
	Interim Rate	\$ 22.80	\$ 0.00	\$ 0.00	\$ 0.00	\$ 23
	Cost- Group IOT	\$ 95,000				\$ 95,000
	Units of Service (15 minute increment)	4,166				4,166
	Interim Rate	\$ 22.80	\$ 0.00	\$ 0.00	\$ 0.00	\$ 23
	IOT Case Management					
	Cost					\$ 0
	Units of Service (15 minute increment)					0
	Interim Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0
	Physician Consultation					
	Cost					\$ 0
	Units of Service (15 minute increment)					0
	Interim Rate	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
	Additional Medication Assisted Treatment (MAT)					
	Cost					\$ 0
	Units of Service (15 minute increment)					0
	Interim Rate	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
	SUMMARY OF ALL SERVICES					
	Total Service Costs	\$ 140,707	\$ 0	\$ 0	\$ 0	\$ 140,707
	Units of Service (15 minute increment)	6,171	0	0	0	6,171
	NON-DMC REIMBURSABLE COSTS				\$ 87,355	\$ 87,355
	GRAND TOTALS	\$ 140,707	\$ 0	\$ 0	\$ 87,355	\$ 228,062

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SUBSTANCE USE DISORDER & RECOVERY SERVICES - PERINATAL CONTRACT
DMC Personnel Expense Detail

BUDGET PERIOD: July 1, 2021- December 31, 2021

PROVIDER NAME:	High Desert Center	PREPARER:	Shannon Baird
FACILITY ADDRESS:	16248 Victor Street	TITLE:	Executive Director
	Victorville, Ca 92395	DATE PREPARED:	3/10/2021
PROMDER NUMBER : (36XX)	3634		

Position Title	Full Time Annual Salary	Full Time Fringe Benefits	Total Full Time Salaries & Benefits	% / FTE of Total Salary & Benefits	Total Salaries and Benefits Charged to Contract Services
Counselor 1	\$ 19,200	\$ 1,843	\$ 21,043	100.0%	\$ 21,043
Counselor 2	\$ 19,200	\$ 1,843	\$ 21,043	100.0%	\$ 21,043
Counselor 3	\$ 19,200	\$ 1,843	\$ 21,043	100.0%	\$ 21,043
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TOTAL COST	\$ 63,129
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SUBSTANCE USE DISORDER & RECOVERY SERVICES - PERINATAL CONTRACT

OMC Budget Detail

BUDGET PERIOD: July 1, 2021 - December 31, 2021

PROVIDER NAME: High Desert Center

* Explain each expense by line item. Provide an explanation for determination of all figures (rate, duration, quantity, benefits, P.R., etc.). For example, show how indirect costs or overhead were calculated.

(1)	(2)	(3)
Schedule of Expenditures by Costs	Costs	Cost Accounting Information
TOTAL SALARIES AND BENEFITS	\$ 63,129	
Equipment, Materials and Supplies		
Depreciation - Equipment		
Maintenance - Equipment		
Medical, Dental and Laboratory Supplies		
Membership Dues	\$ 200	Rate and proportion allocated at 45% of total cost, due to personnel is 45% of all services conducted.
Rent and Lease Equipment	\$ 2,100	Rate and proportion allocated at 45% of total cost, due to personnel is 45% of all services conducted.
Clothing and Personal Supplies		
Food		
Laundry Services and Supplies		
Office Traffic and Automobiles		
Training	\$ 300	Rate and proportion allocated at 45% of total cost, due to personnel is 45% of all services conducted.
Miscellaneous Supplies		
Operating Expenses		
Construction	\$ 5,031	Rate and proportion allocated at 45% of total cost, due to personnel is 45% of all services conducted.
Depreciation - Structures and Improvements		
Furniture and Equipment	\$ 1,500	Rate and proportion allocated at 45% of total cost, due to personnel is 45% of all services conducted.
Insurance	\$ 4,000	Rate and proportion allocated at 45% of total cost, due to personnel is 45% of all services conducted.
Interest Expense		
Lease Property, Improvements, Structures, Improvements and Contents		
Maintenance - Structures, Improvements, and Contents	\$ 2,532	Rate and proportion allocated at 45% of total cost, due to personnel is 45% of all services conducted.
Miscellaneous Expense		
Office Expense	\$ 2,000	Rate and proportion allocated at 45% of total cost, due to personnel is 45% of all services conducted.
Publication and Legal Notice		
Rent & Leases - Land, Structures, and Improvements	\$ 6,750	Facilities costs of materials allocated toward our various programs used for this category.
Taxes and Licenses	\$ 310	Rate and proportion allocated at 45% of total cost, due to personnel is 45% of all services conducted.
Drug Screening and Other Testing	\$ 5,100	Rate and proportion allocated at 45% of total cost, due to personnel is 45% of all services conducted.
Utilities	\$ 5,250	Facilities costs of materials allocated toward our various programs used for this category.
Other		
Professional and Special Services		
Pharmaceutical		
Professional and Special Services		
Transportation		
Transportation		
Taxes		
Gas, Oil, & Maintenance - Vehicles		
Rent & Leases - Vehicles		
Depreciation - Vehicles		
Other Costs		
Administrative and Professional Costs	\$ 5,072	10 percent of the salaries of Admin, Program Manager, Recovery Director and Financial Specialist
OTHER	\$ 26,250	Medical Director (from Election budget)
TOTAL OPERATING EXPENSES	\$ 77,978	
FEE/OTHER AGENCY REVENUE		
TOTAL EXPENDITURES	\$ 140,707	

San JERARDINO COUNTY
 DEPARTMENT OF BEHAVIORAL HEALTH
 SUBSTANCE USE DISORDER & RECOVERY SERVICES - PERINATAL CONTRACT
 Non-DMC Budget Detail
 BUDGET PERIOD: July 1, 2021- December 31, 2021
 PROVIDER NAME: High Desert Center

* Explain each expenditure by line item. Provide an explanation for determination of all figures (rate, duration, quantity, benefits, FTE, etc.). For example, show how indirect costs or overhead were calculated.

(1) Schedule of Expenditures for Costs	(2) Costs	(3) Cost Allocation Explanation
TOTAL SALARIES AND BENEFITS	\$ 72,838	
Equipment, Materials and Supplies		
Depreciation - Equipment		
Maintenance - Equipment		
Medical, Dental and Laboratory Supplies		
Modified Hip Shells		
Hand and Lotion Equipment	\$ 813	Ratio and proportion allocated at 10% of total cost, due to prenatal is 43% of all services conducted.
Clinical and Personal Supplies		
Food		
Laundry Services and Supplies		
Small Tools and Consumables		
Training	\$ 55	Ratio and proportion allocated at 10% of total cost, due to prenatal is 43% of all services conducted.
Miscellaneous Supplies		
Operating Expenses		
Communications	\$ 517	Ratio and proportion allocated at 10% of total cost, due to prenatal is 43% of all services conducted.
Depreciation - Structure and Improvements		
Professional Expenses	\$ 477	Ratio and proportion allocated at 10% of total cost, due to prenatal is 43% of all services conducted.
Insurance	\$ 225	Ratio and proportion allocated at 10% of total cost, due to prenatal is 43% of all services conducted.
Interest Expense		
Lease Property Maintenance, Structures, Improvements and Consumables		
Miscellaneous - Structures, Improvements, and Consumables	\$ 261	Ratio and proportion allocated at 10% of total cost, due to prenatal is 43% of all services conducted.
Miscellaneous Expense		
Office Expense		
Publications and Legal Notices		
Rents & Utilities - Lease, Structures, and Improvements	\$ 1,350	Facilities costs of rent are allocated based on square footage used for this contract.
Taxes and Licenses		
Drug Screening and Other Testing		
Utilities	\$ 341	Facilities costs of rent are allocated based on square footage used for this contract.
Other	\$ 1,672	Contract expenses for type, projects, training and other, laboratory, etc.
Professional and Special Services		
Administrative		
Professional and Special Services		
Transportation		
Taxi and Ambulance		
Taxi		
Care, Care, & Maintenance - Vehicle	\$ 8,444	This is cost for private transportation to participate clients in early life treatment and recovery.
Rents & Utilities - Vehicle		
Depreciation - Vehicle	\$ 1,319	This is cost for vehicle to provide transportation to participate clients in early life treatment and recovery.
Other Costs		
Administrative Indirect Costs		
OTHER		
TOTAL OPERATING EXPENSES	\$ 13,717	
PERIODIC AGENCY FEE		
TOTAL EXPENDITURES	\$ 87,366	