

FORM APPROVED COUNTY COUNSEL  
 DATE 11/17/11  
 BY: [Signature]  
 MARSHAL VICTOR  
 ATTACHMENTS FILED WITH THE CLERK OF THE BOARD  
 Departmental Concurrence  
 Purchasing: [Signature] Mark Seiler, Assistant Director

124



## SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE, STATE OF CALIFORNIA

**FROM:** Riverside County Department of Mental Health

**SUBMITTAL DATE:**  
November 21, 2011

**SUBJECT:** Approve the In-State Children's Program Mental Health Amendment for Childhelp, Inc.

**RECOMMENDED MOTION:** Move that the Board of Supervisors ratify and:

1. Approve the FY 2010/2011 agreement amendments with Childhelp, Inc. increasing the contract amount from \$99,999 to \$139,999;
2. Authorize the Chairman of the Riverside County Board of Supervisors to sign the agreement amendment;
3. Authorize the Riverside County Purchasing Agent to add new contract providers up to \$100,000, while staying within the previously Board approved aggregate amount of \$13,738,970 for all In-State Children's Provider contracts without securing competitive bids in accordance with County Ordinance 459; and
4. Authorize the Riverside County Purchasing Agent to increase, decrease, amend, and annually renew all the In-State Children's agreements as listed in Attachment "A" up to the previously approved aggregate amount of \$13,738,970 for In-State Children's Provider contracts through June 30, 2015.

**BACKGROUND:** On July 29, 2010, Agenda Item 3.41, the Riverside County Board of Supervisors approved the Riverside County Department of Mental Health's (RCDMH) utilization of In-State Children's Services contracts as specified in Attachment "A" to provide various mental health services during FY 2009/2010 for an approved aggregate amount of \$13,738,970; and authorized the Riverside Purchasing Agent to annually renew these agreements through June 30, 2013. Subsequently, in FY 2010/2011, the Purchasing Agent exercised their Board of Supervisors' given authority to renew the agreements as outlined in Attachment "A".  
**(Continued on page 2)**

JW:DF

\_\_\_\_\_  
 Jerry Wengerd, Director  
 Department of Mental Health

<b>FINANCIAL DATA</b>	Current F.Y. Total Cost:	\$ 13,738,970	In Current Year Budget:	Yes
	Current F.Y. Net County Cost:	\$ 0	Budget Adjustment:	No
	Annual Net County Cost:	\$ 0	For Fiscal Year:	10/11

<b>SOURCE OF FUNDS:</b> See Attachment "A"	<b>"Positions To Be Deleted Per A-30"</b>	<input type="checkbox"/>
	<b>Requires 4/5 Vote</b>	<input type="checkbox"/>

**C.E.O. RECOMMENDATION:**

APPROVE  
  
 BY: Debra Courmayer  
 Debra Courmayer

**County Executive Office Signature**

Policy Policy  
 Consent Consent  
 Dep't Recomm.:  
 Per Exec. Ofc.:

3.22

**SUBJECT:** Approve the In-State Children's Program Mental Health Amendment for Childhelp, Inc.

**BACKGROUND (continued):**

The RCDMH is required to provide Therapeutic Behavioral Services (TBS) as a result of a court order issued in May of 1999 by the U. S. District Court of Central California. This court order requires that Medi-Cal provides reimbursement to local government agencies for the provision of TBS as a supplement to Early and Periodic Screening, Diagnosis, and Treatment (EPSDT). In addition, the State of California also requires the RCDMH to provide TBS to a minimum of four percent (4%) of the eligible Medi-Cal beneficiaries served by RCDMH.

The RCDMH In-State Children's contracts listed in Attachment "A" are for mental health services provided to eligible youth between the ages of 0-21, which includes the provision of Medi-Cal and Therapeutic Behavioral Services (TBS) to individuals placed in group homes. Mental Health TBS are intended to equip the youth with the social and mental health skills for them to more effectively manage the specific-behavior(s) that have historically presented a barrier to them achieving residency in the lowest and most appropriate level of care.

Due to an increase in public awareness regarding TBS services throughout Riverside County, the RCDMH experienced an influx of referrals during the fourth quarter of FY 2010/2011 that resulted in a substantial increase in contractor services rendered. Historically, the RCDMH has noticed that the number of eligible clients may fluctuate on an annual basis depending on the number of eligible beneficiaries. Therefore, RCDMH is requesting that the Board of Supervisors sign the Childhelp, Inc. agreement amendment as outlined in Attachment "A" for \$139,999; and authorize the RCDMH to continue contracting with the existing In-State Providers for TBS and other required mental health services, also specified in Attachment "A", for the previously Board of Supervisors approved aggregate amount of \$13,378,970 for FY 2010/2011 through June 30, 2015.

**PERIOD OF PERFORMANCE:**

The specified In-State Children's Services contracts have a period of performance of July 1, 2010 to June 30, 2011, and may be renewed annually through June 30, 2015. Each contract has a termination provision that may be exercised, based upon availability of Federal, State or County funds.

**FINANCIAL IMPACT:**

Attachment "A" provides the funding sources and maximum contract amounts for the Childhelp, Inc. agreement amendment and for each of the In-State Children's Program Mental Health agreements. Childhelp, Inc. is providing TBS at a rate that is lower than the approved State Maximum Allowance (SMA) for Short Doyle / Medi-Cal services, which is a cost savings to the RCDMH. Funding for these contracts was budgeted in the RCDMH's FY 2010/2011 and FY 2011/2012 budget. No additional County funds are required.

**JUSTIFICATION FOR DELAY:**

Central Children Services received final invoices for FY 2010/2011 in late July 2011. It was determined at that time that the invoices for services provided in June 2011 exceeded the previously approved Purchasing Agent's amending authority due to an unexpected influx of referrals for TBS. The timeline for the submission of the end of the fiscal year invoices and the correlation of the Riverside County Board of Supervisor's summer schedule further delayed the submission of the Form 11 for FY 2010/2011.

**ATTACHMENT "A"**  
**RIVERSIDE COUNTY DEPARTMENT OF MENTAL HEALTH**  
**MAXIMUM CONTRACT AMOUNT, FY 2010/2011 and FY 2011/12**

**Amendment for FY 2010/2011 Central Children's Contracts for Board Approval**

<b>Contractor</b>	<b>Previous Contract Amount</b>	<b>Amended Contract Amount</b>
Childhelp, Inc	\$99,999	\$139,999
<b>SUBTOTAL</b>	<b>\$99,999</b>	<b>\$139,999</b>

**FY 2010/2011 Previously Approved Central Children's Contracts**

<b>Contractor</b>	<b>Contract Amount</b>
Charlee	\$ 929,538
Community Access Network	\$ 99,999
EMQ Families First	\$ 99,943
Hillview Acres	\$ 549,999
JDT Consultants	\$ 99,999
Milhaus Services, Inc.	\$ 280,180
New Haven	\$2,241,559
Pacific Clinics	\$1,494,923
Rebekah Children's Services	\$ 101,162
San Diego Center for Children	\$ 249,999
Seneca Center	\$ 100,193
South Coast Society	\$ 99,999
Starview Adolescent Center, Inc.	\$ 250,367
Sunbridge Harbor View	\$ 172,189
Victor Community	\$1,061,581
Victor Treatment	\$ 180,501
Vista Del Mar	\$ 120,909
<b>SUBTOTAL</b>	<b>\$8,133,040</b>

**FY 2010/2011 Previously Approved Western Children's Contracts**

<b>Contractor</b>	<b>Contract Amount</b>
Carolyn E. Wylie Center	\$ 55,100
Family Service Association	\$ 234,524
Oak Grove	\$ 100,000
Olive Crest	\$1,000,000
VCSS – FAST	\$ 774,622
VCSS – Lake Elsinore	\$2,642,408
<b>SUBTOTAL</b>	<b>\$4,806,654</b>

**ATTACHMENT "A"**  
**RIVERSIDE COUNTY DEPARTMENT OF MENTAL HEALTH**  
**MAXIMUM CONTRACT AMOUNT, FY 2010/2011 and FY 2011/12**

**SUMMARY**

One (1) Amendment Contract	\$ 139,999
Previously Approved Central Children's Contracts	\$ 8, 133,040
Previously Approved Western Children's Contracts	<u>\$ 4,806, 654</u>
Subtotal	\$ 13, 079,693
Reserve	<u>\$ 659,277</u>
<b>GRAND TOTAL AGGREGATE AMOUNT</b>	<b>\$ 13,738,970</b>
<b>(Previously Approved by the Board of Supervisors)</b>	

**FY 2010/11  
FIRST AMENDMENT TO THE AGREEMENT  
BETWEEN  
COUNTY OF RIVERSIDE AND  
CHILDHELP, INC.**

That certain agreement between the County of Riverside (COUNTY) and Childhelp, Inc. (CONTRACTOR) originally approved by the Riverside County Purchasing Agent on September 7, 2010 for FY 2010/2011; and is hereby amended for FY 2010/2011, effective July 1, 2010 through June 30, 2011, as follows:

- Rescind the previous Exhibit C in its entirety and replace it with the new, attached Exhibit C in which the County's maximum obligation increased from \$99,999 to \$139,999 for FY 2010/2011.
- Rescind the previous Schedule I in its entirety and replace it with the new, attached Schedule I for FY 2010/2011.
- All other provisions of this entire Agreement shall remain unchanged.

**IN WITNESS WHEREOF**, the Parties hereto have caused their duly authorized representative to execute this Amendment.

COUNTY ADDRESS:

County of Riverside  
Board of Supervisors  
4080 Lemon Street, 5<sup>th</sup> Floor  
Riverside, CA 92501

INFORMATION COPY:

County of Riverside  
Department of Mental Health  
P.O. Box 7549  
Riverside, CA 92503-7549

CONTRACTOR

Childhelp, Inc.

COUNTY OF RIVERSIDE

Signed: *[Signature]*

Signed: \_\_\_\_\_

Bob Buster, Chairman  
Riverside County Board of Supervisors

Date: *September 26, 2011*

Title: *Director of Program Generation*  
Address: 14700 Manzanita Park Road  
Beaumont, CA 92223

Date: \_\_\_\_\_

COUNTY COUNSEL:

Pamela J. Walls  
Approved as to Form

Attest by: \_\_\_\_\_

Kecia Harper-Ihem, Clerk of the Board

By: *[Signature]*  
Deputy County Counsel  
Larisa R-McKenna

Rev.04/16/09

EXHIBIT C

REIMBURSEMENT & PAYMENT

CONTRACTOR NAME: CHILDHHELP, INC.

A. REIMBURSEMENT:

1. In consideration of services provided by CONTRACTOR pursuant to this Agreement, CONTRACTOR shall receive monthly reimbursement based upon the unit rate as specified in the Schedule I and actual units provided, less revenue collected, , not to exceed the maximum obligation of the COUNTY as specified herein. Schedule I is attached hereto and incorporated herein by this reference.
2. The final year-end settlement for Medi-Cal services shall be based final State approved Medi-Cal units, multiplied by the actual allowable cost per unit of services provided, State Maximum Allowance (SMA) rate, state approved Short Doyle/Medi-Cal (SD/MC) rate or customary charges, whichever is lower, less revenue collected.

B. MEDI-CAL RATES:

The CONTRACTOR acknowledges Medi-Cal rates are subject to annual adjustments mandated by the State. In the event the negotiated SD/MC rate exceeds the actual Cost per Unit or published rate, the guidelines for Medi-Cal Federal Financial Participation (FFP) giveback may apply per the State's cost report instruction manual.

C. MAXIMUM OBLIGATION:

COUNTY'S maximum obligation for fiscal year 2010/2011 shall be \$139,999, subject to availability of Federal, State, and local funds.

1 D. BUDGET:

2 Schedule I presents for planning purposes the budgetary details pursuant to this  
3 Agreement. Schedule I contains the reporting unit (RU), the mode(s) of service, the  
4 service functions, units, revenues received, maximum obligation and source of funding  
5 pursuant to this Agreement.

6 E. SHORT-DOYLE/MEDI-CAL:

7 1. With respect to services provided to Medi-Cal beneficiaries, CONTRACTOR  
8 shall comply with applicable Medi-Cal cost containment principles where  
9 reimbursement is based on actual allowable cost, approved Medi-Cal rate, State  
10 approved negotiated SD/MC rate or customary charges, whichever is lower as  
11 specified in Title 19 of the Social Security Act, Title 22 of the California Code  
12 of Regulations and policy letters issued by the State Department of Mental  
13 Health.

14 2. The Short/Doyle Medi-Cal reimbursement is composed of Local Matching  
15 Funds and Federal Financial Participation (FFP).

16 F. REVENUES:

17 1. Pursuant to the provisions of Sections 4025, 5717 and 5718 of the Welfare &  
18 Institutions Code, and as further contained in the State Department of Mental  
19 Health Revenue Manual, Section 1, CONTRACTOR shall collect revenues for  
20 the provision of the services described pursuant to Exhibit A. Such revenues  
21 may include but are not limited to, fees for services, private contributions,  
22 grants or other funds. All revenues received by CONTRACTOR shall be  
23 reported in their annual Cost Report, and shall be used to offset gross cost.

24 2. Patient/client eligibility for reimbursement from Medi-Cal, Private Insurance,  
25 Medicare, or other third party benefits shall be determined by the  
26 CONTRACTOR. CONTRACTOR shall pursue payment from all potential  
27 sources in sequential order, with Short/Doyle Medi-Cal as payor of last resort.

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1 CONTRACTOR is to attempt to collect first from Medicare (if site is Medicare  
2 certified), then insurance and then first party.

- 3 3. If a client has both Medicare or insurance and Medi-Cal coverage, a copy of  
4 the Medicare or insurance Explanation of Benefits (EOB) must be provided to  
5 the COUNTY within 30 days of receipt.
- 6 4. CONTRACTOR is obligated to collect from the client any Medicare co-  
7 insurance and/or deductible if the site is Medicare certified, and to collect and  
8 clear with the State any Medi-Cal Share of Cost. Patients/clients with share of  
9 cost Medi-Cal shall be charged their monthly Medi-Cal share of cost in lieu of  
10 their annual liability. Medicare clients will be responsible for any co-insurance  
11 and/or deductible for services rendered at Medicare certified sites.
- 12 5. All other clients will be subject to an annual sliding fee schedule by  
13 CONTRACTOR for services rendered, based on the patient's/client's ability to  
14 pay, not to exceed the CONTRACTOR'S actual charges for the services  
15 provided. In accordance with the State Department of Mental Health's  
16 Uniform Method of Determining Ability to Pay (UMDAP) Manual,  
17 CONTRACTOR shall not be penalized for non-collection of revenues provided  
18 that reasonable and diligent attempts are made by the CONTRACTOR to  
19 collect these revenues. Past due patient/client accounts may not be referred to  
20 private collection agencies. No patient/client shall be denied services due to  
21 inability to pay.
- 22 6. CONTRACTOR shall submit to COUNTY, with signed contract, a copy of  
23 CONTRACTOR'S published charges.
- 24 7. If CONTRACTOR charges the client any additional fees (i.e. Co-Pays) above  
25 and beyond the Contracted Schedule I rate, the CONTRACTOR must notify the  
26 COUNTY within ten (10) days of signing the AGREEMENT.
- 27 8. CONTRACTOR must notify the COUNTY if CONTRACTOR raises client  
28 fees. Notification must be made within ten (10) days following any fee increase.



1 G. REALLOCATION OF FUNDS:

- 2 1. No funds allocated for any Mode of Service as designated in Schedule I may  
3 be reallocated to another Mode of Service unless written approval is given by  
4 the Program Manager prior to either the end of the Contract Period of  
5 Performance or the end of the Fiscal year (June 30<sup>th</sup>). Approval shall not  
6 exceed the maximum obligation
- 7 2. In addition, CONTRACTOR may not, under any circumstances and without  
8 prior approval and/or written consent from the Program Manager and  
9 confirmed by the Supervisor of the COUNTY Fiscal Unit, reallocate funds  
10 between non-billable and billable mode and service functions and/or procedure  
11 codes as designed in the Schedule I that are defined as non-billable by the  
12 COUNTY, State or Federal governments from or to funds, services, mode of  
13 services and/or procedure codes that are defined as billable by the COUNTY,  
14 State or Federal governments.
- 15 3. If this Agreement includes more than one Exhibit C, shifting of funds from one  
16 Exhibit C to another is also prohibited without prior, written consent and  
17 approval from the Program Manager prior to the end of either the Contract  
18 Period of Performance or Fiscal year.

19 H. RECOGNITION OF FINANCIAL SUPPORT:

20 CONTRACTOR'S stationery/letterhead shall indicate that funding for the program is  
21 provided in whole or in part by the COUNTY of Riverside Department of Mental  
22 Health.

23 I. PAYMENT:

- 24 1. Monthly reimbursements may be withheld at the discretion of the Director or its  
25 designee due to material contract non-compliance, including audit  
26 disallowances and/or adjustments or disallowances resulting from the COUNTY  
27 Contract Monitoring Review (CMT), the Annual Program Monitoring and/or  
28 the Cost Report Reconciliation/Settlement process.

1           2.     In addition to the CMT, Annual Progress Monitoring, and Cost Report  
2                 Reconciliation/Settlement processes, the COUNTY reserves the right to perform  
3                 periodic service deletes and denial monitoring for this agreement throughout the  
4                 fiscal year in order to minimize and/or potentially prevent COUNTY and  
5                 CONTRACTOR loss. The COUNTY, at its discretion, may withhold and/or  
6                 offset invoices and/or monthly reimbursements to CONTRACTOR, at any time  
7                 without prior notification to CONTRACTOR, for service deletes and denials  
8                 that may occur in association with this agreement. COUNTY shall notify  
9                 CONTRACTOR of any such instances of services deletes and denials and  
10                subsequent withholds and/or reductions to CONTRACTOR invoices or monthly  
11                reimbursements.

12           3.     Notwithstanding the provisions of Paragraph I-1 and I-2 above,  
13                 CONTRACTOR shall be paid in arrears based upon the actual units of services  
14                 provided and entered into the COUNTY'S specified Data Collection System.  
15                 CONTRACTOR will submit a claim on their organization's stationery, which  
16                 must include at a minimum the CONTRACTOR'S name, invoice mailing  
17                 address and telephone number, summarizing the dollar amount specified in the  
18                 applicable COUNTY specified Data Collection System Report (currently the  
19                 final MH952) and a signed "Certification of Claims and Program Integrity"  
20                 form (PIF). The summary page of the monthly, final applicable Data Collection  
21                 System Report (currently the final MH952) **and** the PIF form **must** be attached  
22                 to the CONTRACTOR invoice. Failure to attach the monthly, final summary  
23                 page of the applicable Data Collection System Report, the Certification of  
24                 Claims **and** the signed PIF, will delay payment to the CONTRACTOR until the  
25                 required documents are provided. The claim must be approved and signed by  
26                 the Director or an authorized designee of the CONTRACTOR. Monthly claims  
27                 shall be submitted to the appropriate Program or Regional Manager of the  
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1 COUNTY'S Department of Mental Health, no later than the tenth (10<sup>th</sup>)  
2 working day of each month.

- 3 4. Short-Doyle/Medi-Cal billings shall be processed by the COUNTY and the  
4 CONTRACTOR shall provide the COUNTY with all information necessary for  
5 the preparation and audit of such billings.
- 6 5. CONTRACTOR shall submit a monthly invoice for payment and a quarterly  
7 report to COUNTY program with invoice describing outcomes, and progress  
8 updates and services delivered based on the contract's Exhibit A, "Scope of  
9 Services".
- 10 6. Unless other wise notified by the COUNTY, CONTRACTOR invoicing will be  
11 paid by the COUNTY thirty (30) calendar days after the date the invoice is  
12 received by the applicable COUNTY Program/Region.

13 J. COST REPORT:

- 14 1. For each fiscal year, or portion thereof, that this Agreement is in effect,  
15 CONTRACTOR shall provide to COUNTY two (2) copies per each Reporting  
16 Unit (RU) number, an annual Cost Report with an accompanying financial  
17 statement and applicable supporting documentation to reconcile to the Cost  
18 Report within forty-six (46) calendar days following the end of each fiscal year  
19 (June 30), the expiration or termination of the contract, which ever occurs first.  
20 The Cost Report shall detail the actual cost of services provided. The Cost  
21 Report shall be provided in the format and on forms provided by the  
22 COUNTY. Final payment to CONTRACTOR shall not be made by COUNTY  
23 until the final current and prior year Cost Report(s) have been reconciled,  
24 settled and signed by CONTRACTOR and received and approved by the  
25 COUNTY.
- 26 2. CONTRACTOR shall use OMB-circular A-122 to formulate proper cost  
27 allocation methods to distribute cost between COUNTY and non-COUNTY  
28 programs.

- 1 3. CONTRACTOR is required to send one representative to the cost report  
2 training annually held by COUNTY regarding preparation of the year-end Cost  
3 Report. The COUNTY will notify CONTRACTOR of the date(s) and time(s)  
4 of the training. Attendance at the training is necessary annually in order to  
5 ensure that the Cost Reports are completed appropriately. Failure to attend this  
6 training may result in delay of payment.
- 7 4. CONTRACTOR will be notified in writing by COUNTY, if the Cost Report  
8 has not been received within forty-six (46) calendar days after the end of the  
9 COUNTY Fiscal year. If the Cost Report is not postmarked in the forty-six  
10 (46) calendar day time frame, future monthly reimbursements will be withheld  
11 until the COUNTY is in possession of a completed cost report. Future monthly  
12 reimbursements will be withheld if the Cost Report contains errors that are not  
13 corrected within ten (10) calendar days of written or verbal notification from  
14 the COUNTY. Failure to meet any pre-approved deadlines extension will  
15 immediately result in the withholding of future monthly reimbursements.
- 16 5. The Cost Report shall serve as the basis for year-end settlement to  
17 CONTRACTOR including a reconciliation and adjustment of all payments  
18 made to CONTRACTOR and all revenue received by CONTRACTOR. Any  
19 payments made in excess of Cost Report settlement shall be repaid upon  
20 demand, or will be deducted from the next payment to CONTRACTOR.
- 21 6. All current and/or future contract service payments to CONTRACTOR will be  
22 withheld by the COUNTY until the final current and prior year Cost Report (s)  
23 have been reconciled, settled and signed by CONTRACTOR, and received and  
24 approved by the COUNTY.

25 **K. COST REPORT SETTLEMENT:**

26 CONTRACTOR shall report Actual Costs separately, if deemed applicable and as per  
27 CONTRACTOR Schedule I, to provide Contract Client Services, Prescriptions, Health  
28 Maintenance Costs, and Flexible funding costs under this agreement on the annual cost

1 report. Where deemed applicable, Actual Costs for Indirect Administrative Expenses  
2 shall not exceed the amount of the percentage of cost as submitted in the CONTRACT  
3 Request for Proposal or Cost Proposal(s). Final year-end settlement shall not exceed  
4 the Contract Maximum Obligation, less revenue, less payment received, up to the  
5 Maximum Obligation as stated in section C above.

6 L. BANKRUPTCY:

7 Within five (5) calendar days of filing for bankruptcy, CONTRACTOR shall notify  
8 County's Department of Mental Health's Fiscal Services Unit, by certified letter with a  
9 carbon copy to the Department of Mental Health's Program Support Unit, in writing of  
10 such. The CONTRACTOR shall submit a properly prepared Cost Report in accordance  
11 with requirements and deadlines set forth in Section J before final payment is made.

12 M. AUDITS:

- 13 1. CONTRACTOR agrees that any duly authorized representative of the Federal  
14 Government, the State or COUNTY shall have the right to audit, inspect,  
15 excerpt, copy or transcribe any pertinent records and documentation relating to  
16 this Agreement or previous Agreements in previous years.
- 17 2. If this contract is terminated in accordance with Section XXIX, TERMINATION  
18 PROVISIONS, COUNTY, Federal and/or State governments may conduct a  
19 final audit of the CONTRACTOR. Final reimbursement to CONTRACTOR by  
20 COUNTY shall not be made until all audit results are known and all accounts are  
21 reconciled. Revenue collected by CONTRACTOR during this period for  
22 services provided under the terms of this Agreement will be regarded as revenue  
23 received and deducted as such from the final reimbursement claim.
- 24 3. Any audit exception resulting from an audit conducted by any duly authorized  
25 representative of the Federal Government, the State or COUNTY shall be the  
26 responsibility of the CONTRACTOR. Any audit disallowance adjustments may  
27 be paid in full upon demand or withheld at the discretion of the Director of  
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1 Mental Health against amounts due under this Agreement or Agreement(s) in  
2 subsequent years.

- 3 4. The COUNTY will conduct Annual Program Monitoring Review and/or  
4 Contract Monitoring Review (CMT). Upon completion of monitoring,  
5 Contractor will be mailed a report summarizing the results of the site visit. A  
6 corrective Action Plan will be submitted by CONTRACTOR within thirty (30)  
7 calendar days of receipt of the report. CONTRACTOR'S failure to respond  
8 within thirty (30) calendar days will result in withholding of payment until the  
9 corrective plan of action is received. CONTRACTOR'S response shall identify  
10 time frames for implementing the corrective action. Failure to provide adequate  
11 response or documentation for this or previous year's Agreements may result in  
12 contract payment withholding and/or a disallowance to be paid in full upon  
13 demand.

14 N. DATA ENTRY:

- 15 1. CONTRACTOR understands that as the COUNTY upgrades its current Data  
16 Collection System to comply with Federal, State and/or local funding and service  
17 delivery requirements; CONTRACTOR will, therefore, be responsible for  
18 attending and receiving COUNTY training associated with, but not limited to,  
19 applicable service data entry, billing and invoicing, and learning how to  
20 appropriately and successfully utilize and/or operate the current and/or upgraded  
21 Data Collection System as specified for use by the COUNTY under this  
22 agreement. The COUNTY will notify the CONTRACTOR when such training is  
23 required and available. In the event the COUNTY'S specified Data Collection  
24 System changes prior to a new fiscal year, COUNTY shall notify  
25 CONTRACTOR and provide immediate instructions and make subsequent  
26 arrangements to facilitate such a change.
- 27 2. CONTRACTOR is required to enter all units of services into the COUNTY'S  
28 specified Data Collection System for the prior month no later than 5:00 p.m. on

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the fifth (5<sup>th</sup>) working day of the current month. Late entry of services into the COUNTY'S specified Data Collection System may result in financial and/or service disallowances to the CONTRACTOR.

Rev. 05/17/10 stl

**SCHEDULE I  
MENTAL HEALTH**

**AMENDMENT 1**

CONTRACT PROVIDER NAME: CHILDHELP	FISCAL YEAR: 10/11
NEGOTIATED RATE ( )	ACTUAL COST (X)
NEGOTIATED NET AMOUNT ( )	
FISCAL RU NUMBER: 33BQ	DEPT. ID/PROGRAM: 4100207238-83550

	TBS				TOTAL	
MODE OF SERVICE:	15					
SERVICE FUNCTION:	58					
NUMBER OF UNITS	63,636					
COST PER UNIT:	\$2.20					
GROSS COST:	\$139,999	\$0		\$0		<b>139,999</b>
LESS REVENUES COLLECTED BY CONTRACTORS:						
A. PATIENT FEES						
B. PATIENT INSURANCE						
C. OTHER						
TOTAL CONTRACTOR REVENUES						
LESS MEDI-CAL/FFP						
<b>MAXIMUM OBLIGATION</b>	<b>139,999</b>	<b>0</b>		<b>0</b>	<b>0</b>	<b>139,999</b>
SOURCES OF FUNDING FOR MAXIMUM OBLIGATION:						%
A. MEDI-CAL/FFP/FEDERAL SHARE	69,999					69,999 50.00%
B. REALIGNMENT FUNDS						0
C. STATE GENERAL FUNDS						
D. COUNTY FUNDS						0
E. MEDI-CAL MATCHING FUNDS:						
1. _____	70,000					70,000 50.00%
2. _____						0
F. OTHER: _____						0 0.00%
<b>TOTAL (SOURCES OF FUNDING)</b>	<b>\$139,999</b>	<b>\$0</b>		<b>\$0</b>	<b>\$0</b>	<b>\$139,999 100.00%</b>

FUNDING SOURCES DOCUMENT: \_\_\_\_\_

STAFF ANALYST SIGNATURE: *[Signature]* DATE: 8/24/11

FISCAL SERVICES SIGNATURE: *[Signature]* DATE: 9/15/11