

AMENDMENT III TO AGREEMENT

THIS AMENDMENT, hereinafter referred to as "Amendment III", is made and entered into this 9th day of June, 2020, by and between the **COUNTY OF FRESNO**, a Political Subdivision of the State of California, hereinafter referred to as "COUNTY", and **TURNING POINT OF CENTRAL CALIFORNIA, INC.**, a private non-profit, 501 (c)(3) Corporation, whose address is P.O. Box 7447, Visalia, California 93290, hereinafter referred to as "CONTRACTOR" (collectively the "parties").

WHEREAS the parties entered into that certain Agreement, identified as COUNTY Agreement No. A-15-215, effective July 1, 2015, as amended by COUNTY Amendment No. A-15-215-1, effective February 2, 2016, and COUNTY Amendment No. A-15-215-2, effective March 1, 2020, hereinafter collectively referred to as "Agreement No. A-15-215", whereby CONTRACTOR agreed to operate a Full-Service Partnership (FSP) program to provide comprehensive mental health services, housing, and community supports to adults and older adults with a serious mental illness (SMI) for the COUNTY's Department of Behavioral Health (DBH); and

WHEREAS the parties now desire to amend the Agreement regarding changes as stated below and restate the Agreement in its entirety.

NOW, THEREFORE, in consideration of their mutual promises, covenants and conditions, hereinafter set forth, the sufficiency of which is hereby acknowledged, the parties agree as follows:

1. That the following be added to existing COUNTY Agreement No. 15-215, Section Two (2) "TERM", as set forth in the original Agreement, after Page Three (3), Line Five (5) after the word "term":

"The term of this Agreement shall be extended for an additional three (3) month period beginning July 1, 2020 and shall terminate on September 30, 2020."

2. That the following be added to existing COUNTY Agreement No. 15-215, Section Four (4) "COMPENSATION", as set forth in the original Agreement, after Page Six (6), Line Five (5), after the number "(\$2,376,149.00)":

"The maximum compensation amount for the period July 1, 2020 through September 30, 2020, shall not exceed One Million, Eight-Six Thousand, Three Hundred Forty-Five and No/100

1 Dollars (\$1,086,345.00)

2 The total maximum compensation for the entire contract term, shall not exceed Twenty-
3 One Million, Nine Hundred Thirty-Nine, Three Hundred Eighty-One and No/100 Dollars
4 (\$21,939,381.00).”

5 3. That, effective July 1, 2020, all references in existing COUNTY Agreement No. 15-215
6 to “Exhibit C” shall be changed to read “Exhibit C and C-1”.

7 4. Exhibit C-1 is attached hereto and incorporated herein by reference.

8 5. COUNTY and CONTRACTOR agree that this Amendment III is sufficient to amend the
9 Agreement; and that upon execution of this Amendment III, the Agreement, Amendment I,
10 Amendment II, and Amendment III together shall be considered the Agreement.

11 The Agreement, as hereby amended, is ratified and continued. All provisions, terms,
12 covenants, conditions and promises contained in the Agreement, and not amended herein, shall
13 remain in full force and effect. This Amendment II shall become effective upon execution.

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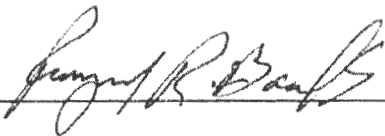
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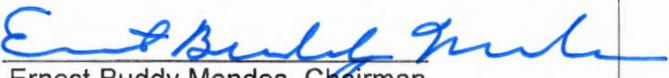
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1 IN WITNESS WHEREOF, the parties hereto have executed this Amendment III to COUNTY
2 Agreement No. 15-215 as of the day and year first hereinabove written.

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4 **CONTRACTOR:**
5 **TURNING POINT OF CENTRAL**
6 **CALIFORNIA, INC.**

COUNTY OF FRESNO

7
8 By: 

8 By: 
Ernest Buddy Mendes, Chairman
of the Board of Supervisors
of the County of Fresno

9
10 Print Name: Raymond R. Banks

11 Title: Chief Executive Officer

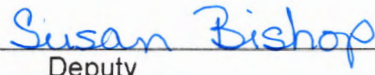
11 Date: 10-9-2020

12
13 By: 

13 **ATTEST:**
Bernice E. Seidel
Clerk to the Board of Supervisors
County of Fresno, State of California

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15 Print Name: Bruce Tyler

16 Title: Chief Financial Officer

16 By: 
Deputy

17 Date: 10-9-2020

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20 Mailing Address:
21 P.O. Box 7447
22 Visalia, CA 93290-7447
23 Phone #: (559) 732-8086 Ext. 140
24 Contact: Chief Executive Officer

25 Fund/Subclass: 0001/10000
26 Organization: 56304531
27 Account #: 7295
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VISTA SITE 3-Month Extension
Turning Point of Central Ca, Inc.
Fiscal Year (FY) 2020-21 | 7/1/20 - 9/30/20

PROGRAM EXPENSES

1000: SALARIES & BENEFITS					
Employee Salaries					
Acct #	Position	FTE	Admin	Direct	Total
1101	Program Director/Team Leader	1.00		\$ 23,834	\$ 23,834
1102	Assistant Program Director	1.00		21,448	21,448
1103	Psychiatrist moved to Consultant O/S Psychiatrist	1.00		-	-
1104	Personal Services Coordinator Supervisor	1.00		12,919	12,919
1105	Dual Diagnosis MH Specialist	3.00		36,650	36,650
1106	Education & Employment MH Specialist	3.00		36,650	36,650
1107	Criminal Justice/Group Facilitator	2.00		24,433	24,433
1108	Parent Partner/Consumer Advocate PSC	3.00		30,839	30,839
1109	Peer Specialist PSC	1.00		10,280	10,280
1110	Personal Services Coordinator (PSC)	6.00		61,678	61,678
1111	MH Professionals	3.00		58,702	58,702
1112	Peer Support Specialist	1.00		16,266	16,266
1113	Registered Nurse	2.00		19,567	19,567
1114	LVN	1.00		25,832	25,832
1115	Housing Coordinator	4.00		12,664	12,664
1116	Secretary/Medical Records/Billing/Bookeeper			40,124	40,124
1117					-
1118					-
1119			-	-	-
1120			-	-	-
1121			-	-	-
1122			-	-	-
1123			-	-	-
1124			-	-	-
1125			-	-	-
1126			-	-	-
1127			-	-	-
1128			-	-	-
1129			-	-	-
1130			-	-	-
1131			-	-	-
Personnel Salaries Subtotal		33.00	\$ -	\$ 431,886	\$ 431,886

Employee Benefits				
Acct #	Description	Admin	Direct	Total
1201	Retirement	\$ -	\$ 6,500	\$ 6,500
1202	Worker's Compensation	-	3,392	3,392
1203	Health Insurance (Medical, Vision, Life, Dental)	-	94,724	94,724
1204	API Benefits	-		-
1205	Other (Specify)	-		-
1206	Other (Specify)	-		-
Employee Benefits Subtotal:		\$ -	\$ 104,616	\$ 104,616
Payroll Taxes & Expenses:				
Acct #	Description	Admin	Direct	Total
1301	OASDI	\$ -	\$ 6,050	\$ 6,050
1302	FICA/MEDICARE / OASDI	-	27,009	27,009
1303	SUI	-	7,682	7,682
1304	Other: Accrued Paid Leave	-		-
1305	Other (Specify)	-		-
1306	Other (Specify)	-		-
Payroll Taxes & Expenses Subtotal:		\$ -	\$ 40,741	\$ 40,741
EMPLOYEE SALARIES & BENEFITS TOTAL:		\$ -	\$ 577,243	\$ 577,243

2000: CLIENT SUPPORT		
Acct #	Line Item Description	Amount
2001	Client Housing Support	\$ 137,800
2002	Client Housing Operating Expenditures	2,120
2003	Clothing, Food, & Hygiene	7,685
2004	Client Transportation & Support	4,770
2005	Education Support	1,590
2006	Employment Support	795
2007	Respite Care	-
2008	Household Items	375
2009	Utility Vouchers	375
2010	Child Care	375
2011	Other (Specify)	
2012	Other (Specify)	
2013	Other (Specify)	
2014	Other (Specify)	
2015	Other (Specify)	
2016	Other (Specify)	
DIRECT CLIENT CARE TOTAL		\$ 155,885

3000: OPERATING EXPENSES		
Acct #	Line Item Description	Amount
3001	Telecommunications	\$ 6,042
3002	Printing/Postage	1,813
3003	Office, Household & Program Supplies	3,975
3004	Advertising/Publications/Recruiting/Legal Notices	1,250
3005	Staff Development & Training	3,000
3006	Staff Mileage/Vehicle Maintenance/Gas/Insurance	33,991
3007	Licenses	375
3008		-
3009	Program Supplies - Therapeutic	1,325
3010	Staff Meetings	-
3011	Recruitment	-
3012	Client Activities/Recreation	3,975
OPERATING EXPENSES TOTAL:		\$ 55,746

4000: FACILITIES & EQUIPMENT		
Acct #	Line Item Description	Amount
4001	Building Maintenance	\$ 4,306
4002	Rent/Lease Building	13,074
4003	Rent/Lease Equipment Maintenance	1,750
4004	Rent/Lease Vehicles	-
4005	Security	331
4006	Utilities	8,552
4007	Equipment Maintenance	-
4008	Building Insurance	1,458
4009	Equipment Purchase	-
4010	Other (Specify)	-
FACILITIES/EQUIPMENT TOTAL:		\$ 29,471

5000: SPECIAL EXPENSES		
Acct #	Line Item Description	Amount
5001	Consultant (Network & Data Management)	\$ -
5002	HMIS (Health Management Information System)	-
5003	Contractual/Consulting Services (Specify)	-
5004	Translation Services	1,590
5005	Contractual/Consulting Services : Psychiatrist	98,114
5006	Contractual/Consulting Services : Consultant	-
5007	Medication Support	21,465
5008	Other (Specify)	-
SPECIAL EXPENSES TOTAL:		\$ 121,169

6000: ADMINISTRATIVE EXPENSES		
Acct #	Line Item Description	Amount
6001	Administrative Overhead	\$ 141,403
6002	Liability Insurance	1,458
6003	Accounting/Bookkeeping	-
6004	External Audit	625
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation <i>(Provider-Owned Equipment to be Used for Program Purposes)</i>	345
6008	Other: Bank Fees	-
6009	Other: Legal Expense	-
6010	Other: Licenses	-
6011	Other (Specify)	-
6012	Other (Specify)	-
ADMINISTRATIVE EXPENSES TOTAL		\$ 143,831

7000: FIXED ASSETS		
Acct #	Line Item Description	Amount
7001	Computer Equipment & Software	\$ 3,000
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	
7003	Furniture & Fixtures	
7004	Leasehold/Tenant/Building Improvements	
7005	Other Assets over \$500 with Lifespan of 2 Years +	
7006	Assets over \$5,000/unit (Specify)	
7007	Other (Specify)	
7008	Other (Specify)	
FIXED ASSETS EXPENSES TOTAL		\$ 3,000

TOTAL PROGRAM EXPENSES		\$ 1,086,345
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PROGRAM FUNDING SOURCES

8000 - SHORT/DOYLE MEDI-CAL (FEDERAL FINANCIAL PARTICIPATION)				
Acct #	Line Item Description	Service Units	Rate	Amount
8001	Mental Health Services	26,381	2.12	\$ 55,928
8002	Case Management	48,501	1.45	70,326
8003	Crisis Services	2,887	2.81	8,112
8004	Medication Support	44,160	3.90	172,224
8005	Collateral	2,970	2.12	6,296
8006	Plan Development	1,472	2.12	3,121
8007	Assessment	3,736	2.12	7,920
8008	Rehabilitation	205,079	2.12	434,767
Estimated Specialty Mental Health Services Billing Totals:		335,186		\$ 758,695
Estimated % of Clients who are Medi-Cal Beneficiaries				100%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				758,695
Federal Financial Participation (FFP) %			70%	531,087
MEDI-CAL FFP TOTAL				\$ 531,087

8100 - SUBSTANCE USE DISORDER FUNDS		
Acct #	Line Item Description	Amount
8101	Drug Medi-Cal	\$ -
8102	SABG	\$ -
SUBSTANCE USE DISORDER FUNDS TOTAL		\$ -

8200 - REALIGNMENT		
Acct #	Line Item Description	Amount
8201	Realignment	\$ 0
REALIGNMENT TOTAL		\$ 0

8300 - MENTAL HEALTH SERVICE ACT (MHSA)			
Acct #	MHSA Component	MHSA Program Name	Amount
8301	CSS - Community Services & Supports	Adult FSP Services	\$ 539,008
8302	PEI - Prevention & Early Intervention		-
8303	INN - Innovations		-
8304	WET - Workforce Education & Training		-
8305	CFTN - Capital Facilities & Technology		-
MHSA TOTAL			\$ 539,008

8400 - OTHER REVENUE		
Acct #	Line Item Description	Amount
8401	Client Fees	
8402	Client Insurance	-
8403	Client Rents	16,250
8404	Other (Specify)	-
8405	Other (Specify)	-
OTHER REVENUE TOTAL		\$ 16,250

TOTAL PROGRAM FUNDING SOURCES: \$ 1,086,345