

MASTER AGREEMENT

THIS AGREEMENT is made and entered into this 23rd day of October, 2018, by and between the COUNTY OF FRESNO, a Political Subdivision of the State of California, hereinafter referred to as "COUNTY", and each CONTRACTOR, listed in Exhibit A "List of Contractors", attached hereto and by this reference incorporated herein, and collectively hereinafter referred to as "CONTRACTOR(S)", and such additional CONTRACTOR(S) as may, from time to time during the term of this Agreement, be added by COUNTY. Reference in this Agreement to "parties" shall be understood to refer to COUNTY and each individual CONTRACTOR, unless otherwise specified.

WITNESSETH:

WHEREAS, COUNTY, through its Department of Behavioral Health (DBH), Mental Health Services Act (MHSA), Community Services and Supports (CSS) component, and through input from the MHSA community stakeholder process, recognizes the need to provide culturally competent and linguistically accessible specialty mental health services for target cultural/ethnic/linguistic unserved and/or underserved populations with serious emotional disturbance (SED) and/or serious mental illness (SMI) in Fresno County; and

WHEREAS, COUNTY, through its DBH, desires to develop community-based training sites for bilingual and bicultural graduate, post-master, doctoral and/or post-doctoral students, who require supervised clinical hours to be eligible for State licensing in social work, marriage and family counseling, professional clinical counseling, or clinical psychology; and

WHEREAS, COUNTY, through its DBH, is a Mental Health Plan (MHP), as defined in Title 9 of the California Code of Regulations (CCR), section 1810.226; and

WHEREAS, CONTRACTOR(S) are qualified and willing to provide said services pursuant to the terms and conditions of this Agreement.

NOW, THEREFORE, in consideration of their mutual covenants and conditions, the parties hereto agree as follows:

1. COVERED SERVICES

A. CONTRACTOR(S) shall perform all services and fulfill all responsibilities as set forth in Exhibit B, "Cultural Specific Services Program Overview", attached hereto and by this reference

1 incorporated herein and made part of this Agreement. CONTRACTOR(S) shall also perform all
2 services and fulfill all responsibilities as set forth in their individual "Scope of Work" documents
3 approved by the COUNTY's DBH Director, or his or her designee, and attached hereto as Exhibits B-1
4 *et seq.* and incorporated herein by reference. In addition, all services identified as Full Service
5 Partnership (FSP) services shall be performed in accordance with Exhibit C, "Full Service Partnership
6 Service Delivery Model", attached hereto and by this reference incorporated herein.

7 B. CONTRACTOR(S) shall also perform all services and fulfill all responsibilities as
8 specified in COUNTY's Request for Proposal (RFP) No. 18-043 dated April 2, 2018, Addendum No.
9 One (1) dated April 12, 2018, and Addendum No. Two (2) dated April 20, 2018, hereinafter collectively
10 referred to as COUNTY's Revised RFP No. 18-043, all incorporated herein by reference and made part
11 of this Agreement. In the event of any inconsistency among these documents, the inconsistency shall
12 be resolved by giving precedence in the following order of priority: (1) to this Agreement, including all
13 Exhibits; (2) to COUNTY's Revised RFP No. 18-043; and (3) to CONTRACTOR(S)' Response to
14 COUNTY's Revised RFP No. 18-043. A copy of the COUNTY's Revised RFP No. 18-043 and
15 CONTRACTOR(S)' Response to COUNTY's Revised RFP No. 18-043 shall be retained and made
16 available during the term of this Agreement by COUNTY's Internal Services Department – Purchasing
17 Division.

18 C. CONTRACTOR(S) shall align programs, services, and practices with the vision,
19 mission, and guiding principles of the DBH, as further described in Exhibit D, "Fresno County
20 Department of Behavioral Health Guiding Principles of Care Delivery", attached hereto and by this
21 reference incorporated herein and made part of this Agreement.

22 D. CONTRACTOR(S) shall send to County's DBH upon execution of this
23 Agreement, a detailed plan ensuring clinically appropriate leadership and supervision of their clinical
24 program. Recruitment and retaining clinical leadership with the clinical competencies to oversee
25 services based on the level of care and program design presented herein shall be included in this plan.
26 A description and monitoring of this plan shall be provided.

27 E. CONTRACTOR(S) shall participate in utilizing and integrating the Reaching
28 Recovery and other clinical tools and measures as directed by the DBH.

1 F. It is the expectation of the COUNTY that CONTRACTOR(S) provide timely
2 access to services that meet the State of California standards for care. CONTRACTOR(S) shall
3 provide non-urgent services within ten (10) business days from request/referral to first appointment.
4 CONTRACTOR(S) shall provide psychiatry services within fifteen (15) business days from
5 request/referral to first appointment. CONTRACTOR(S) shall provide urgent services as soon as
6 needed based on each client's needs. CONTRACTOR(S) shall track timeliness of services to clients
7 and provide a monthly report showing the monitoring or tracking tool that captures this data. COUNTY
8 and CONTRACTOR(S) shall meet to go over this monitoring tool on a monthly basis as needed.
9 COUNTY shall take corrective action if there is a failure to comply by CONTRACTOR(S) with the above
10 timely access standards. CONTRACTOR(S) shall also provide tracking tools and measurements for
11 effectiveness, efficiency, and client satisfaction indicators as required by Commission on Accreditation
12 of Rehabilitation Facilities (CARF) standards and as further detailed in Exhibit B and Exhibits B-1 *et*
13 *seq.*

14 G. It is acknowledged that upon execution of this Agreement, CONTRACTOR(S)'
15 service site for the delivery of Cultural Specific Services program will be located as stated in Exhibit A.
16 Any change to CONTRACTOR(S)' location of the service site may be made only upon thirty (30) days
17 advance written notification to COUNTY's DBH Director and upon written approval from COUNTY's
18 DBH Director, or his or her designee.

19 H. CONTRACTOR(S) shall maintain requirements as an Organizational Provider
20 throughout this Agreement, as described in Section Seventeen (17) of this Agreement. If for any
21 reason this status is not maintained, the COUNTY may terminate this Agreement pursuant to Section
22 Three (3) of this Agreement.

23 I. CONTRACTOR(S) agrees that prior to providing services under the terms and
24 conditions of this Agreement, it shall have appropriate staff hired and in place for program services and
25 operations, or COUNTY may, in addition to other remedies it may have, suspend referrals or terminate
26 this Agreement, in accordance with Section Three (3) of this Agreement.

27 J. This Agreement provides for Cultural Specific Services that includes
28 outpatient/intensive case management specialty mental health services and may include full service

partnership services as detailed in Exhibits B-1 *et seq.* CONTRACTOR(S) shall collect, maintain and report all data for outpatient/intensive case management services and full service partnership services independent of one another, including but not limited to: Medi-Cal billing, other insurance billing and reports; staff schedules and reports; performance measures; monthly invoices and general ledgers; and other data as required.

K. CONTRACTOR(S) shall participate in monthly, or as needed, workgroup meetings consisting of staff from COUNTY's DBH to discuss requirements, data reporting, training, policies and procedures, overall program operations and any problems or foreseeable problems that may arise.

L. It is acknowledged by all parties hereto that COUNTY's DBH Contracts Division shall monitor said Cultural Specific Services program in accordance with Section Fourteen (14) of this Agreement.

2. TERM

The term of this Agreement shall become effective on October 1, 2018 through and including June 30, 2021.

This Agreement may be extended for two (2) additional consecutive (12) month periods upon written approval of both parties no later than sixty (60) days prior to the first day of the next twelve (12) month extension. The COUNTY's DBH Director, or his or her designee, is authorized to execute such written approval on behalf of COUNTY based on the CONTRACTOR(S)' satisfactory performance.

CONTRACTOR(S) added to this Agreement after the execution date shall become part of the Agreement effective upon the date the executed signature page is received and approved by the COUNTY's DBH Director, or his or her designee, as set forth in Section Eleven (11) of this Agreement.

The June 30th termination date specified herein shall be the termination date for all CONTRACTOR(S), regardless of when CONTRACTOR is added to this Agreement. Any twelve (12) month renewal period of this Agreement for any CONTRACTOR already providing services under this Agreement shall commence on July 1st of the then current fiscal year.

3. TERMINATION

1 A. Non-Allocation of Funds - The terms of this Agreement, and the services to be
2 provided thereunder, are contingent on the approval of funds by the appropriating government agency.
3 Should sufficient funds not be allocated, the services provided may be modified, or this Agreement
4 terminated at any time by giving the CONTRACTOR(S) sixty (60) days advance written notice.

5 B. Breach of Contract - COUNTY may immediately suspend or terminate this
6 Agreement in whole or in part, where in the determination of the COUNTY there is:

- 7 1) An illegal or improper use of funds;
- 8 2) A failure to comply with any term of this Agreement;
- 9 3) A substantially incorrect or incomplete report submitted to the COUNTY; and
- 10 4) Improperly performed service.

11 In no event shall any payment by COUNTY constitute a waiver by COUNTY of
12 any breach of this Agreement or any default which may then exist on the part of the CONTRACTOR(S).
13 Neither shall such payment impair or prejudice any remedy available to COUNTY with respect to the
14 breach or default. The COUNTY shall have the right to demand of each CONTRACTOR the repayment
15 to the COUNTY of any funds disbursed to that CONTRACTOR under this Agreement, which in the
16 judgment of COUNTY were not expended in accordance with the terms of this Agreement. Each
17 CONTRACTOR shall promptly refund any funds upon demand or, at COUNTY's option, such
18 repayment shall be deducted from future payments owing to that CONTRACTOR under this
19 Agreement.

20 C. Without Cause - Under circumstances other than those set forth above, this
21 Agreement may be terminated by COUNTY or COUNTY's DBH Director, or his or her designee, or one
22 (1) or more CONTRACTOR(S) upon the giving of sixty (60) days advance written notice of an intention
23 to terminate.

24 4. COMPENSATION

25 COUNTY agrees to pay CONTRACTOR(S) and CONTRACTOR(S) agree to receive
26 compensation for actual expenditures incurred in accordance with the individual CONTRACTOR's
27 "budget" documents approved by the COUNTY's DBH Director, or his or her designee, and attached
28 hereto as Exhibits E-1 *et seq.* and incorporated herein by this reference.

1 A. Annual Compensation Amounts

2 For October 1, 2018 through June 30, 2019, in no event shall the maximum
3 compensation amount under this Agreement exceed Two Million, One Hundred Forty-Four Thousand,
4 Six Hundred Twenty-Six and No/100 Dollars (\$2,144,626.00) for all CONTRACTOR(S) combined.

5 For July 1, 2019 through June 30, 2020, in no event shall the maximum
6 compensation amount under this Agreement exceed Two Million, One Hundred Forty-Four Thousand,
7 Six Hundred Twenty-Six and No/100 Dollars (\$2,144,626.00) for all CONTRACTOR(S) combined.

8 For July 1, 2020 through June 30, 2021, in no event shall the maximum
9 compensation amount under this Agreement exceed Two Million, One Hundred Forty-Four Thousand
10 Six Hundred Twenty-Six and No/100 Dollars (\$2,144,626.00) for all CONTRACTOR(S) combined.

11 If performance standards are met and this Agreement is extended for additional
12 twelve (12) month renewal periods pursuant to Section Two (2), TERM, herein, then in no event shall
13 the maximum compensation amount under this Agreement for each subsequent twelve (12) month
14 period exceed Two Million, One Hundred Forty-Four Thousand, Six Hundred Twenty-Six and No/100
15 Dollars (\$2,144,626.00) for all CONTRACTOR(S) combined.

16 The maximum amounts paid to each CONTRACTOR identified in this Agreement
17 shall be as stated in the individual CONTRACTOR(S)' "Scope of Work" documents approved by the
18 COUNTY's DBH Director, or his or her designee, as attached in Exhibits B-1 *et seq.*

19 B. Total Maximum Compensation Amounts

20 In no event shall the total maximum compensation amount under this Agreement
21 for October 1, 2018 through June 30, 2021 exceed Six Million, Four Hundred Thirty-Three Thousand,
22 Eight Hundred Seventy-Eight and No/100 Dollars (\$6,433,878.00) for all CONTRACTOR(S) combined.

23 If performance standards are met and this Agreement is extended for additional
24 twelve (12) month terms pursuant to Section Two (2), then in no event shall the total maximum
25 compensation amount under this Agreement exceed Ten Million, Seven Hundred Twenty-Three
26 Thousand, One Hundred Thirty and No/100 Dollars (\$10,723,130.00) for all CONTRACTOR(S)
27 combined.

28 C. Prior to March 1st of each contract year, CONTRACTOR(S) may provide to

COUNTY's DBH an updated budget and budget narrative in the format identified in Exhibits E-1 *et seq.* for the upcoming twelve (12) month period. Each budget shall require justification by the CONTRACTOR(S), and approval of COUNTY's DBH Director, or his or her designee, prior to April 1st for the upcoming twelve (12) month period covered by said budget. If said budget is not received by the March 1st due date, the budget for the upcoming twelve (12) month period will remain at the prior year's funding level. The amount of said approved budget shall not exceed the maximum compensation for the current Agreement period.

D. If CONTRACTOR(S) fails to generate the Medi-Cal revenue and/or client fee reimbursement amounts set forth in the individual CONTRACTOR's budgets set forth in Exhibits E-1 *et seq.*, the COUNTY shall not be obligated to pay the difference between these estimated amounts and the actual amounts generated. It is further understood by COUNTY and CONTRACTOR(S) that any Medi-Cal revenue and/or client fee reimbursements above the amounts stated herein will be used to directly offset the COUNTY's contribution of COUNTY funds identified in Exhibits E-1 *et seq.* The offset of funds will also be clearly identified in monthly invoices received from CONTRACTOR(S) as further described in Section Five (5) of this Agreement.

E. Travel shall be reimbursed based on actual expenditures and mileage reimbursement shall be at CONTRACTOR(S)' adopted rate per mile, not to exceed the Federal Internal Revenue Services (IRS) published rate.

F. It is understood that all expenses incidental to CONTRACTOR(S)' performance of services under this Agreement shall be borne by CONTRACTOR(S). If CONTRACTOR(S) fail to comply with any provision of this Agreement, COUNTY shall be relieved of its obligation for further compensation.

G. Payments shall be made by COUNTY to CONTRACTOR(S) in arrears for services provided during the preceding month, within forty-five (45) days after the date of receipt and approval by COUNTY of the monthly invoicing as described in Section Five (5) herein. Payments shall be made after receipt and verification of services provided in the performance of this Agreement, in accordance with the individual "Scope of Work" as provided for in Exhibits B-1 *et seq.*, and shall be documented to COUNTY on a monthly basis by the tenth (10th) of the month following the month of

1 said service provision.

2 H. COUNTY shall not be obligated to make any payments under this Agreement if
3 the request for payment is received by COUNTY more than sixty (60) days after this Agreement has
4 terminated or expired.

5 I. All final invoices and/or any final budget modification requests shall be submitted
6 by CONTRACTOR(S) within sixty (60) days following the final month of service for which payment is
7 claimed. No action shall be taken by COUNTY on invoices submitted beyond the sixty (60) day
8 closeout period. Any compensation which is not expended by CONTRACTOR(S) pursuant to the terms
9 and conditions of this Agreement shall automatically revert to COUNTY.

10 J. The services provided by CONTRACTOR(S) under this Agreement are funded in
11 whole or in part by the State of California. In the event that funding for these services is delayed by the
12 State Controller, COUNTY may defer payments to CONTRACTOR(S). The amount of the deferred
13 payment shall not exceed the amount of funding delayed by the State Controller to the COUNTY. The
14 period of time of the deferral by COUNTY shall not exceed the period of time of the State Controller's
15 delay of payment to COUNTY plus forty-five (45) days.

16 K. CONTRACTOR(S) shall be held financially liable for any and all future
17 disallowances/audit exceptions due to CONTRACTOR(S)' deficiency discovered through the applicable
18 State's audit process and MHP's utilization review process during the course of the Agreement. At
19 COUNTY's election, the disallowed amount will be remitted within forty-five (45) days to COUNTY upon
20 notification or shall be withheld from subsequent payments to CONTRACTOR(S). CONTRACTOR(S)
21 shall not receive reimbursement for any units of services rendered that are disallowed or denied by the
22 applicable MHP utilization review process or through the State Department of Health Care Services
23 (DHCS) cost report audit settlement process for Medi-Cal eligible clients.

24 L. It is understood by CONTRACTOR(S) and COUNTY that this Agreement is
25 funded with mental health funds to serve adults with SMI disorders and children/youth with SED
26 disorders, many of whom have co-occurring substance use disorders. It is further understood by
27 CONTRACTOR(S) and COUNTY that funds shall be used to support appropriately integrated and
28 documented treatment services for co-occurring mental health and substance use disorders in the

target population, and that integrated services can be documented in assessments, interventions, and program notes documenting linkages.

M. It is also understood by CONTRACTOR(S) and COUNTY that this Agreement provides for traditional mental health services and non-traditional cultural-based treatments and supports in an integrated model. It is further understood by CONTRACTOR(S) and COUNTY that funds shall be used to support appropriately integrated and documented cultural-based treatments in the target population and that integrated services can be documented in assessments, interventions, and program notes documenting linkages and services.

5. INVOICING

A. CONTRACTOR(S) shall invoice COUNTY in arrears by the tenth (10th) of each month for actual services provided during the prior month to DBHInvoices@fresnocountyca.gov and a carbon copy to the assigned DBH Mental Health Contracts Staff Analyst. After CONTRACTOR(S) renders service to referred clients, CONTRACTOR(S) shall invoice COUNTY for payment, certify the expenditure, and submit electronic claiming into COUNTY's electronic information system for all clients, including those eligible for Medi-Cal as well as those that are not eligible for Medi-Cal, including contracted cost per unit and actual cost per unit. Invoices and reports shall be in such detail as acceptable to COUNTY's DBH, as described in this section herein and in Section Fourteen (14) of this Agreement. Billing information must include the client's name, patient ID number, date of service, type of mental health service provided, duration of service, client's International Classification of Diseases (ICD) diagnosis, service provider name, units of service provided, rate of service provided, and actual amount of service. No reimbursement for services shall be made until the invoice, claims certification, and back-up documentation is received, verified and approved by COUNTY's DBH. COUNTY must pay CONTRACTOR before submitting a claim to DHCS for Federal reimbursement for Medi-Cal eligible clients.

B. CONTRACTOR shall submit monthly invoices and general ledgers that itemize the line item charges for monthly program costs (per applicable budget, as identified in Exhibit E-1 *et seq.*), including the cost per unit calculation based on clients served within that month, and excluding unallowable costs. Unallowable costs such as lobbying or political donations must be deducted from

1 the monthly invoice reimbursements. The invoices and general ledgers will serve as tracking tools to
2 determine if CONTRACTOR's program costs are in accordance with its budgeted cost, and cost per
3 unit negotiated by service modes compared to actual cost per unit, as set forth in Exhibit E-1 *et seq.*
4 The actual cost per unit will be based upon total costs and total units of service. It will also serve for the
5 COUNTY to certify the public funds expended for purposes of claiming Federal and State
6 reimbursement for the cost of Medi-Cal services and activities.

7 C. Monthly invoices shall include a client roster, identifying volume reported by
8 payer group clients served (including third party payer of services) by month and year-to-date, including
9 percentages.

10 D. If CONTRACTOR(S) chooses to utilize the COUNTY's electronic health record
11 (EHR) system (currently AVATAR, the contracted EHR system by DBH) method as their own full EHR,
12 COUNTY's DBH shall invoice CONTRACTOR(S) in arrears by the fifth (5th) day of each month for the
13 prior month's hosting fee for access to the COUNTY's electronic information system in accordance with
14 the fee schedule as set forth in Exhibit F, "Electronic Health Records Software Charges" attached
15 hereto and incorporated herein by reference. COUNTY shall invoice CONTRACTOR annually for the
16 annual maintenance and licensing fee for access to the COUNTY's electronic information system in
17 accordance with the fee schedule as set forth in Exhibit F. COUNTY shall also invoice
18 CONTRACTOR(S) annually for the Reaching Recovery fee for access to the COUNTY's electronic
19 information system in accordance with the fee schedule as set forth in Exhibit F. CONTRACTOR shall
20 provide payment for these expenditures to COUNTY's Fresno County Department of Behavioral Health,
21 Accounts Receivable, P.O. Box 712, Fresno, CA 93717-0712, Attention: Business Office, within forty-
22 five (45) days after the date of receipt by CONTRACTOR(S) of the invoicing provided by COUNTY.

23 E. At the discretion of COUNTY's DBH Director, or his or her designee, if an invoice
24 is incorrect or is otherwise not in proper form or substance, COUNTY's DBH Director, or his or her
25 designee, shall have the right to withhold payment as to only that portion of the invoice that is incorrect
26 or improper after five (5) days prior notice to CONTRACTOR(S). CONTRACTOR(S) agrees to
27 continue to provide services for a period of ninety (90) days after notification of an incorrect or improper
28 invoice. If after the ninety (90) day period, the invoice(s) is still not corrected to COUNTY DBH's

1 satisfaction, COUNTY's DBH Director, or his or her designee, may elect to terminate this Agreement,
2 pursuant to the termination provisions stated in Section Three (3) of this Agreement. In addition, for
3 invoices received ninety (90) days after the expiration of each term of this Agreement or termination of
4 this Agreement, at the discretion of COUNTY's DBH Director, or his or her designee, COUNTY's DBH
5 shall have the right to deny payment of any additional invoices received.

6 F. CONTRACTOR(S) must report all third party collections from other funding
7 sources such as private insurance, client private pay or any other third party. COUNTY expects the
8 invoice for reimbursement to equal the amount due CONTRACTOR less any funding sources not
9 eligible for Federal reimbursement and any other revenues generated by CONTRACTOR (i.e., private
10 insurance, etc).

11 G. CONTRACTOR(S) shall submit monthly staffing reports that identify all direct
12 service and support staff, applicable licensure/certifications, and full time hours worked to be used as a
13 tracking tool to determine if CONTRACTOR(S)'s program is staffed according to the services provided
14 under this Agreement.

15 H. CONTRACTOR(S) will remit annually within ninety (90) days from June 30, a
16 schedule to provide the required information on published charges for all authorized direct specialty
17 mental health services. The published charge listing will serve as a source document to determine
18 each CONTRACTOR's usual and customary charge prevalent in the public mental health sector that is
19 used to bill the general public, insurers or other non-Medi-Cal third party payers during the course of
20 business operations.

21 I. CONTRACTOR(S) must maintain such financial records for a period of seven (7)
22 years, or if there a dispute, audit or inspection, until it is resolved, whichever is later. CONTRACTOR(S)
23 will be responsible for any disallowances related to inadequate documentation.

24 J. CONTRACTOR(S) is responsible for collection and managing data in a manner
25 to be determined by DHCS and the DBH MHP in accordance with applicable rules and regulations.
26 COUNTY's electronic information system is a critical source of information for purposes of monitoring
27 and obtaining reimbursement. CONTRACTOR(S) must attend the COUNTY DBH's Business Office
28 training on documentation and billing and related cost reporting.

1 K. CONTRACTOR(S) shall submit service data into COUNTY's electronic
2 information system within thirty (30) calendar days from the date services were rendered. Federal and
3 State reimbursement for Medi-Cal specialty mental health services is based on public expenditures
4 certified by the CONTRACTOR(S). CONTRACTOR(S) must submit a signed certified public
5 expenditure report in the monthly invoice. DHCS expects the claim for Federal and State
6 reimbursement to equal the amount the COUNTY paid the CONTRACTOR(S) for the services rendered
7 less any funding sources not eligible for Federal reimbursement.

8 L. CONTRACTOR(S) must provide all necessary data to allow the COUNTY to bill
9 Medi-Cal, and any other third-party source, for services and meet State and Federal reporting
10 requirements. The necessary data can be provided by a variety of means, including but not limited to:
11 1) direct data entry into COUNTY's electronic information system; 2) providing an electronic file
12 compatible with COUNTY's electronic information system; or 3) integration between COUNTY's
13 electronic information system and CONTRACTOR(S)' information system(s).

14 M. If a client has dual coverage, such as other health coverage (OHC) or Federal
15 Medicare, the CONTRACTOR(S) will be responsible for billing the carrier and obtaining a
16 payment/denial or have validation of claiming with no response ninety (90) days after the claim was
17 mailed before the service can be entered into the COUNTY's electronic information system.
18 CONTRACTOR(S) must report all revenue collected from OHC, Medicare, third-party, or private-pay in
19 each monthly invoice and in the annual cost report that is required to be submitted. A copy of
20 explanation of benefits or CWM 1500 is required as documentation. CONTRACTOR(S) must comply
21 with all laws and regulations governing MediCare program, including, but not limited to: 1) the
22 requirement of the Medicare Act, 42 U.S.C. Section 1395 *et seq.*; and 2) the regulation and rules
23 promulgated by the Centers for Medicare and Medicaid Services as they relate to participation,
24 coverage and claiming reimbursement. CONTRACTOR(S) will be responsible for compliance as of the
25 effective date of each federal, state or local law or regulation specified.

26 N. Data entry into COUNTY's electronic information system shall be the
27 responsibility of the CONTRACTOR(S). The direct specialty mental health services data must be
28 reconciled by the CONTRACTOR(S) to the monthly invoices submitted for payment. COUNTY shall

1 monitor the volume of services and cost of services entered into the COUNTY's electronic information
2 system. Any and all audit exceptions resulting from the provision and reporting of Medi-Cal services by
3 CONTRACTOR(S) shall be the sole responsibility of the CONTRACTOR(S). CONTRACTOR(S) will
4 comply with all applicable policies, procedures, directives and guidelines regarding the use of
5 COUNTY's electronic information system. If CONTRACTOR(S) elects to use their own EHR system,
6 the EHR must have Certification Commission for Healthcare Information Technology (CCHIT)
7 certification for Security Access Control, Audit and Authentication. CONTRACTOR(S)' billers in the
8 EHR system will need to sign an Electronic Signature Certification (ESR).

9 O. Medi-Cal Certification and Mental Health Plan Compliance

10 CONTRACTOR(S) shall establish and maintain Medi-Cal certification or become
11 certified within ninety (90) days of the start of each CONTRACTOR's term within this Agreement. In
12 addition, CONTRACTOR shall work with the COUNTY's DBH to execute the process if not currently
13 certified by COUNTY for credentialing of staff. During this process, the CONTRACTOR(S) will obtain a
14 legal entity number established by the DHCS, as this is a requirement for maintaining MHP
15 organizational provider status throughout the term of this Agreement. CONTRACTOR(S) will be
16 required to become Medi-Cal certified prior to providing direct specialty mental health services to Medi-
17 Cal eligible clients and seeking reimbursement from the COUNTY for costs associated with direct
18 specialty mental health services. CONTRACTOR(S) will not be reimbursed by COUNTY for any direct
19 specialty mental health services rendered prior to certification.

20 CONTRACTOR(S) shall provide specialty mental health services in accordance
21 with the COUNTY's MHP. CONTRACTOR(S) must comply with the "Fresno County Mental Health
22 Plan Compliance Program and Code of Conduct" set forth in Exhibit G, attached hereto and
23 incorporated herein by reference and made part of this Agreement.

24 CONTRACTOR(S) may provide direct specialty mental health services using
25 unlicensed staff as long as the individual is approved as a provider by the COUNTY's MHP, is
26 supervised by licensed staff who met the Board of Behavioral Sciences requirements for supervision,
27 works within his/her scope, and only delivers allowable direct specialty mental health services.
28 Unlicensed staff must also be credentialed by COUNTY's DBH Managed Care.

1 It is understood that each service is subject to audit for compliance with Federal
2 and State regulations and that COUNTY may be making payments in advance of said review. In the
3 event that a service is disapproved, COUNTY may, at its sole discretion, withhold compensation or
4 offset from other payments due, the amount of said disapproved services. CONTRACTOR(S) shall be
5 responsible for audit exceptions to ineligible dates of services or incorrect application of utilization
6 review requirements.

7 **6. INDEPENDENT CONTRACTOR**

8 In performance of the work, duties, and obligations assumed by CONTRACTOR(S)
9 under this Agreement, it is mutually understood and agreed that CONTRACTOR(S), including any and
10 all of CONTRACTOR(S)' officers, agents, and employees will at all times be acting and performing as
11 independent contractors, and shall act in an independent capacity and not as an officer, agent, servant,
12 employee, joint venture, partner, or associate of COUNTY. Furthermore, COUNTY shall have no right
13 to control or supervise or direct the manner or method by which each CONTRACTOR shall perform its
14 work and function. However, COUNTY shall retain the right to administer this Agreement so as to
15 verify that each CONTRACTOR is performing their obligations in accordance with the terms and
16 conditions thereof. CONTRACTOR(S) and COUNTY shall comply with all applicable provisions of law
17 and the rules and regulations, if any, of governmental authorities having jurisdiction over matters which
18 are directly or indirectly the subject of this Agreement.

19 Because of its status as an independent contractor, CONTRACTOR(S) shall have
20 absolutely no right to employment rights and benefits available to COUNTY employees. Each
21 CONTRACTOR shall be solely liable and responsible for providing to, or on behalf of, its employees all
22 legally-required employee benefits. In addition, CONTRACTOR(S) shall be solely responsible and
23 save COUNTY harmless from all matters relating to payment of CONTRACTOR(S)' employees,
24 including compliance with Social Security, withholding, and all other regulations governing such
25 matters. It is acknowledged that during the term of this Agreement, CONTRACTOR(S) may be
26 providing services to others unrelated to COUNTY or to this Agreement.

27 **7. MODIFICATION**

28 Any matters of this Agreement may be modified from time to time by the written consent

of all the parties without, in any way, affecting the remainder.

Notwithstanding the above, changes to services, staffing, and responsibilities of the CONTRACTOR(S), as set forth in Exhibit B and Exhibits B-1 *et seq.*, as needed to accommodate changes in the law relating to mental health and substance use disorder treatment, may be made with the signed written approval of COUNTY's DBH Director, or his or her designee, and CONTRACTOR(S) through an amendment approved by COUNTY's Counsel and the COUNTY's Auditor-Controller/Treasurer-Tax Collector's Office.

Changes to expense category (i.e., Personnel Expenses, Operating Expenses, Financial Services Expenses, etc.) subtotals in the budgets that do not exceed ten percent (10%) of the maximum compensation payable to the individual CONTRACTOR, changes to the volume of units of services/types of service units and service rates to be provided as set forth in Exhibits E-1 *et seq.*, movement of funds between individual CONTRACTOR's program budgets, and changes to the fee schedule in Exhibit F may be made with the written approval of COUNTY's DBH Director, or his or her designee. Changes to the expense category subtotals in the budget that exceed ten percent (10%) of the maximum compensation payable to the individual CONTRACTOR, or changes that exceed the maximum amount payable to the individual CONTRACTOR, may be made with the signed written approval of COUNTY's DBH Director, or his or her designee, through an amendment approved by COUNTY's Counsel and COUNTY's Auditor-Controller/Treasurer-Tax Collector's Office.

Said modifications to scope of services, service volume/types of service units, service rates, expense category subtotals, and/or individual CONTRACTOR's maximum amount payable shall not result in any change to the total combined maximum compensation amount payable to all CONTRACTOR(S) under this Agreement, as stated herein.

8. NON-ASSIGNMENT

COUNTY and CONTRACTOR(S) shall not assign, transfer or subcontract this Agreement nor their rights or duties under this Agreement without the prior written consent of COUNTY and the individual CONTRACTOR seeking to make such assignment.

9. HOLD-HARMLESS

Each CONTRACTOR agrees to indemnify, save, hold harmless, and at COUNTY's

request, defend the COUNTY, its officers, agents and employees from any and all costs and expenses, including attorney fees and court costs, damages, liabilities, claims and losses occurring or resulting to COUNTY in connection with the performance, or failure to perform, by each CONTRACTOR, its officers, agents or employees under this Agreement, and from any and all costs and expenses, including attorney fees and court costs, damages, liabilities, claims and losses occurring or resulting to any person, firm or corporation who may be injured or damaged by the performance, or failure to perform, of CONTRACTOR(S), its officers, agents or employees under this Agreement.

Each CONTRACTOR agrees to indemnify COUNTY for Federal, State of California and/or local audit exceptions resulting from noncompliance herein on the part of the CONTRACTOR(S).

10. INSURANCE

Without limiting COUNTY's right to obtain indemnification from CONTRACTOR(S) or any third parties, each CONTRACTOR, at its sole expense, shall maintain in full force and effect the following insurance policies throughout the term of this Agreement:

A. Commercial General Liability

Commercial General Liability Insurance with limits of not less than Two Million Dollars (\$2,000,000) per occurrence and an annual aggregate of Four Million Dollars (\$4,000,000). This policy shall be issued on a per occurrence basis. COUNTY may require specific coverages including completed operations, product liability, contractual liability, Explosion-Collapse-Underground, fire legal liability or any other liability insurance deemed necessary because of the nature of the Agreement.

B. Automobile Liability

Comprehensive Automobile Liability Insurance with limits no less than One Million Dollars (\$1,000,000) per accident for bodily injury and property damage. Coverage should include any automobile used in connection with this Agreement. If CONTRACTOR(S) employees are not covered by CONTRACTOR(S) automobile liability insurance policy, CONTRACTOR(S) shall ensure that each employee as part of this Agreement procures and maintains their own private automobile coverage in force during the term of this Agreement, at the employee's sole cost and expense.

C. Professional Liability

If CONTRACTOR(S) employs licensed professional staff (e.g. Ph.D., R.N., L.C.S.W., L.M.F.T., etc.) in providing services, Professional Liability Insurance

1 with limits of not less than One Million Dollars (\$1,000,000) per occurrence,
2 Three Million Dollars (\$3,000,000) annual aggregate. CONTRACTOR agrees
3 that it shall maintain, at its sole expense, in full force and effect for a period of
4 five (5) years following the termination of this Agreement, one or more policies of
5 professional liability insurance with limits of coverage as specified herein.

6 D. Real and Property Insurance

7 CONTRACTOR(S) shall maintain a policy of insurance for all risk personal
8 property coverage which shall be endorsed naming the County of Fresno as an
9 additional loss payee. The personal property coverage shall be in an amount
10 that will cover the total of the COUNTY purchase and owned property, at a
11 minimum, as discussed in Section Twenty One (21) of this Agreement.

12 All Risk Property Insurance

13 As applicable, CONTRACTOR(S) will provide property coverage for the full
14 replacement value of the COUNTY'S personal property in possession of
15 CONTRACTOR(S) and/or used in the execution of this Agreement. COUNTY
16 will be identified on an appropriate certificate of insurance as the certificate
17 holder and will be named as an Additional Loss Payee on the Property Insurance
18 Policy.

19 E. Worker's Compensation

20 A policy of Worker's Compensation Insurance as may be required by the
21 California Labor Code.

22 F. Child Abuse/Molestation and Social Services Coverage

23 Each CONTRACTOR shall have either separate policies or an umbrella policy
24 with endorsements covering Child Abuse/Molestation and Social Services
25 Liability coverage or have a specific endorsement on their General Commercial
26 liability policy covering Child Abuse/Molestation and Social Services Liability.
27 The policy limits for these policies shall be One Million Dollars (\$1,000,000) per
28 occurrence with a Two Million Dollars (\$2,000,000) annual aggregate. The
policies are to be on a per occurrence basis.

G. Cyber Liability

Cyber Liability Insurance, with limits not less than Two Million Dollars
(\$2,000,000) per occurrence or claim, Two Million Dollars (\$2,000,000)
aggregate. Coverage shall be sufficiently broad to respond to the duties and
obligations as is undertaken by CONTRACTOR(S) in this Agreement and shall
include, but not be limited to, claims involving infringement of intellectual
property, including but not limited to infringement of copyright, trademark, trade
dress, invasion of privacy violations, information theft, damage to or destruction
of electronic information, release of private information, alteration of electronic
information, extortion and network security. The policy shall provide coverage for
breach response costs as well as regulatory fines and penalties as well as credit
monitoring expenses with limits sufficient to respond to these obligations.

1 H. Waiver of Subrogation

2 CONTRACTOR(S) hereby grants to COUNTY a waiver of any right to
3 subrogation which any insurer of said CONTRACTOR(S) may acquire against
4 the COUNTY by virtue of the payment of any loss under such insurance.
5 CONTRACTOR(S) agrees to obtain any endorsement that may be necessary to
6 affect this waiver of subrogation, but this provision applies regardless of whether
7 or not the COUNTY has received a waiver of subrogation endorsement from the
8 insurer.

9 Each CONTRACTOR shall obtain endorsements to the Commercial General Liability
10 insurance naming the County of Fresno, its officers, agents, and employees, individually and
11 collectively, as additional insured, but only insofar as the operations under this Agreement are
12 concerned. Such coverage for additional insured shall apply as primary insurance and any other
13 insurance, or self-insurance, maintained by COUNTY, its officers, agents and employees shall be
14 excess only and not contributing with insurance provided under CONTRACTOR(S)' policies herein.
15 This insurance shall not be cancelled or changed without a minimum of thirty (30) days advance written
16 notice given to COUNTY.

17 Within thirty (30) days from the date each CONTRACTOR signs this Agreement, said
18 CONTRACTOR shall provide certificates of insurance and endorsements as stated above for all of the
19 foregoing policies, as required herein, to the County of Fresno, Department of Behavioral Health,
20 Contract Services Division, 3133 N. Millbrook Ave, Fresno, California, 93703, Attention: Cultural
21 Specific Services Mental Health Contract Staff Analyst, stating that such insurance coverages have
22 been obtained and are in full force; that the County of Fresno, its officers, agents and employees will
23 not be responsible for any premiums on the policies; that such Commercial General Liability insurance
24 names the County of Fresno, its officers, agents and employees, individually and collectively, as
25 additional insured, but only insofar as the operations under this Agreement are concerned; that such
26 coverage for additional insured shall apply as primary insurance and any other insurance, or self-
27 insurance, maintained by COUNTY, its officers, agents and employees, shall be excess only and not
28 contributing with insurance provided under CONTRACTOR(S) policies herein; and that this insurance
 shall not be cancelled or changed without a minimum of thirty (30) days advance, written notice given to
 COUNTY.

1 In the event CONTRACTOR(S) fails to keep in effect at all times insurance coverage as
2 herein provided, COUNTY may, in addition to other remedies it may have, suspend or terminate this
3 Agreement upon the occurrence of such event.

4 All policies shall be with admitted insurers licensed to do business in the State of
5 California. Insurance purchased shall be from companies possessing a current A.M. Best, Inc. rating of
6 A FSC VII or better.

7 **11. ADDITIONS/DELETIONS OF CONTRACTORS**

8 COUNTY's DBH Director, or his or her designee, reserves the right at any time during
9 the term of this Agreement to add new CONTRACTOR(S) to those listed in Exhibit A with oversight
10 and approval by Internal Services Department – Purchasing Division. It is understood any such
11 additions will not affect compensation paid to any other CONTRACTOR, and therefore such additions
12 may be made by COUNTY without notice to or approval of the other CONTRACTOR(S) under this
13 Agreement. These same provisions shall apply to the deletion of any CONTRACTOR(S) contained in
14 Exhibit A, except that deletions shall be by written mutual agreement between the COUNTY and the
15 particular CONTRACTOR to be deleted, or shall be in accordance with the provisions of Section Three
16 (3) of this Agreement.

17 **12. LICENSES/CERTIFICATES**

18 Throughout the term of this Agreement, CONTRACTOR(S) and CONTRACTOR(S) staff
19 shall maintain all necessary licenses, permits, approvals, certificates, waivers and exemptions
20 necessary for the provision of the services hereunder and required by the laws and regulations of the
21 United States of America, State of California, the County of Fresno, and any other applicable
22 governmental agencies. CONTRACTOR(S) shall notify COUNTY immediately in writing of its inability
23 to obtain or maintain such licenses, permits, approvals, certificates, waivers and exemptions
24 irrespective of the pendency of any appeal related thereto. Additionally, CONTRACTOR(S) and
25 CONTRACTOR(S)' staff shall comply with all applicable laws, rules or regulations, as may now exist or
26 be hereafter changed.

27 **13. RECORDS**

28 CONTRACTOR(S) shall maintain records in accordance with COUNTY's

1 "Documentation Standards for Client Records," attached hereto as Exhibit H and incorporated herein by
2 reference. During site visits, COUNTY shall be allowed to review records of services provided,
3 including the goals and objectives of the treatment plan, and how the therapy provided is achieving the
4 goals and objectives. All medical records shall be maintained for a minimum of ten (10) years from the
5 date of the end of the Agreement.

6 **14. REPORTS**

7 A. Outcome Reports

8 CONTRACTOR(S) shall submit to COUNTY's DBH service outcome reports, as
9 requested by COUNTY's DBH. Outcome reports and outcome requirements are subject to change at
10 COUNTY's DBH discretion.

11 B. Additional Reports

12 CONTRACTOR(S) shall also furnish to COUNTY such statements, records,
13 reports, data, and other information as COUNTY may request pertaining to matters covered by this
14 Agreement. In the event that CONTRACTOR(S) fails to provide such reports or other information
15 required hereunder, it shall be deemed sufficient cause for COUNTY to withhold monthly payments
16 until there is compliance. In addition, CONTRACTOR(S) shall provide written notification and
17 explanation to COUNTY within five (5) days of any funds received from another source to conduct the
18 same services covered by this Agreement.

19 C. Cost Report

20 CONTRACTOR(S) agrees to submit a complete and accurate detailed cost
21 report on an annual basis for each fiscal year ending June 30th in the format prescribed by the DHCS
22 for the purposes of Short Doyle Medi-Cal reimbursements and total costs for programs. The cost report
23 will be the source document for several phases of settlement with the DHCS for the purposes of Short
24 Doyle Medi-Cal reimbursement. CONTRACTOR(S) shall report costs under their approved legal entity
25 number established during the Medi-Cal certification process. The information provided applies to
26 CONTRACTOR(S) for program related costs for services rendered to Medi-Cal and non-Medi-Cal.
27 CONTRACTOR(S) will remit a schedule to provide the required information on published charges (PC)
28 for all authorized services. The report will serve as a source document to determine their usual and

1 customary charge prevalent in the public mental health sector that is used to bill the general public,
2 insurers, or other non-Medi-Cal third party payers during the course of business operations.
3 CONTRACTOR(S) must report all collections for Medi-Cal/Medicare services and collections. The
4 CONTRACTOR(S) shall also submit with the cost report a copy of the CONTRACTOR(S)' general
5 ledger that supports revenues and expenditures and reconciled detailed report of reported total units of
6 services rendered under this Agreement to the units of services reported by CONTRACTOR(S) to
7 COUNTY'S electronic information system.

8 Cost Reports must be submitted to the COUNTY as a hard copy with a signed
9 cover letter and electronic copy of completed DHCS cost report form along with requested support
10 documents following each fiscal year ending June 30th. During the month of September of each year
11 this Agreement is effective, COUNTY will issue instructions of the annual cost report which indicates
12 the training session, DHCS cost report template worksheets, and deadlines to submit, as determined by
13 State annually. CONTRACTOR(S) shall remit a hard copy of cost report to County of Fresno,
14 Attention: Cost Report Team, PO BOX 45003, Fresno CA 93718. CONTRACTOR(S) shall remit the
15 electronic copy or any inquiries to DBHcostreportteam@fresnocountyca.gov/

16 All Cost Reports must be prepared in accordance with General Accepted
17 Accounting Principles (GAAP) and Welfare and Institutions Code §§ 5651(a)(4), 5664(a), 5705(b)(3)
18 and 5718(c). Unallowable costs such as lobby or political donations must be deducted on the cost
19 report and invoice reimbursement

20 If the CONTRACTOR(S) does not submit the cost report by the deadline,
21 including any extension period granted by the COUNTY, the COUNTY may withhold payments of
22 pending invoicing under compensation until the cost report has been submitted and clears COUNTY
23 desk audit for completeness.

24 D. Settlements with State Department of Health Care Services (DHCS)

25 During the term on this Agreement and thereafter, COUNTY and
26 CONTRACTOR(S) agree to settle dollar amounts disallowed or settled in accordance with DHCS audit
27 settlement findings related to the Medi-Cal and EPSDT reimbursements. CONTRACTOR(S) will
28 participate in the several phases of settlements between COUNTY/CONTRACTOR(S) and DHCS. The

phases of initial cost reporting for settlement according to State reconciliation of records for paid Medi-Cal services and audit settlement are: State DHCS audit 1) initial cost reporting - after an internal review by COUNTY, the COUNTY files cost report with State DHCS on behalf of the CONTRACTOR(S)' legal entity for the fiscal year; 2) settlement – State reconciliation of records for paid Medi-Cal services, approximately eighteen (18) to thirty-six (36) months following the State close of the fiscal year, DHCS will send notice for any settlement under this provision to the COUNTY; 3) Audit Settlement - State DHCS audit. After final reconciliation and settlement DHCS may conduct a review of medical records, cost reports along with support documents submitted to COUNTY in initial submission to determine accuracy and may disallow cost and/or unit of service reported on the CONTRACTOR(S)' legal entity cost report. COUNTY may choose to appeal and therefore reserves the right to defer payback settlement with CONTRACTOR(S) until resolution of the appeal. DHCS Audits will follow federal Medicaid procedures for managing overpayments.

If at the end of the Audit Settlement, the COUNTY determines that it overpaid CONTRACTOR(S), it will require the CONTRACTOR(S) to repay the Medi-Cal related overpayment. Funds owed to COUNTY will be due within forty-five (45) days of notification by the COUNTY, or COUNTY shall withhold future payments until all excess funds have been recouped by means of an offset against any payments then or thereafter owing to CONTRACTOR(S) under this or any other Agreement.

15. MONITORING

CONTRACTOR(S) agrees to extend to COUNTY's staff, COUNTY's DBH Director, or his or her designee, and DHCS, or their designees, the right to review and monitor records, program or procedures, at any time, in regard to clients, as well as the overall operation of CONTRACTOR(S)' program, in order to ensure compliance with the terms and conditions of this Agreement.

16. REFERENCES TO LAWS AND RULES

In the event any law, regulation, or policy referred to in this Agreement is amended during the term thereof, the parties hereto agree to comply with the amended provision as of the effective date of such amendment.

17. COMPLIANCE WITH STATE REQUIREMENTS

1 CONTRACTOR(S) recognizes that COUNTY operates its mental health programs under
2 an agreement with DHCS, and that under said agreement the State imposes certain requirements on
3 COUNTY and its subcontractors. CONTRACTOR(S) shall adhere to all State Requirements, including
4 those identified in Exhibit I, "State Mental Health Requirements", attached hereto and by this reference
5 incorporated herein and made part of this Agreement.

6 **18. COMPLIANCE WITH STATE MEDI-CAL REQUIREMENTS**

7 CONTRACTOR(S) shall be required to maintain organizational provider certification by
8 Fresno County. CONTRACTOR(S) must meet Medi-Cal organization provider standards as listed in
9 Exhibit J, "Medi-Cal Organizational Provider Standards", attached hereto and by this reference
10 incorporated herein and made part of this Agreement. It is acknowledged that all references to
11 Organizational Provider and/or Provider in Exhibit J shall refer to CONTRACTOR(S). In addition,
12 CONTRACTOR(S) shall inform every client of their rights under the COUNTY's MHP as described in
13 Exhibit K, "Fresno County Mental Health Plan Grievances and Appeals Process," attached hereto and
14 by this reference incorporated herein and made part of this Agreement. CONTRACTOR(S) shall also
15 file an incident report for all incidents involving clients, following the DBH's "Incident Reporting and
16 Intensive Analysis" policy and procedure guide and using the "Incident Report" worksheet identified in
17 Exhibit L, attached hereto and by this reference incorporated herein and made part of this Agreement,
18 or a protocol and worksheet presented by CONTRACTOR(S) that is accepted by COUNTY's DBH
19 Director, or his or her designee.

20 **19. CONFIDENTIALITY**

21 All services performed by CONTRACTOR(S) under this Agreement shall be in strict
22 conformance with all applicable Federal, State of California and/or local laws and regulations relating to
23 confidentiality.

24 **20. HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT**

25 COUNTY and CONTRACTOR(S) each consider and represent themselves as covered
26 entities as defined by the U.S. Health Insurance Portability and Accountability Act of 1996, Public Law
27 104-191 (HIPAA) and agree to use and disclose protected health information (PHI) as required by law.

28 COUNTY and CONTRACTOR(S) acknowledge that the exchange of PHI between them

1 is only for treatment, payment, and health care operations.

2 COUNTY and CONTRACTOR(S) intend to protect the privacy and provide for the
3 security of PHI pursuant to the Agreement in compliance with HIPAA, the Health Information
4 Technology for Economic and Clinical Health Act, Public Law 111-005 (HITECH), and regulations
5 promulgated thereunder by the U.S. Department of Health and Human Services (HIPAA Regulations)
6 and other applicable laws. As part of the HIPAA Regulations, the Privacy Rule and the Security Rule
7 require CONTRACTOR(S) to enter into a contract containing specific requirements prior to the
8 disclosure of PHI, as set forth in, but not limited to, Title 45, Sections 164.314(a), 164.502(e) and
9 164.504(e) of the Code of Federal Regulations (CFR).

10 **21. DATA SECURITY**

11 For the purpose of preventing the potential loss, misappropriation or inadvertent access,
12 viewing, use or disclosure of COUNTY data including sensitive or personal client information; abuse of
13 COUNTY resources; and/or disruption to COUNTY operations, individuals and/or agencies that enter
14 into a contractual relationship with the COUNTY for the purpose of providing services under this
15 Agreement must employ adequate data security measures to protect the confidential information
16 provided to CONTRACTOR(S) by the COUNTY, including but not limited to the following:

17 A. CONTRACTOR(S)-Owned Mobile, Wireless, or Handheld Devices

18 CONTRACTOR(S) may not connect to COUNTY networks via personally-owned
19 mobile, wireless or handheld devices, unless the following conditions are met:

- 20 1) CONTRACTOR(S) has received authorization by COUNTY for
- 21 telecommuting purposes;
- 22 2) Current virus protection software is in place;
- 23 3) Mobile device has the remote wipe feature enabled; and
- 24 4) A secure connection is used.

25 B. CONTRACTOR(S)-Owned Computers or Computer Peripherals

26 CONTRACTOR(S) may not bring CONTRACTOR(S)-owned computers or
27 computer peripherals into the COUNTY for use without prior authorization from the COUNTY's Chief
28 Information Officer, and/or his or her designee(s), including but not limited to mobile storage devices. If

1 data is approved to be transferred, data must be stored on a secure server approved by the COUNTY
2 and transferred by means of a Virtual Private Network (VPN) connection, or another type of secure
3 connection. Said data must be encrypted.

4 C. COUNTY-Owned Computer Equipment

5 CONTRACTOR(S) may not use COUNTY computers or computer peripherals on
6 non-COUNTY premises without prior authorization from the COUNTY's Chief Information Officer,
7 and/or his or her designee(s).

8 D. CONTRACTOR(S) may not store COUNTY's private, confidential or sensitive
9 data on any hard-disk drive, portable storage device, or remote storage installation unless encrypted.

10 E. CONTRACTOR(S) shall be responsible to employ strict controls to ensure the
11 integrity and security of COUNTY's confidential information and to prevent unauthorized access,
12 viewing, use or disclosure of data maintained in computer files, program documentation, data
13 processing systems, data files and data processing equipment which stores or processes COUNTY
14 data internally and externally.

15 F. Confidential client information transmitted to one party by the other by means of
16 electronic transmissions must be encrypted according to Advanced Encryption Standards (AES) of 128
17 BIT or higher. Additionally, a password or pass phrase must be utilized.

18 G. CONTRACTOR(S) is responsible to immediately notify COUNTY of any
19 violations, breaches or potential breaches of security related to COUNTY's confidential information,
20 data maintained in computer files, program documentation, data processing systems, data files and
21 data processing equipment which stores or processes COUNTY data internally or externally.

22 H. COUNTY shall provide oversight to CONTRACTOR(S)'s response to all incidents
23 arising from a possible breach of security related to COUNTY's confidential client information provided
24 to CONTRACTOR(S). CONTRACTOR(S) will be responsible to issue any notification to affected
25 individuals as required by law or as deemed necessary by COUNTY in its sole discretion.
26 CONTRACTOR(S) will be responsible for all costs incurred as a result of providing the required
27 notification.

28 **21. PROPERTY OF COUNTY**

1 A. COUNTY and CONTRACTOR(S) recognizes that fixed assets are tangible and
2 intangible property obtained or controlled under COUNTY's MHP for use in operational capacity and
3 will benefit COUNTY for a period more than one year. Depreciation of the qualified items will be on a
4 straight-line basis.

5 For COUNTY purposes, fixed assets must fulfill three (3) qualifications:

- 6 1. Asset must have life span of over one (1) year.
- 7 2. The asset is not a repair part.
- 8 3. The asset must be valued at or greater than the capitalization thresholds
9 for the asset type.

<u>Asset type</u>	<u>Threshold</u>
• land	\$0
• buildings and improvements	\$100,000
• infrastructure	\$100,000
• tangible	\$5,000
o equipment	
o vehicles	
• intangible asset	\$100,000
o internally generated software	
o purchased software	
o easements	
o patents	
• and capital lease	\$5,000

18
19 Qualified fixed asset equipment is to be reported and approved by COUNTY. If it
20 is approved and identified as an asset, it will be tagged with a COUNTY program number. A "Fixed
21 Asset Log", attached hereto as Exhibit M and by this reference incorporated herein and made part of
22 this Agreement, will be maintained by COUNTY's Asset Management System and annual inventoried
23 until the asset is fully depreciated. During the terms of this Agreement, CONTRACTOR(S)' fixed assets
24 may be inventoried in comparison to COUNTY's DBH Asset Inventory System.

25 B. Certain purchases less than Five Thousand and No/100 Dollars (\$5,000.00) but
26 more than \$1,000, with over one (1) year life span, and/or are mobile and high risk of theft or loss are
27 sensitive assets. Such sensitive items are not limited to computers, copiers, televisions, cameras and
28 other sensitive items as determined by COUNTY's DBH Director, or his or her designee.

1 CONTRACTOR(S) maintains a tracking system on the items and are not required to be capitalize or
2 depreciated. The items are subject to annual inventory for compliance.

3 C. Assets shall be retained by COUNTY, as COUNTY property, in the event this
4 Agreement is terminated or upon expiration of this Agreement. CONTRACTOR(S) agrees to
5 participate in an annual inventory of all COUNTY fixed and inventoried assets. Upon termination or
6 expiration of this Agreement, CONTRACTOR(S) shall be physically present when fixed and inventoried
7 assets are returned to COUNTY possession. CONTRACTOR(S) is responsible for returning to
8 COUNTY all COUNTY owned undepreciated fixed and inventoried assets, or the monetary value of
9 said assets if unable to produce the assets at the expiration or termination of this Agreement.

10 CONTRACTOR further agrees to the following:

11 1. To maintain all items of equipment in good working order and condition,
12 normal wear and tear is expected;

13 2. To label all items of equipment with COUNTY assigned program number,
14 to perform periodic inventories as required by COUNTY and to maintain an inventory list showing
15 where and how the equipment is being used, in accordance with procedures developed by
16 COUNTY. All such lists shall be submitted to COUNTY within ten (10) days of any request therefore;
17 and

18 3. To report in writing to COUNTY immediately after discovery, the loss or
19 theft of any items of equipment. For stolen items, the local law enforcement agency must be contacted
20 and a copy of the police report submitted to COUNTY.

21 D. The purchase of any equipment by CONTRACTOR(S) with funds provided
22 hereunder shall require the prior written approval of COUNTY's DBH, shall fulfill the provisions of this
23 Agreement as appropriate, and must be directly related to CONTRACTOR(S)' services or activity under
24 the terms of this Agreement. COUNTY's DBH may refuse reimbursement for any costs resulting from
25 equipment purchased, which are incurred by CONTRACTOR(S), if prior written approval has not been
26 obtained from COUNTY.

27 E. CONTRACTOR(S) must obtain prior written approval from COUNTY's DBH
28 whenever there is any modification or change in the use of any property acquired or improved, in whole

1 or in part, using funds under this Agreement. If any real or personal property acquired or improved with
2 said funds identified herein is sold and/or is utilized by CONTRACTOR(S) for a use which does not
3 qualify under this Agreement, CONTRACTOR(S) shall reimburse COUNTY in an amount equal to the
4 current fair market value of the property, less any portion thereof attributable to expenditures of funds
5 not provided under this Agreement. These requirements shall continue in effect for the life of the
6 property. In the event this Agreement expires, or terminates, the requirements for this Section shall
7 remain in effect for activities or property funded with said funds, unless action is taken by the State
8 government to relieve COUNTY of these obligations.

9 **22. NON-DISCRIMINATION**

10 During the performance of this Agreement, CONTRACTOR(S) and its subcontractors
11 shall not deny the contract's benefits to any person on the basis of race, religious creed, color, national
12 origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital
13 status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran
14 status, nor shall they discriminate unlawfully against any employee or applicant for employment
15 because of race, religious creed, color, national origin, ancestry, physical disability, mental disability,
16 medical condition, genetic information, marital status, sex, gender, gender identity, gender expression,
17 age, sexual orientation, or military or veteran status. CONTRACTOR(S) shall insure that the evaluation
18 and treatment of employees and applicants for employment are free of such discrimination.

19 CONTRACTOR(S) and subcontractors shall comply with the provisions of the Fair
20 Employment and Housing Act (Gov. Code §12800 et seq.), the regulations promulgated thereunder
21 (Cal. Code Regs., tit. 2, §11000 et seq.), the provisions of Article 9.5, Chapter 1, Part 1, Division 3, Title
22 2 of the Government Code (Gov. Code §11135-11139.5), and the regulations or standards adopted by
23 the awarding state agency to implement such article. CONTRACTOR(S) shall permit access by
24 representatives of the Department of Fair Employment and Housing and the awarding state agency
25 upon reasonable notice at any time during the normal business hours, but in no case less than twenty-
26 four (24) hours notice, to such of its books, records, accounts, and all other sources of information and
27 its facilities as said Department or Agency shall require to ascertain compliance with this clause.
28 CONTRACTOR(S) and its subcontractors shall give written notice of their obligations under this clause

to labor organizations with which they have a collective bargaining or other agreement. (See Cal. Code Regs., tit. 2, §11105) CONTRACTOR(S) shall include the Non-Discrimination and compliance provisions of this clause in all subcontracts to perform work under this Agreement.

23. CULTURAL COMPETENCY

As related to Cultural and Linguistic Competence, CONTRACTOR(S) shall comply with:

A. Title 6 of the Civil Rights Act of 1964 (42 U.S.C. Section 2000d, and 45 C.F.R Part 80) and Executive Order 12250 of 1979 which prohibits recipients of federal financial assistance from discriminating against persons based on race, color, national origin, sex, disability or religion.

This is interpreted to mean that a limited English proficient (LEP) individual is entitled to equal access and participation in federally funded programs through the provision of comprehensive and quality bilingual services.

B. Policies and procedures for ensuring access and appropriate use of trained interpreters and material translation services for all LEP consumers, including, but not limited to, assessing the cultural and linguistic needs of its consumers, training of staff on the policies and procedures, and monitoring its language assistance program. The CONTRACTOR(S)' procedures must include ensuring compliance of any sub-contracted providers with these requirements.

C. CONTRACTOR(S) shall not use minors as interpreters.

D. CONTRACTOR(S) shall provide and pay for interpreting and translation services to persons participating in CONTRACTOR(S)' services who have limited or no English language proficiency, including services to persons who are deaf or blind. Interpreter and translation services shall be provided as necessary to allow such participants meaningful access to the programs, services and benefits provided by CONTRACTOR(S). Interpreter and translation services, including translation of CONTRACTOR(S)' "vital documents" (those documents that contain information that is critical for accessing CONTRACTOR(S)' services or are required by law) shall be provided to participants at no cost to the participant. CONTRACTOR(S) shall ensure that any employees, agents, subcontractors, or partners who interpret or translate for a program participant, or who directly communicate with a program participant in a language other than English, demonstrate proficiency in the participant's language and can effectively communicate any specialized terms and concepts peculiar to

1 CONTRACTOR(S) services.

2 E. In compliance with the State mandated Culturally and Linguistically Appropriate
3 Services standards as published by the Office of Minority Health, CONTRACTOR(S) must submit to
4 COUNTY for approval, within sixty (60) days from date of contract execution, CONTRACTOR(S)' plan
5 to address all fifteen (15) national cultural competency standards as set forth in the "National Standards
6 on Culturally and Linguistically Appropriate Services (CLAS)"
7 (<http://minorityhealth.hhs.gov/assets/pdf/checked/finalreport/pdf>) and Exhibit N, "Cultural Competence
8 Form", attached hereto and by this reference incorporated herein and made a part of this Agreement.
9 COUNTY's annual on-site review of CONTRACTOR(S) shall include collection of documentation to
10 ensure all national standards are implemented. As the national competency standards are updated,
11 CONTRACTOR(S)' plan must be updated accordingly.

12 F. CONTRACTOR shall be responsible for conducting an annual cultural
13 competency self-assessment and provide the results of said self-assessment to the COUNTY'S
14 DBH. The annual cultural competency self-assessment instruments shall be reviewed by the COUNTY
15 and revised as necessary to meet the approval of the COUNTY.

16 G. Cultural competency training for CONTRACTOR staff should be substantively
17 integrated into health professions education and training at all levels, both academic and
18 functional, including core curriculum, professional licensure, and continuing professional development
19 programs. On an annual basis, CONTRACTOR's direct service providers shall complete eight (8)
20 hours of cultural competency training. CONTRACTOR on a monthly basis shall provide COUNTY DBH
21 a monthly monitoring tool/report that shows cultural competency trainings completed.

22 H. CONTRACTOR shall attend the COUNTY's Cultural Competency Committee
23 monthly meetings, maintain its own cultural competence oversight committee, and develop a cultural
24 competency plan to address and evaluate cultural competency issues.

25 **24. AMERICANS WITH DISABILITIES ACT**

26 CONTRACTOR(S) agrees to ensure that deliverables developed and produced,
27 pursuant to this Agreement shall comply with the accessibility requirements of Section 508 of the
28 Rehabilitation Act and the Americans with Disabilities Act of 1973 as amended (29 U.S.C. §794 (d)),

1 and regulations implementing that Act as set forth in Part 1194 of Title 36 of the Code of Federal
2 Regulations. In 1998, Congress amended the Rehabilitation Act of 1973 to require Federal agencies to
3 make their electronic and information technology (EIT) accessible to people with disabilities. California
4 Government Code Section 11135 codifies section 508 of the Act requiring accessibility of electronic and
5 information technology.

6 **25. CONFLICT OF INTEREST**

7 No officer, agent, or employee of COUNTY who exercises any function or responsibility
8 for planning and carrying out the services provided under this Agreement shall have any direct or
9 indirect personal financial interest in this Agreement. In addition, no employee of COUNTY shall be
10 employed by CONTRACTOR(S) to fulfill any contractual obligations with COUNTY.

11 CONTRACTOR(S) shall also comply with all Federal, State of California, and local
12 conflict of interest laws, statutes, and regulations, which shall be applicable to all parties and
13 beneficiaries under this Agreement and any officer, agent, or employee of COUNTY.

14 **26. CHARITABLE CHOICE**

15 CONTRACTOR(S) may not discriminate in its program delivery against a client or
16 potential client on the basis of religion or religious belief, a refusal to hold a religious belief, or a refusal
17 to actively participate in a religious practice. Any specifically religious activity or service made available
18 to individuals by CONTRACTOR(S) must be voluntary as well as separate in time and location from
19 COUNTY-funded activities and services. CONTRACTOR(S) shall inform COUNTY as to whether it is
20 faith-based. If CONTRACTOR(S) identifies as faith-based, it must submit to COUNTY's DBH a copy of
21 its policy on referring individuals to an alternate treatment provider, and include a copy of this policy in
22 its client admission forms. The policy must inform individuals that they may be referred to an
23 alternative provider if they object to the religious nature of the program, and include a notice to
24 COUNTY's DBH. Adherence to this policy will be monitored during annual site reviews and reviews of
25 client files. If CONTRACTOR(S) identifies as faith-based, by July 1st of each year CONTRACTOR will
26 be required to report to COUNTY's DBH the number of individuals who requested referrals to alternate
27 providers based on religious objection.

28 **27. TAX EQUITY AND FISCAL RESPONSIBILITY ACT**

1 To the extent necessary to prevent disallowance of reimbursement under section
2 1861(v) (1) (I) of the Social Security Act, (42 U.S.C. § 1395x, subd. (v)(1)[I]), until the expiration of four
3 (4) years after the furnishing of services under this Agreement, CONTRACTOR(S) shall make
4 available, upon written request to the Secretary of the United States Department of Health and Human
5 Services, or upon request to the Comptroller General of the United States General Accounting Office,
6 or any of their duly authorized representatives, a copy of this Agreement and such books, documents,
7 and records as are necessary to certify the nature and extent of the costs of these services provided by
8 CONTRACTOR(S) under this Agreement. CONTRACTOR(S) further agrees that in the event
9 CONTRACTOR(S) carries out any of its duties under this Agreement through a subcontract, with a
10 value or cost of Ten Thousand and No/100 Dollars (\$10,000.00) or more over a twelve (12) month
11 period, with a related organization, such Agreement shall contain a clause to the effect that until the
12 expiration of four (4) years after the furnishing of such services pursuant to such subcontract, the
13 related organizations shall make available, upon written request to the Secretary of the United States
14 Department of Health and Human Services, or upon request to the Comptroller General of the United
15 States General Accounting Office, or any of their duly authorized representatives, a copy of such
16 subcontract and such books, documents, and records of such organization as are necessary to verify
17 the nature and extent of such costs.

18 **28. SINGLE AUDIT CLAUSE**

19 A. If CONTRACTOR(S) expends Seven Hundred Fifty Thousand Dollars and
20 No/100 Dollars (\$750,000.00) or more in Federal and Federal flow-through monies, CONTRACTOR(S)
21 agrees to conduct an annual audit in accordance with the requirements of the Single Audit Standards
22 as set forth in Office of Management and Budget (OMB) 2 CFR 200. CONTRACTOR(S) shall submit
23 said audit and management letter to COUNTY. The audit must include a statement of findings or a
24 statement that there were no findings. If there were negative findings, CONTRACTOR(S) must include
25 a corrective action plan signed by an authorized individual. CONTRACTOR(S) agrees to take action to
26 correct any material non-compliance or weakness found as a result of such audit. Such audit shall be
27 delivered to COUNTY's DBH Business Office for review within nine (9) months of the end of any fiscal
28 year in which funds were expended and/or received for the program. Failure to perform the requisite

audit functions as required by this Agreement may result in COUNTY performing the necessary audit tasks, or at COUNTY's option, contracting with a public accountant to perform said audit, or, may result in the inability of COUNTY to enter into future agreements with CONTRACTOR(S). All audit costs related to this Agreement are the sole responsibility of CONTRACTOR(S).

B. A single audit report is not applicable if CONTRACTOR(S)'s Federal contracts do not exceed the Seven Hundred Fifty Thousand and No/100 Dollars (\$750,000.00) requirement or CONTRACTOR(S)' only funding is through Drug-related Medi-Cal. If a single audit is not applicable, a program audit must be performed and a program audit report with management letter shall be submitted by CONTRACTOR(S) to COUNTY as a minimum requirement to attest to CONTRACTOR's solvency. Said audit report shall be delivered to COUNTY's DBH Business Office for review, no later than nine (9) months after the close of the fiscal year in which the funds supplied through this Agreement are expended. Failure to comply with this Act may result in COUNTY performing the necessary audit tasks or contracting with a qualified accountant to perform said audit. All audit costs related to this Agreement are the sole responsibility of CONTRACTOR(S) who agrees to take corrective action to eliminate any material noncompliance or weakness found as a result of such audit. Audit work performed by COUNTY under this section shall be billed to the CONTRACTOR(S) at COUNTY's cost, as determined by COUNTY's Auditor-Controller/Treasurer-Tax Collector.

C. CONTRACTOR(S) shall make available all records and accounts for inspection by COUNTY, the State of California, if applicable, the Comptroller General of the United States, the Federal Grantor Agency, or any of their duly authorized representatives, at all reasonable times for a period of at least three (3) years following final payment under this Agreement or the closure of all other pending matters, whichever is later.

29. COMPLIANCE

CONTRACTOR(S) agrees to comply with the COUNTY's "Contractor Code of Conduct and Ethics" and the COUNTY's Compliance Program in accordance with Exhibit G. Within thirty (30) days of entering into this Agreement with the COUNTY, CONTRACTOR(S) shall have all of CONTRACTOR(S)' employees, agents and subcontractors providing services under this Agreement certify in writing, that he or she has received, read, understood, and shall abide by the Contractor Code

1 of Conduct and Ethics. CONTRACTOR(S) shall ensure that within thirty (30) days of hire, all new
2 employees, agents and subcontractors providing services under this Agreement shall certify in writing
3 that he or she has received, read, understood, and shall abide by the Contractor Code of Conduct and
4 Ethics. CONTRACTOR(S) understands that the promotion of and adherence to the Code of Conduct is
5 an element in evaluating the performance of CONTRACTOR(S) and its employees, agents and
6 subcontractors.

7 Within thirty (30) days of entering into this Agreement, and annually thereafter, all
8 employees, agents and subcontractors providing services under this Agreement shall complete general
9 compliance training and appropriate employees, agents and subcontractors shall complete
10 documentation and billing or billing/reimbursement training. All new employees, agents and
11 subcontractors shall attend the appropriate training within thirty (30) days of hire. Each individual who
12 is required to attend training shall certify in writing that he or she has received the required training.
13 The certification shall specify the type of training received and the date received. The certification shall
14 be provided to the COUNTY's Compliance Officer at 3133 N. Millbrook Ave, Fresno, California 93703.
15 CONTRACTOR(S) agrees to reimburse COUNTY for the entire cost of any penalty imposed upon
16 COUNTY by the Federal Government as a result of CONTRACTOR(S)' violation of the terms of this
17 Agreement.

18 **30. ASSURANCES**

19 In entering into this Agreement, CONTRACTOR(S) certifies that it is not currently
20 excluded, suspended, debarred, or otherwise ineligible to participate in the Federal Health Care
21 Programs: that it has not been convicted of a criminal offense related to the provision of health care
22 items or services; nor has it been reinstated to participation in the Federal Health Care Programs after
23 a period of exclusion, suspension, debarment, or ineligibility. If COUNTY learns, subsequent to
24 entering into a contract, that CONTRACTOR(S) is ineligible on these grounds, COUNTY will remove
25 CONTRACTOR(S) from responsibility for, or involvement with, COUNTY's business operations related
26 to the Federal Health Care Programs and shall remove such CONTRACTOR(S) from any position in
27 which CONTRACTOR(S)' compensation, or the items or services rendered, ordered or prescribed by
28 CONTRACTOR(S) may be paid in whole or part, directly or indirectly, by Federal Health Care

1 Programs or otherwise with Federal Funds at least until such time as CONTRACTOR(S) is reinstated
2 into participation in the Federal Health Care Programs.

3 A. If COUNTY has notice that CONTRACTOR(S) has been charged with a criminal
4 offense related to any Federal Health Care Program, or is proposed for exclusion during the term of any
5 contract, CONTRACTOR(S) and COUNTY shall take all appropriate actions to ensure the accuracy of
6 any claims submitted to any Federal Health Care Program. At its discretion given such circumstances,
7 COUNTY may request that CONTRACTOR(S) cease providing services until resolution of the charges
8 or the proposed exclusion.

9 B. CONTRACTOR(S) agrees that all potential new employees of
10 CONTRACTOR(S) or subcontractors of CONTRACTOR(S) who, in each case, are expected to perform
11 professional services under this Agreement, will be queried as to whether: (1) they are now or ever
12 have been excluded, suspended, debarred, or otherwise ineligible to participate in the Federal Health
13 Care Programs; (2) they have been convicted of a criminal offense related to the provision of health
14 care items or services; and or (3) they have been reinstated to participation in the Federal Health Care
15 Programs after a period of exclusion, suspension, debarment, or ineligibility.

16 1) In the event the potential employee or subcontractor informs
17 CONTRACTOR(S) that he or she is excluded, suspended, debarred or otherwise ineligible, or has been
18 convicted of a criminal offense relating to the provision of health care services, and CONTRACTOR(S)
19 hires or engages such potential employee or subcontractor, CONTRACTOR(S) will ensure that said
20 employee or subcontractor does no work, either directly or indirectly relating to services provided to
21 COUNTY.

22 2) Notwithstanding the above, COUNTY at its discretion may terminate this
23 Agreement in accordance with Section Two (2) of this Agreement, or require adequate assurance (as
24 defined by COUNTY) that no excluded, suspended or otherwise ineligible employee or subcontractor of
25 CONTRACTOR(S) will perform work, either directly or indirectly, relating to services provided to
26 COUNTY. Such demand for adequate assurance shall be effective upon a timeframe to be determined
27 by COUNTY to protect the interests of COUNTY consumers.

28 C. CONTRACTOR(S) shall verify (by asking the applicable employees and

subcontractors) that all current employees and existing subcontractors who, in each case, are expected to perform professional services under this Agreement (1) are not currently excluded, suspended, debarred, or otherwise ineligible to participate in the Federal Health Care Programs; (2) have not been convicted of a criminal offense related to the provision of health care items or services; and (3) have not been reinstated to participation in the Federal Health Care Program after a period of exclusion, suspension, debarment, or ineligibility. In the event any existing employee or subcontractor informs CONTRACTOR(S) that he or she is excluded, suspended, debarred or otherwise ineligible to participate in the Federal Health Care Programs, or has been convicted of a criminal offense relating to the provision of health care services, CONTRACTOR(S) will ensure that said employee or subcontractor does no work, either direct or indirect, relating to services provided to COUNTY.

1) CONTRACTOR(S) agrees to notify COUNTY immediately during the term of this Agreement whenever CONTRACTOR(S) learns that an employee or subcontractor who, in each case, is providing professional services under this Agreement is excluded, suspended, debarred or otherwise ineligible to participate in the Federal Health Care Programs, or is convicted of a criminal offense relating to the provision of health care services.

2) Notwithstanding the above, COUNTY at its discretion may terminate this Agreement in accordance with Section Three (3) of this Agreement, or require adequate assurance (as defined by COUNTY) that no excluded, suspended or otherwise ineligible employee or subcontractor of CONTRACTOR(S) will perform work, either directly or indirectly, relating to services provided to COUNTY. Such demand for adequate assurance shall be effective upon a timeframe to be determined by COUNTY to protect the interests of COUNTY clients.

D. CONTRACTOR(S) agrees to cooperate fully with any reasonable requests for information from COUNTY, which may be necessary to complete any internal or external audits relating to CONTRACTOR(S)'s compliance with the provisions of this Section.

E. CONTRACTOR(S) agrees to reimburse COUNTY for the entire cost of any penalty imposed upon COUNTY by the Federal Government as a result of CONTRACTOR(S)' violation of CONTRACTOR(S)' obligations as described in this Section.

31. PUBLICITY PROHIBITION

None of the funds, materials, property or services provided directly or indirectly under this Agreement shall be used for CONTRACTOR(S)' advertising, fundraising, or publicity (*i.e.*, purchasing of tickets/tables, silent auction donations, etc.) for the purpose of self-promotion. Notwithstanding the above, publicity of the services described in Section One (1) of this Agreement shall be allowed as necessary to raise public awareness about the availability of such specific services when approved in advance by COUNTY's DBH Director, or his or her designee, and at a cost to be provided in Exhibits E-1 *et seq.* for such items as written/printed materials, the use of media (*i.e.*, radio, television, newspapers) and any other related expense(s).

32. COMPLAINTS

CONTRACTOR(S) shall log complaints and the disposition of all complaints from a client or a client's family. CONTRACTOR(S) shall provide a copy of the detailed complaint log entries concerning COUNTY-sponsored clients to COUNTY at monthly intervals by the tenth (10th) day of the following month, in a format that is mutually agreed upon. In addition, CONTRACTOR(S) shall provide details and attach documentation of each complaint with the log. CONTRACTOR(S) shall post signs informing clients of their right to file a complaint or grievance. CONTRACTOR(S) shall notify COUNTY of all incidents reportable to State licensing bodies that affect COUNTY clients within twenty-four (24) hours of receipt of a complaint.

Within ten (10) days after each incident or complaint affecting COUNTY-sponsored clients, CONTRACTOR(S) shall provide COUNTY with information relevant to the complaint, investigative details of the complaint, the complaint and CONTRACTOR(S)' disposition of, or corrective action taken to resolve the complaint. In addition, CONTRACTOR(S) shall inform every client of their rights as set forth in Exhibit K and Exhibit L regarding grievances and incident reporting.

33. CHILD ABUSE REPORTING ACT

CONTRACTOR(S) shall establish a procedure acceptable to the COUNTY's DBH Director, or his or her designee, to ensure that all of the CONTRACTOR(S)' employees, consultants, subcontractors or agents described in the Child Abuse Reporting Act, section 1116 *et seq.* of the Penal Code, and performing services under this Agreement shall report all known or suspected child abuse or

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neglect to a child protective agency as defined in Penal Code section 11165.9. This procedure shall include:

A. A requirement that all CONTRACTOR(S)' employees, consultants, subcontractors or agents performing services shall sign a statement that he or she knows of and will comply with the reporting requirements as defined in Penal Code section 11166(a), identified in Exhibit O, attached hereto and incorporated herein by reference and made part of this Agreement.

B. Establishing procedures to ensure reporting even when employees, consultants, subcontractors, or agents who are not required to report child abuse under Penal Code section 11166(a), gain knowledge of or reasonably suspect that a child has been a victim of abuse or neglect.

34. DISCLOSURE OF OWNERSHIP AND/OR CONTROL INTEREST
INFORMATION

This provision is only applicable if CONTRACTOR(S) is a disclosing entity, fiscal agent, or managed care entity as defined in Code of Federal Regulations (C.F.R), Title 42 § 455.101 455.104, and 455.106(a)(1),(2).

In accordance with C.F.R., Title 42 §§ 455.101, 455.104, 455.105 and 455.106(a)(1),(2), the following information must be disclosed by CONTRACTOR(S) by completing Exhibit P, "Disclosure of Ownership and Control Interest Statement", attached hereto and by this reference incorporated herein and made part of this Agreement. CONTRACTOR(S) shall submit this form to COUNTY's DBH within thirty (30) days of the effective date of this Agreement. Additionally, CONTRACTOR(S) shall report any changes to this information within thirty-five (35) days of occurrence by completing Exhibit P. CONTRACTOR(S) is required to submit a set of fingerprints for any person with a five (5) percent or greater direct or indirect ownership interest in CONTRACTOR(S). COUNTY may terminate this Agreement where any person with a five (5) percent or greater direct or indirect ownership interest in the CONTRACTOR(S) did not submit timely and accurate information and cooperate with any screening method required in CFR, Title 42, Section 455.416. Submissions shall be scanned portable document format (pdf) copies and are to be sent via email to DBHAdministration@fresnocountyca.gov, Attention: Contracts Administration. COUNTY may deny enrollment or terminate this Agreement where any person with a five (5) percent or greater direct or indirect ownership interest in CONTRACTOR(S)

has been convicted of a criminal offense related to that person's involvement with the Medicare, Medicaid, or Title XXI program in the last ten (10) years.

35. DISCLOSURE – CRIMINAL HISTORY AND CIVIL ACTIONS

CONTRACTOR(S) is required to disclose if any of the following conditions apply to them, their owners, officers, corporate managers and partners (hereinafter collectively referred to as "CONTRACTOR(S)"):

A. Within the three (3) year period preceding the Agreement award, they have been convicted of, or had a civil judgment rendered against them for:

- 1) Fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction;
- 2) Violation of a federal or state antitrust statute;
- 3) Embezzlement, theft, forgery, bribery, falsification, or destruction of records; or
- 4) False statements or receipt of stolen property.

B. Within a three (3) year period preceding their Agreement award, they have had a public transaction (federal, state, or local) terminated for cause or default.

Disclosure of the above information will not automatically eliminate CONTRACTOR(S) from further business consideration. The information will be considered as part of the determination of whether to continue and/or renew the Agreement and any additional information or explanation that a CONTRACTOR(S) elects to submit with the disclosed information will be considered. If it is later determined that the CONTRACTOR(S) failed to disclose required information, any contract awarded to such CONTRACTOR(S) may be immediately voided and terminated for material failure to comply with the terms and conditions of the award.

CONTRACTOR(S) must sign a "Certification Regarding Debarment, Suspension, and Other Responsibility Matters- Primary Covered Transactions" in the form set forth in Exhibit Q, attached hereto and by this reference incorporated herein and made part of this Agreement. Additionally, CONTRACTOR(S) must immediately advise the COUNTY in writing if, during the term of this

1 Agreement: (1) CONTRACTOR(S) becomes suspended, debarred, excluded or ineligible for
2 participation in federal or state funded programs or from receiving Federal funds as listed in the
3 excluded parties' list system (<http://www.epls.gov>); or (2) any of the above listed conditions become
4 applicable to CONTRACTOR(S). CONTRACTOR(S) shall indemnify, defend and hold the COUNTY
5 harmless for any loss or damage resulting from a conviction, debarment, exclusion, ineligibility or other
6 matter listed in the signed Certification Regarding Debarment, Suspension, and Other Responsibility
7 Matters.

8 **36. DISCLOSURE OF SELF-DEALING TRANSACTIONS**

9 This provision is only applicable if the CONTRACTOR(S) is operating as a corporation (a
10 for-profit or non-profit corporation) or if during the term of this Agreement, the CONTRACTOR(S)
11 changes its status to operate as a corporation.

12 Members of the CONTRACTOR(S)' Board of Directors shall disclose any self-dealing
13 transactions that they are a party to while CONTRACTOR(S) is providing goods or performing services
14 under this Agreement. A self-dealing transaction shall mean a transaction to which the
15 CONTRACTOR(S) is a party and in which one or more of its directors has a material financial interest.
16 Members of the Board of Directors shall disclose any self-dealing transactions that they are a party to
17 by completing and signing a "Self-Dealing Transaction Disclosure Form", attached hereto as Exhibit R
18 and incorporated herein by reference and made part of this Agreement, and submitting it to the
19 COUNTY prior to commencing with the self-dealing transaction or immediately thereafter.

20 **37. AUDITS AND INSPECTIONS**

21 CONTRACTOR(S) shall at any time during business hours, and as often as the
22 COUNTY may deem necessary, make available to the COUNTY for examination all of its records and
23 data with respect to the matters covered by this Agreement. CONTRACTOR(S) shall, upon request by
24 the COUNTY, permit the COUNTY to audit and inspect all such records and data necessary to ensure
25 CONTRACTOR(S)' compliance with the terms of this Agreement.

26 If this Agreement exceeds Ten Thousand and No/100 Dollars (\$10,000.00),
27 CONTRACTOR(S) shall be subject to the examination and audit of the State Auditor General for a
28 period of three (3) years after final payment under contract (California Government Code section

8546.7).

38. NOTICES

The persons having authority to give and receive notices under this Agreement and their addresses include the following:

COUNTY

Director, Fresno County
Department of Behavioral Health
3133 N. Millbrook Ave.
Fresno, CA 93703

CONTRACTOR(S)

SEE EXHIBIT A

All notices between the COUNTY and CONTRACTOR(S) provided for or permitted under this Agreement must be in writing and delivered either by personal service, by first-class United States mail, by an overnight commercial courier service, or by telephonic facsimile transmission. A notice delivered by personal service is effective upon service to the recipient. A notice delivered by first-class United States mail is effective three (3) COUNTY business days after deposit in the United States mail, postage prepaid, addressed to the recipient. A notice delivered by an overnight commercial courier service is effective one (1) COUNTY business day after deposit with the overnight commercial courier service, delivery fees prepaid, with delivery instructions given for next day delivery, addressed to the recipient. A notice delivered by telephonic facsimile is effective when transmission to the recipient is completed (but, if such transmission is completed outside of COUNTY business hours, then such delivery shall be deemed to be effective at the next beginning of a COUNTY business day), provided that the sender maintains a machine record of the completed transmission. For all claims arising out of or related to this Agreement, nothing in this Section establishes, waives, or modifies any claims presentation requirements or procedures provided by law, including but not limited to the Government Claims Act (Division 3.6 of Title 1 of the Government Code, beginning with Section 810).

39. SEVERABILITY

If any non-material term, provision, covenant, or condition of this Agreement is held by a court of competent jurisdiction to be invalid, void or unenforceable, the remainder of the provisions shall remain in full force and effect, and shall in no way be affected, impaired or invalidated.

40. SEPARATE AGREEMENT

1 It is mutually understood by the parties that this Agreement does not, in any way, create
2 a joint venture among the individual CONTRACTORS. By execution of this Agreement,
3 CONTRACTOR(S) understand that a separate Agreement is formed between each individual
4 CONTRACTOR and COUNTY.

5 **41. GOVERNING LAW**

6 The parties agree that for the purpose of venue, performance under this Agreement is in
7 Fresno County, California.

8 The rights and obligations of the parties and all interpretation and performance of this
9 Agreement shall be governed in all respects by the laws of the State of California.

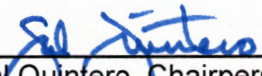
10 **42. ENTIRE AGREEMENT**

11 This Agreement, including all Exhibits (listed below), COUNTY's Revised RFP No. 18-
12 043, and CONTRACTOR(S)' Response to COUNTY's Revised RFP No. 18-043 constitutes the entire
13 agreement between CONTRACTOR(S) and COUNTY with respect to the subject matter hereof and
14 supersedes all previous agreement negotiations, proposals, commitments, writings, advertisements,
15 publications, and understandings of any nature whatsoever unless expressly included in this
16 Agreement.

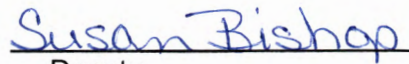
17	Exhibit A	List of Contractors
18	Exhibit B	Cultural Specific Services Program Overview
19	Exhibit B-1, <i>et seq.</i>	Scope of Work
20	Exhibit C	FSP Service Delivery Model
21	Exhibit D	DBH Guiding Principles of Care Delivery
22	Exhibit E-1, <i>et seq.</i>	Budgets and Budget Narratives
23	Exhibit F	Electronic Health Records Software Charges
24	Exhibit G	Fresno County Mental Health Compliance Plan and Code of Conduct
25	Exhibit H	Documentation Standards for Client Records
26	Exhibit I	State Mental Health Requirements
27	Exhibit J	Medi-Cal Organizational Provider Standards
28	Exhibit K	Fresno County MHP Grievances and Appeals Process
	Exhibit L	Protocol for Completion of Incident Report
	Exhibit M	Fixed Asset and Sensitive Item Log
	Exhibit N	Cultural Competence Form
	Exhibit O	Notice of Child Abuse Report
	Exhibit P	Disclosure of Ownership and Control Interest Statement
	Exhibit Q	Certification Regarding Debarment, Suspension, and Other Responsibility Matters – Primary Covered Transactions
	Exhibit R	Self-Dealing Transaction Disclosure Form

1 IN WITNESS WHEREOF, the parties hereto have executed this Agreement as of the day and
2 year first hereinabove written.

3
4 **COUNTY OF FRESNO**

5
6
7 
8 Sal Quintero, Chairperson of the Board of
Supervisors of the County of Fresno

9
10 **ATTEST:**
11 Bernice E. Seidel
12 Clerk of the Board of Supervisors
County of Fresno, State of California

13
14 By: 
Deputy

15
16
17
18
19
20 **PLEASE SEE ADDITIONAL
SIGNATURE PAGES ATTACHED**

1 **CONTRACTOR**

2 THE FRESNO CENTER

3
4 
(Authorized Signature)

5 Gina Joe Lee
6 Print Name

7 Board President
8 Title (Chairman of Board, or President, or
9 CEO)

10 
(Authorized Signature)

11 Jensen Vang
12 Print Name

13 Finance Director
14 Title (Secretary of Corporation, or Chief
15 Financial Officer/Treasurer, or any
16 Assistant Secretary or Treasurer)

17 **MAILING ADDRESS:**

18 The Fresno Center
19 4879 E. Kings Canyon Road
20 Fresno, CA 93727
21 Phone No.: (559) 255-8395

22 **FOR ACCOUNTING USE ONLY:**

23 Fund/Subclass: 0001/10000
24 Organization: 56304524 (Start-Up: \$419,004; ICM/OP: \$7,152,450)
25 56304540 (FSP: \$1,620,884)
26 Account/Program: 7295/0
27
28

CULTURAL SPECIFIC SERVICES

LIST OF CONTRACTOR(S)

1. The Fresno Center

Business Type: Private, non-profit, 501 (c)(3) corporation
Business Address: 4879 E. Kings Canyon Road
Fresno, CA 93727
Contact: Pao Yang, Executive Director
Service Address: 4879 E. Kings Canyon Road
Fresno, CA 93727
Target Population: Southeast Asian Children/Youth, Adult and Older Adult
Level of Care: Outpatient/Intensive Case Management and Full Service
Partnership

2. Additional Contractor(s)

**MENTAL HEALTH SERVICES ACT COMMUNITY SERVICES AND SUPPORTS
CULTURAL SPECIFIC SERVICES
PROGRAM OVERVIEW**

CONTRACT SERVICES: Cultural Specific Services

CONTRACT TERM: October 1, 2018 - June 30, 2021
with two (2) possible twelve-month extensions

CONTRACTOR(S): See Exhibit A

CONTRACT MAXIMUM: \$2,144,626 per fiscal year (FY)
\$10,723,130 for full 5-year possible contract term

CONTRACTOR AWARDS: \$2,144,626 per FY – all CONTRACTOR(S) combined
See Exhibits B-1 *et seq.* for individual CONTRACTOR Awards

I. BACKGROUND

COUNTY, on behalf of the Department of Behavioral Health (DBH), Mental Health Services Act (MHSA), Community Services and Supports (CSS), has developed a Master Agreement for Cultural Specific Services that are a unique blend of traditional mental health services and non-traditional culture based treatments and supports in an integrated model for seriously emotionally disturbed (SED) children/youth and seriously mentally ill (SMI) adult persons served in Fresno County's culturally diverse, underserved and unserved populations.

Program Intent and Goals - Based upon the MHSA community/stakeholder input process resulted in the priority to enhance cultural services and the integration with primary care service centers for the community. This Agreement seeks to expand culturally competent and linguistically accessible community-based specialty mental health services provided by licensed and unlicensed/waivered mental health professionals to SED/SMI persons served and their families. Acute shortage of licensed mental health professionals, who are of culturally/ethnic/linguistically-specific descent, has been identified as a barrier to linguistic access and culturally competent services in an individual/family driven service model that promotes wellness and recovery. Culturally specific specialty mental health programs will secure and maintain culturally and linguistically competent mental health staff for intended populations through development and establishment of clinical training sites.

The Affordable Care Act significantly increased access to Medi-Cal for many community members and services for individuals with mild to moderate impairments by making services now readily available through managed care health plans. However, there remains a great need for services to individuals with serious mental illness across many unique cultural populations.

The intention of this Agreement is for organizations with specific and unique experience in working with cultural/ethnic/linguistic populations to develop comprehensive specialty mental health programs for the SED/SMI individuals and their families in those populations. This Cultural Specific Services Agreement is expected to increase the number of cultures served, breadth of service, number of persons served, and the levels of care provided through programs that are a unique blend of traditional mental health services and non-traditional culture based treatments and supports. This integrated model shall service more than one

level of care and provide holistic behavioral health care immersed in individual culture. SED/SMI persons served who prefer to receive care within the context of their identified culture shall be fully immersed in a comprehensive program.

II. TARGET POPULATION

Priority target populations identified to receive cultural/ethnic/linguistic specialty mental health services include, but may not be limited to: African-Americans; American Indian/Alaska Native; Asian Pacific Islanders; Lesbian, Gay, Bisexual, Transgender and Questioning (LGBTQ); Punjabi; Southeast Asians; and refugee populations. Cultural Specific Services, while targeting these specific unserved and underserved groups, should be able to link all age groups, populations, and cultures to appropriate services as needed. There should be no exclusion criteria.

Program services will target adults and older adults who are SMI and may include a family system approach that also targets children and adolescents who are SED. CONTRACTOR(S) shall specify target age ranges to be served, including SMI adults, SMI older adults, SED youth and/or the SED TAY population. At a minimum, services to SMI adults and older adults must be provided. Service populations are identified for each CONTRACTOR in Exhibit A and Exhibits B-1 *et seq.*

Other characteristics of the target population will depend on the levels of care to be provided by each individual CONTRACTOR. CONTRACTOR(S) shall identify the levels of care to be provided for their specific intended population, which may include outpatient (OP), intensive case management (ICM) and/or full service partnership (FSP) services. Individuals who fall under the FSP criteria include those who are in danger of homelessness, hospitalizations, out of home placements, incarcerations or emergency room visits, are in need of high level of services and potentially provide services on a 24-hour, seven day a week schedule.

Referrals for the Cultural Specific Services program will come from COUNTY-operated and contracted programs, other community organizations, and individual self-referrals. DBH persons served will be prioritized; CONTRACTOR(S) will be responsible for contacting DBH first whenever an opening becomes available. Enrollment into the FSP component will be approved through DBH Urgent Care and Wellness Center.

III. LOCATION OF SERVICES

Services are to be delivered wherever the intended target population resides, which may be Fresno/Clovis metro areas, County rural areas, or both. Network adequacy standards for time and distance under the [Centers for Medicare and Medicaid Services \(CMS\) Medicaid Managed Care Final Rule](#) must be applied. See also [Mental Health Substance Use Disorder Services \(MHSUDS\) Info Notice No. 18-011](#). CONTRACTOR(S) shall provide a plan for transportation or access to services for rural areas, if not the place of residence for the majority of the intended population.

Services can be delivered in the home, community, school or other community-based settings as determined by collaborating with all relevant parties. Telehealth, mobile services, and co-location in natural supports and gathering places for the intended population are additional options to increase the frequency of individuals obtaining needed services, as some persons served and families are reluctant to seek services from traditional mental health settings. Satellite sites in rural communities are also strongly recommended.

IV. DESCRIPTION OF SERVICES

A. Culturally/Ethnically/Linguistically Competent Specialty Mental Health Services

CONTRACTOR(S) shall deliver a comprehensive specialty mental health program for the SED/SMI individuals in their identified target population. CONTRACTOR(S) will detail any non-traditional culture based treatments and supports to be provided. Traditional mental health services include but are not limited to: outpatient specialty mental health services, intensive case management, crisis outreach services, medication evaluation, peer support, and supported independent permanent housing. CONTRACTOR(S) will identify the different levels of care for which they will provide services, with a minimum of outpatient and intensive case management. CONTRACTOR(S) will state a minimum caseload per level of care service.

- 1. OP services** are provided to persons served who are Medi-Cal eligible and who meet the State Department of Health Care Services' (DHCS) medical necessity criteria, and with services designated and provided regardless of payer source. OP services may include assessment, case management, individual, group and family therapies, collateral services, plan development, and rehabilitation services. For individuals who have mild to moderate impairment or need medications only and do not require specialty mental health services, the CONTRACTOR(S) is expected to work with other programs such as DBH Urgent Care and Wellness Center, managed care health plans or other like agencies to develop a collaborative agreement for the provision or transition of needed services.
 - a) Ensure CONTRACTOR(S) staff provides appropriate age, culture, gender and language services and accommodations for physical disability(ies) to persons served.
 - b) Make appropriate referrals and linkages to addiction services that are beyond that of the Cultural Specific Services program for individuals with coexisting alcohol, tobacco and drug abuse and other addictive symptoms.
 - c) Provide support to the individual's family and other members of the individual's social network to help them manage the symptoms and illness of the individual and reduce the level of family and social stress associated with the illness.
 - d) Coordinate services with other community mental health and non-mental health providers, as well as other medical professionals. Methods for service coordination and communication between CONTRACTOR(S) and other service providers serving the same persons served shall be developed and implemented consistent with Fresno County confidentiality rules.
 - e) Transport persons served to and from service site(s), as needed.
- 2. ICM services** include case management and community based crisis intervention services available eight (8) hours a day, five (5) days a week, and a minimum of one (1) person-to-person contact a week with each enrolled individual. ICM services include assisting persons served with accessing all entitlements or benefits for which they are eligible (i.e., Medi-Cal, SSI, Section 8 vouchers, etc.), development of family support and involvement whenever possible, individual referral to supported education and employment opportunities, transportation service when it is critical to initially

access a support service or gain entitlements or benefits, medication evaluation and provision of peer support services.

a) Provide the following:

- Assist persons served with accessing all entitlements or benefits for which they are eligible (i.e., Medi-Cal, SSI, Section 8 vouchers etc.).
- Develop family support and involvement whenever possible.
- Refer persons served to supported education and employment opportunities.
- Provide transportation service when it is critical to access a support service or gain entitlements or benefits.

b) Provide Medication Evaluation either in person or via tele-psychiatry.

c) Assist persons served to locate appropriate housing in the community.

d) Refer or provide peer support activities.

e) Provide services for co-occurring substance use disorders.

- Identify alcohol, tobacco and drug abuse effects and patterns.
- Education regarding the interaction of alcohol, tobacco and drug use with psychiatric symptoms and medications.
- Developing motivation for decreasing alcohol, tobacco and drug use.
- Achieving periods of abstinence and stability.
- Use of clinical interventions and peer support recovery groups and activities.
- Assisting persons served to achieve an alcohol, tobacco and drug free life style.
- Education regarding relapse prevention.

f) Develop individual self-directed plan of care.

g) Transport persons served to and from service site, as needed.

3. FSP services (see Exhibit C – FSP Service Delivery Model) are provided to persons served at any given point in time that have SED/SMI and who have had recent admission to the COUNTY's crisis intervention services and/or acute inpatient services, or have been incarcerated. CONTRACTOR(S) will work with COUNTY's DBH to have their FSP program registered with DHCS and the Data Collection and Reporting (DCR) system. The FSP program includes case management and crisis outreach services available 24-hours a day, seven (7) days a week both telephonically and in person, and a minimum of three (3) person-to-person contacts a week with each individual. The staffing ratio is not more than one (1) staff to 15 persons served.

a) Coordinate with law enforcement and courts services, as needed.

- b) Be available to provide the following services, including but not limited to:
- Personal service coordination and supportive counseling.
 - Ongoing assessment of the individual's mental illness symptoms and response to treatment.
 - Education of the individual regarding his/her mental illness and the effects (including side effects) of prescribed medications.
 - Symptom management efforts directed to helping the individual identify the symptoms and their occurrence patterns, and development of methods (internal, behavioral, adaptive) to lessen their effects.
 - Provision, both on planned and on an "as needed" basis, of such psychological support as is necessary to help persons served accomplish their personal goals and cope with the stresses of day-to-day living.
- c) Be available to provide crisis assessment and intervention 24 hours per day, seven (7) days per week throughout the year, including telephone and face-to-face contact as needed. The following crisis response measures shall also be followed:
- Response to crisis shall be rapid and flexible.
 - When crisis housing is necessary for short-term care and inpatient treatment (either voluntary or involuntary), the staff shall collaborate with the treatment staff in such facilities. Support shall be provided to the maximum extent possible, including accompanying the individual to the facility, remaining with the individual during assessment, and beginning the process of planning with the individual for discharge to the community as soon as possible.
- d) Provide services in the areas of medication prescription, administration, monitoring, and documentation.
- The psychiatrist shall assess each individual's mental illness symptoms and behavior and prescribe appropriate medication, regularly review and document symptoms as well as the individual's response to the prescribed medications, educate the individual and family members, and monitor, treat and document any medication side effects.
 - The nurse shall establish medication policies and procedures which identify processes to administer medications, train other team members, and assess regularly other team members' competency in this area.
 - All FSP team staff shall assess and document individual's mental illness symptoms and behavior in response to medication and shall monitor for medication side effects during the provision of observed self-administration and during ongoing face-to-face contacts.
 - Regarding residents of Residential Care Facilities, the team shall collaborate with staff at these facilities to ensure persons served at these locations are taking prescribed medications and the staff is monitoring their response to the

medication(s). Furthermore, the staff shall review the facility records (after receiving written consent from the individual) and shall regularly collaborate with facility staff about treatment plans, goals, objectives and interventions.

- e) Provide whatever direct assistance is necessary and reasonable to ensure that the individual obtains the basic necessities of daily life, such as food, housing, clothing, medical services, and other financial support.
- f) Ensure that each FSP team member shall have in their possession during regular working hours (and appropriate on-call hours) an adequate amount of financial resources to make emergency purchases of food, shelter, clothing, prescriptions, transportation, or other items for consumers, as needed. The team shall have access to larger flexible funding accounts for assistance with housing deposits, furniture purchases, and other items, with sound accounting practices for recording and monitoring the use of these funds.
- g) Assist the individual with establishing a payee or payee service. The FSP team may utilize individual assistance funds to assist persons served with short-term loans or grants, as necessary. The team shall link persons served to appropriate social services, provide transportation as necessary, and link the individual to appropriate legal advocacy representation.
- h) Provide training, instruction, support and assistance to the individual in developing personal skills, including but not limited to, the ability to:
 - Carry out personal hygiene tasks.
 - Perform household chores, including housekeeping, cooking, laundry and shopping;
 - Develop or improve money management skills;
 - Use community transportation; and
 - Locate, finance and maintain safe, clean and affordable housing.
- i) Develop and support the individual's participation in recreation, social activities, and relationships. Priority shall be given to supporting persons served in establishing positive social relationships in normative community settings. Staff shall assist persons served in establishing positive social relationships and participating in social/recreational activities in the community. Such services shall include, but not be limited to, assisting persons served in:
 - Developing social skills and the skills and other skills needed to develop meaningful personal relationships;
 - Planning appropriate and productive use of leisure time including familiarizing persons served with available social and recreational opportunities;
 - Interacting with landlords, neighbors and others effectively and appropriately;
 - Developing assertiveness and self-esteem; and

- Using existing self-help centers, groups, spiritual, and recreational groups to combat isolation and withdrawal experienced by many persons coping with severe mental illness.
- j) Provide alcohol, tobacco and drug abuse services for co-occurring persons served, as clinically appropriate and in accordance with harm reduction principles. This will include, but is not limited to individual and group interventions to assist persons served in:
- Identifying alcohol, tobacco, and drug abuse effects and patterns;
 - Recognizing interactive effects of alcohol, tobacco, and drug use, psychiatric symptoms and psychotropic medications;
 - Developing coping skills and alternatives to minimize alcohol, tobacco and drug use;
 - Achieving periods of abstinence and/or decreased risk behaviors and increased stability;
 - Attending appropriate recovery or self-help meetings: and
 - Achieving an alcohol and drug free lifestyle, as desired.
- k) Act to minimize the individual's involvement in the criminal justice system, with services to include, but not be limited to;
- Helping the individual identify precipitants to individual's criminal involvement;
 - Providing necessary treatment, support and education to help eliminate unlawful activities or criminal involvement that may be a consequence of the individual's mental illness; and
 - Collaborating with police, court personnel, and jail/prison officials to ensure appropriate collaboration and clinical support through the legal processes.
- l) Assist the individual, family and other members of the individual's social network to relate in a positive and supportive manner through such means as:
- Education about the individual's severe mental illness and their role in the therapeutic process and treatment services and supports;
 - Supportive counseling;
 - Intervention to resolve conflict;
 - Referral, as appropriate, of the family to therapy, self-help and other family support services; and
- m) Coordinate with other community mental health and non-mental health providers, as well as other medical professionals. Staff shall provide the following functions for all persons served:

- Development of formal and informal affiliations with other human service providers including, mental health, physical health care, addiction treatment providers, and inpatient units;
 - Involvement of other pertinent agencies, the individual's family, and members of the individual's social network in the coordination of the assessment, and in the development, implementation and revision of service plans;
 - Advocacy and assistance to persons served to obtain needed benefits and services, such as supplemental security income, general relief, housing subsidies, food stamps, medical assistance, and legal services;
 - Coordination of meetings of the individual's service providers in the community;
 - Maintenance of ongoing communication with all other agencies serving the individual, including hospitals, primary care physicians, rehabilitation services and housing providers as required;
 - Maintenance of working relationships with other community services, such as education, law enforcement and social services;
 - Maintenance of the clinical treatment relationship with the individual on a continuing basis whether the individual is in the hospital, in the community, involved with other agencies or the criminal justice system; and
 - Methods for service coordination and communication between the team and other service providers serving the same persons served shall be developed and implemented consistent with Fresno County confidentiality rules.
- n) Monitor service outcomes to determine if the individual has meaningful use of their time, stays in school or maintains employment, has reduced numbers of hospitalizations, incarcerations, and periods of homelessness. DBH will use State-identified criteria for measuring these outcomes. The treatment team will be monitored to ensure appropriate service delivery and adherence to MHSA philosophies.
- o) Provide comprehensive services, including intensive mental health treatment, rehabilitation, and case management with the goal of increasing adaptive functioning in the community and preventing unnecessary re-admissions to Institutes of Mental Disease (IMD), acute inpatient facilities, or other higher levels of care.
- p) Employment and Education - FSP program will assist the individual in accessing and participating in the employment and education programs offered in the community, as appropriate. In order to facilitate individual participation in community education and employment programs FSP shall include, but is not limited to:
- Collaboration with and education of community providers as it relates to individual's mental illness, abilities, levels of functioning, educational and

employment interest, and potential effects of the individual's mental health symptoms on participation, in education and work;

- Encouragement and individual rehabilitation related to the integration, practicing, follow through and problem solving as it relates to continued education and employment
 - Individual supportive counseling and education to assist the individual, his/her family, and support system in identifying, managing, and coping with the symptoms of mental illness that may interfere with his/her work or education experience;
 - On-the-job or work-related crisis intervention;
 - Crisis intervention in the educational setting;
 - Work/education-related supportive services, such as assistance with grooming and personal hygiene, securing appropriate clothing, wake-up calls, and transportation; and
 - The team staff shall also link with the supportive services for additional and ongoing support related to education and employment.
- q) Housing - The FSP team will empower persons served to take an active role in the recovery process. The FSP team will provide housing options and maintain persons served in maintaining a stable residence by providing needed services, accessing resources, and encouraging persons served to be independent, productive and responsible.
- The team shall provide whatever direct assistance is necessary to ensure that the individual obtains the basic necessities of daily life, including but not limited to:
 - o Safe, clean, affordable housing;
 - o Food and clothing;
 - o Medical and dental services; and
 - o Securing appropriate financial support, which may include Supplemental Security Income (SSI), Social Security Disability Insurance (SSDI), General Relief (GR), and money management or payee services.
 - CONTRACTOR(S) shall ensure that team members have rapid access to flexible spending funds *for* items such as security deposits, furniture, and/or other items required for independent living.
 - CONTRACTOR(S) will provide housing services, as needed, to ensure that persons served *maintain* their housing. The vendor shall provide:
 - o Training and assistance to individual in locating, securing and inhabiting housing which is appropriate to their level of functioning;

- o Training and instruction, including individual support, problem solving, skill development, modeling and supervision, in the home and in community settings, to teach the individual to manage finances and maintain safe, clean, affordable housing;
 - o Supportive and independent housing for the individual with the goal to have every individual in secure housing that is appropriate for his/her level of ability and need that is sustainable, as soon as reasonable possible;
4. CONTRACTOR(S) will establish a program to provide rent subsidies for independent housing needed while developing a plan for sustainable housing based on individual need and ability.

The concepts of wellness and recovery shall be embedded in Cultural Specific Services through interventions that will focus on the strengths of the individual and family, and work toward the goal of enhancing those strengths and self-sufficiency. All services should be scheduled according to the needs, preferences, ability, and convenience of the individual and family.

CONTRACTOR(S) that include SED youth in the target population shall provide Intensive Care Coordination (ICC) and Intensive Home Based Services (IHBS) when medically necessary. CONTRACTOR(S) shall also utilize the Pediatric Symptom Checklist (PSC-35) and California Child and Adolescent Needs and Strengths (CANS 50) in accordance with Welfare and Institutions Code Section 14707.5.

Reaching Recovery shall be implemented for individuals who are 18 years of age or older for all levels of services including OP, ICM, and FSP. Reaching Recovery provides outcome tools that consist of a set of clinical measures for adult individuals with mental illness that promotes engagement and progression towards recovery. CONTRACTOR(S) will work with COUNTY's DBH to receive training to implement Reaching Recovery as appropriate.

CONTRACTOR(S) shall demonstrate full capability to comply with Electronic Health Record (EHR) standards in accordance with Health Information Portability and Accountability Act (HIPAA) requirements. It is strongly recommended but not required that CONTRACTOR(S) use the COUNTY's EHR (AVATAR) as their EHR. Should CONTRACTOR(S) choose to use their own established EHR, CONTRACTOR(S) shall make accommodations to ensure secure transfer of data from the individual CONTRACTOR to the COUNTY.

CONTRACTOR(S) shall develop a plan to continually engage targeted populations through outreach and engagement services, distribute literature/informational brochures in appropriate languages, and request feedback as to how access to care could be improved for the intended population. CONTRACTOR(S) shall collaborate with agencies that are recognized and accepted by the target population. CONTRACTOR(S) will collaborate with COUNTY in outreach to target populations as requested. All printed material (flyers, brochures, banners, etc.) and media outreach associated with the program must include the COUNTY's logo or state that the program is funded by the COUNTY, and must be approved by DBH Director or designee prior to use/circulation.

CONTRACTOR(S) shall participate in the DBH Cultural Competency Committee and Mental Health Contracted Providers Meetings, and encouraged to participate in other local planning organizations, initiatives, activities and assessments.

B. Clinical Training Services

In addition to providing specialty mental health services, CONTRACTOR(S) will establish, maintain and further develop clinical training opportunities that will educate and train second-year graduate, post-master, doctoral and/or post-doctoral students in social work, marriage and family therapy, professional clinical counseling, and/or clinical psychology. Supervised clinical experience services must meet Board of Behavioral Sciences (BBS) and/or California Board of Psychology licensure requirements.

CONTRACTOR(S) will enhance community mental health services within priority populations by integrating primary care provider services (physical health care) for the access and provision of culturally competent services that address physical health care issues on an as needed basis. CONTRACTOR(S) shall collaborate with various local colleges and universities to work with students and associates who are representative of the priority populations, and who may ultimately increase the numbers of qualified, culturally competent, licensed, mental health service providers in the Fresno community.

C. Cultural Competency

CONTRACTOR(S) shall place importance on individual-identified values, beliefs and family histories, consider what effects they may or may not have on the individual's recovery, and use that information to guide the persons served' wellness and recovery plans. Treatments and support services will be provided within the most relevant and meaningful cultural, gender-sensitive, and age-appropriate context. Program staff shall have the skills, knowledge and attitudes to meet all of the cultural and linguistic needs of their diverse persons served. When appropriate, the program(s) will also provide intensive supports to families of persons served as a way of meeting the needs of culturally and linguistically diverse communities. In addition, the program(s) will collaborate with diverse communities to explore varying perspectives on mental illness and wellness and recovery.

D. Additional Required Service Approaches

CONTRACTOR(S)' programs, services, and practices must align with DBH's vision, mission, and Guiding Principles of Care Delivery, attached as Exhibit D. DBH's principles of care delivery define and guide a system that strives for excellence in the provision of behavioral health services where the values of wellness, resiliency, and recovery are central to the development of programs, services, and workforce. The principles provide the clinical framework that influences decision-making on all aspects of care delivery including program design and implementation, service delivery, training of the workforce, allocation of resources, and measurement of outcomes. CONTRACTOR(S) must adhere to any and all applicable statutes as stated in MHSUDS Notice 18-011. CONTRACTOR(S) must also use any standardized tools, such as the "Columbia Suicide Severity Risk" assessment tool, as directed by DBH. SSI/SSDI Outreach, Access, and Recovery (SOAR) is recommended as a strategy to increase access to disability income benefit programs administered by the Social Security Administration (SSA) for eligible adults who are experiencing or at risk of homelessness and have SMI, medical impairment, and/or a co-occurring substance use disorder.

CONTRACTOR(S) must be thoroughly familiar with MHSA provisions, including but not limited to State MHSA regulations, policy interpretations, and definitions. The State's MHSA policies and procedures and other informational items may be referenced at the following website (<http://mhsoac.ca.gov/act>). MHSA CSS funds will be used to reach the

unserved/underserved, new persons served, and existing persons served and their family members who receive services through Fresno County DBH and other contracted services.

V. STAFFING

CONTRACTOR(S) staffing plans/patterns must be sufficient to deliver the level of services, as described in each individual CONTRACTOR'S scope of work. A background check on all staff providing direct services must be completed via the DBH Managed Care credentialing process prior to billing for Medi-Cal mental health services. Supervisors and services of the clinical training program must meet BBS and/or California Board of Psychology standards.

CONTRACTOR(S) are encouraged to hire and recruit persons served/family members that have previously received or experienced behavioral health services. Peer support services are required as part of the program design.

An FSP team will include (but not be limited to) the following:

- Classifications:
 - o Team Leader/Program Director
 - o Licensed Mental Health Clinician
 - o Personal Service Coordinator/Case Manager
 - o Peer Support Specialist
 - o Registered Nurse
 - o Psychiatrist
 - o Program Assistant
- Staff-to-individual ratio shall not fall below 1:10 or exceed 1:15 (one Full-Time Equivalent staff person for every ten to fifteen persons served). Psychiatrists, Program Assistants and other indirect staff are not to be included in the ratio.
- The psychiatrist must meet with persons served on a minimum monthly basis and be available during normal business hours and on-call during off-hour periods. This position may be subcontracted out.
- Staff members working directly with persons served will provide outreach outside of the office setting and have the capacity to provide as many contacts as needed with persons served to meet their recovery/resiliency and wellness goals.

VI. HOURS OF OPERATION

Hours of operation must ensure availability to persons served and families as needed and necessary. A minimum of eight (8) hours, five (5) days per week is required. Should persons served/family members require services during non-traditional hours, CONTRACTOR(S) will work to accommodate the persons served/family members in the most appropriate manner. CONTRACTOR(S) are encouraged to provide details of business hours outside of traditional business hours.

If CONTRACTOR(S) provide FSP services, they must provide a plan to detail coverage for 24-hours/day and seven (7) days/week appropriate for the percentage of persons served under FSP services.

VII. AVERAGE INDIVIDUAL LENGTH OF STAY

CONTRACTOR(S) shall describe expected average individual length of stay based on applicable evidence-based, community-based, and/or cultural-based promising or emerging practice for each modality of service level to be provided.

VII. FUNDING

Funding Use – MHSA CSS guidelines stipulated by the DHCS specifically limit how CSS funds may be used. The funding for Cultural Specific Services is to provide for salaries and benefits of staff, training, consumer incentives, planning and operational costs, lease space, technology, transportation needs, and other acceptable expenses that carry out the intent of this project. CONTRACTOR(S)' individual funding allocations are identified and detailed in Exhibits E-1 *et seq.*

Services will be funded with MHSA CSS funds in the amount of \$2,144,626 annually. This amount is intended to fund multiple Cultural Specific Services programs via this Agreement. Any Medi-Cal Federal Financial Participation (FFP) estimated revenue will be in addition to the amount of MHSA CSS funds indicated.

CONTRACTOR(S) shall incorporate costs for an electronic health record system and staff training into their program budgets. Clinical training services are not to include expenses such as board license or exam fees. If FSP services are provided, CONTRACTOR(S) shall include estimated revenues from individual fees in the budget.

VIII. PROGRAM OUTCOMES/PERFORMANCE OUTCOME MEASURES

Services and Performance Measures - Under the provision of the MHSA CSS component, COUNTY's DBH receives funding to expand, develop and create successful CSS programs for children, transitional aged youth, adults, and older adults in a culturally, ethically, and linguistically competent approach for underserved and unserved populations. Culturally specific approaches by CONTRACTOR(S) to these services, and their performance measures and outcome goals are identified and detailed in Exhibits B-1 *et seq.*

All CONTRACTOR(S) shall comply with all project monitoring and compliance protocols, procedures, data collection methods, and reporting requirements requested by the COUNTY. CONTRACTOR(S) shall use performance outcome measures for evaluating program and system effectiveness to ensure services and service delivery strategies are positively impacting the service population.

In addition, these measures shall be used to ensure Cultural Specific Services are in alignment with MHSA guiding principles which are inclusive of: an integrated service experience; community collaboration; cultural competence; individual/family driven service; and wellness, resilience, and recovery focused services.

Goals of the program include less utilization of more costly crisis services, and minimization or avoidance of more severe outcomes such as substance use disorder, hospitalization or incarceration.

Performance outcome measures shall be tracked on an ongoing basis and used to update the COUNTY monthly (by the 10th of the month following the report period). In addition, performance outcome measures are reported to the COUNTY annually in accumulative reports for overall program and contract evaluation. Forms and tools used to gather and report data reflecting services provided, populations served, and impact of those services are to be developed by the COUNTY and CONTRACTOR(S). CONTRACTOR(S) will work closely with the COUNTY to analyze the data and make necessary adjustments to service delivery and reporting requirements before the start of each new fiscal year.

CONTRACTOR(S)' specific performance measures and outcome goals are identified and detailed in Exhibit B-1 *et seq.* Measurable outcomes may be reviewed for input and approval by a designated DBH work group upon contract execution and adjusted as needed each new fiscal year. The purpose of this review process is to ensure a comprehensive system wide approach to the evaluation of programs through an effective outcome reporting process.

DBH collects data about the characteristics of the persons served and measures service delivery performance indicators in each of the following CARF DOMAINS. At minimum, one performance indicator will be identified for each of the four CARF domains listed below.

1. **Effectiveness:** A performance dimension that assesses the degree to which an intervention or services have achieved the desired outcome/result/quality of care through measuring change over time. The results achieved and outcomes observed are for persons served.

Examples of indicators include: Persons get a job with benefits, or receive supports needed to live in the community, increased function, activities, or participation, and improvement of health, employment/earnings, or plan of care goal attainment.

2. **Efficiency:** Relationship between results and resources used, such as time, money, and staff. The demonstration of the relationship between results and the resources used to achieve them. A performance dimension addressing the relationship between the outputs/results and the resources used to deliver the service.

Examples of indicators include: Direct staff cost per person served, amount of time it takes to achieve an outcome, gain in scores per days of service, service hours per person achieving some positive outcome, total budget (actual cost) per person served, length of stay and direct service hours of clinical and medical staff.

3. **Access:** Organizations' capacity to provide services of those who desire or need services. Barriers or lack thereof for persons obtaining services. The ability of persons served to receive the right service at the right time. A performance dimension addressing the degree to which a person needing services is able to access those services.

Examples of indicators include: Timeliness of program entry (From 1st request for service to 1st service), ongoing wait times/wait lists, minimizing barriers to getting services, and no-show/cancellation rates.

4. **Satisfaction:** Satisfaction Measures are usually orientated towards consumers, family, staff, and stakeholders. The degree to which persons served, COUNTY and other

stakeholders are satisfied with services. A performance dimension that describes reports or ratings from persons served about services received from an organization.

Examples of indicators include: opinion of persons served or other key stakeholders in regards to access, process, or outcome of services received, Consumer and/or Treatment Perception Survey.

Final selected measures will be agreed upon in contract negotiations along with liquidated damages. CONTRACTOR(S) must address each of the categories referenced above and may additionally propose other performance and outcome measures that are deemed best to evaluate the services provided to persons served and/or to evaluate overall program performance. Separate performance and outcomes measures are expected for specialty mental health services and clinical training services. DBH may adjust the performance and outcome measures periodically throughout the duration of the agreement, as needed, to best measure the program as determined by COUNTY. CONTRACTOR(S) shall utilize and integrate clinical tools as directed by DBH. The CANS 50 and PSC-35 will be used as the assessment and screening tools for children and youth. Reaching Recovery are outcome tools for adults.

CONTRACTOR(S) must utilize a computerized tracking system with which performance and outcome measures and other relevant individual data, such as demographics, will be maintained. The data tracking system may be incorporated into the CONTRACTOR(S)' EHR or be a stand-alone database. DBH must be afforded read-only access to the data tracking system, if applicable. DBH prefers that the CONTRACTOR(S) utilize its current EHR (Avatar) with full access being provided by DBH. However, if the CONTRACTOR(S) is unable or unwilling to utilize DBH's current EHR, arrangements must be made to ensure that an interface to transfer all necessary reporting and outcome information is developed to meet the needs of DBH.

Additional Reporting Requirements

CONTRACTOR(S) will be responsible for meeting with DBH on a monthly basis, or more often as agreed upon between DBH and CONTRACTOR(S), for contract and performance monitoring. CONTRACTOR(S) will be required to submit monthly reports to the COUNTY that will include, but not be limited to: dollars billed for Medi-Cal and non-Medi-Cal persons served; actual expenses; the number of persons served/anticipated to be served; utilization of services by persons served; and staff composition. These reports will be due within thirty (30) days after the last day of the previous month or payments may be delayed.

Additional reporting is required for FSPs by DHCS. DHCS uses the FSP Data Collection and Reporting (DCR) system to ensure adequate research and evaluation regarding the effectiveness of services being provided and the achievement of the outcome measures. CONTRACTOR(S) who provide FSP services will need to report individual/partner information and outcomes of the FSP program directly into the DCR system. An Efficiency Domain review cost per client for each twelve (12) month period is also required.

**MENTAL HEALTH SERVICES ACT COMMUNITY SERVICES AND SUPPORTS
CULTURAL SPECIFIC SERVICES
SCOPE OF WORK**

CONTRACTOR: The Fresno Center

CONTACT: Pao Yang, Executive Director
pyang@fresnocenter.org

SITE ADDRESS: 4879 E. Kings Canyon Road, Fresno, Ca 93727

SERVICES: Cultural Specific Services (Living Well Center)

CONTRACT TERM: October 1, 2018 - June 30, 2021 and Two (2) Possible Twelve-Month Renewal Options

ORGANIZATION: 56304524 (OP/ICM Services); 56304540 (FSP Services)

		<u>Total</u>	<u>MHSA</u>	<u>FFP</u>
FUNDING ALLOCATIONS & REVENUES:	Start Up Services			
	Oct. 1, 2018 to Dec. 30, 2018	\$419,004	\$419,004	\$0
	OP/ICM Services			
	Oct. 1, 2018 to Jun. 30, 2019	\$1,077,943	\$878,676	\$199,267
	FY 2019-20	\$1,465,173	\$1,085,322	\$379,851
	FY 2020-21	\$1,499,069	\$1,119,218	\$379,851
	FY 2021-22	\$1,535,354	\$1,155,503	\$379,851
	FY 2022-23	<u>\$1,574,911</u>	<u>\$1,195,060</u>	<u>\$379,851</u>
	Total:	\$7,152,450	\$5,433,779	\$1,718,671
	FSP Services			
	Jan. 1, 2019 to Jun. 30, 2019	\$178,377	\$134,204	\$44,173
	FY 2019-20	\$347,306	\$258,960	\$88,346
	FY 2020-21	\$356,110	\$267,764	\$88,346
	FY 2021-22	\$363,791	\$275,445	\$88,346
	FY 2022-23	<u>\$375,300</u>	<u>\$286,954</u>	<u>\$88,346</u>
	Total:	\$1,620,884	\$1,223,327	\$397,557
Total Maximum Compensation:		\$9,192,338	\$7,076,110	\$2,116,228

PROJECT DESCRIPTION

The Fresno Center shall utilize culturally and linguistically capable, qualified mental health practitioners to provide three levels of care, outpatient (OP), intensive case management (ICM), and Full Service Partnership (FSP) services, to the Southeast Asian (SEA) community, particularly those of Hmong, Laotian, Vietnamese or Cambodian descent, through the "Living Well Center" (LWC). Program services are designed to serve SEA individuals that have serious emotional disturbances (SED) or serious mental illness (SMI), and are in need of on-going community-based services. The Fresno Center will use SEA non-licensed/waivered mental health clinicians, under clinical direction and oversight by licensed clinicians, to increase capacity of persons served and

the volume of specialty mental health services to the SEA population. The LWC shall primarily serve Fresno County Medi-Cal-eligible children, adults and older adults with mental health treatment focusing on individuals with SED or SMI, and having problems coping with the assimilation process. The mental health services shall be provided in appropriate SEA languages accordingly to serve targeted population.

All referrals to The Fresno Center for FSP services shall be approved by COUNTY's Department of Behavioral Health (DBH) Urgent Care Wellness Center.

In addition, The Fresno Center shall maintain a clinical supervision/training program for SEA graduate, post-graduate, doctoral and post-doctoral students. The goal of the program is to increase the number of licensed mental health professionals of SEA descent whose bi-lingual and bi-cultural capacity will allow greater accessibility to mental health services for those who are of Hmong, Laotian, Vietnamese or Cambodian descent.

TARGET POPULATION

Participation for LWC is on a voluntary basis. The target population to be served annually shall be 250 child/youth (ages 0-18), adult (ages 19-64) and older adult (ages 65 & older) individuals, at any given time, who are of SEA descent and are in need of culturally competent, linguistically accessible mental health services.

A minimum caseload consisting of 220 SEA persons served shall be enrolled in the outpatient/intensive case management component throughout each twelve (12) month period of this Agreement.

A minimum caseload consisting of 30 SEA persons served shall be enrolled in the FSP component throughout each twelve (12) month period of this Agreement.

LOCATION OF SERVICES

The current physical site for the LWC is centrally located in an area that is known as "Ban Vinai/Asian Village", where many Southeast Asians live and shop. Additionally, there are accessible public transit bus routes and plenty of open parking spaces.

LWC services may be expanded to include service delivery in the home, community, school or other community-based settings, as some individuals and families are reluctant to seek services from traditional mental health settings, or if other barriers like transportation and childcare become barriers. This expansion in terms of location of services may also include telehealth, mobile services, and co-location in natural supports and gathering places for the SEA population. These locations will be determined in collaboration with the person served and treating clinician, and with approval of the program director.

DESCRIPTION OF SERVICES

The Fresno Center shall:

- A. Utilize a one-time start-up cost for building the new Living Well Center expansion, inclusive of space development of a 4,200 square feet area to accommodate increased staff and persons served, furniture and fixtures, server and computers, and a vehicle, as well as funding for staff to be trained in FSP services. The Fresno Center shall include in any contracts for work on the expansion of the Living Well Center a provision requiring

the builder or contractor to comply with any and all laws applicable to the work, including any prevailing wage laws, should they apply.

- B. Create, maintain and further develop a specialty mental health service site that utilizes innovative approaches to building community trust within the SEA population, while providing a clinical training program for qualified participants.
- C. Train existing health care providers on mental health issues and how they may be masked as physical health care complaints and symptoms, and on appropriate methods for making referrals for mental health services within the cultural context of the person served.

Specific to the delivery of Outpatient/Intensive Case Management Specialty Mental Health Services, The Fresno Center shall:

- A. Increase the numbers of persons served with new and innovative education, outreach and outpatient/intensive case management specialty mental health services specific to the Fresno County SEA community in a manner that overcomes mental health stigma, and supports and promotes wellness and recovery.
- B. Provide outpatient/intensive case management specialty mental health services with a focus on:
 - 1. Innovative engagement and culturally specific services that address traditional barriers to mental health access and engagement by the SEA population;
 - 2. Assisting individuals to deal with cultural issues of assimilation and developing a plan for the future;
 - 3. Individuals who are reluctant to seek mental health treatment in a traditional setting; and
 - 4. Individuals who are Medi-Cal eligible and/or have difficulty accessing care.
- C. Provide clinical mental health services driven by culturally sensitive approaches that may include, but are not limited to:
 - 1. Domestic violence education and increased awareness to associated mental health issues;
 - 2. Issues related to parenting and family impacts when there is associated gang violence; and
 - 3. The impact of mental health issues to addictive behaviors that include gambling and substance use.
- D. Provide services that specifically address stigma and discrimination within the SEA population, in an effort to better engage the community in the treatment of and recovery from mental illness.
- E. Treatment will be provided in a culturally competent manner to enhance individual self-esteem and self-determination.

- F. Provide individualized care plans that address specific cultural issues specific to age and gender.
- G. Emphasize family-driven services.
- H. Utilize a variety of treatment approaches, including but not limited to:
 - 1. Language and ethnic specific individual, family and group therapy;
 - 2. Women's groups dealing with past and present trauma lead by female mental health clinicians;
 - 3. Other mental health groups that are gender specific, only involving mental health professionals of the same gender; and
 - 4. Family therapy with focus on youth/adolescents or transition age youth (ages 16-24), enforcing the cultural importance of the family and the historic role of parents.
- I. Provide mental health services in a culturally appropriate manner that respects gender roles, the role of family members; respect for birth order and age within a cultural context; and the ability to communicate in the individuals' native language.
- J. Provide culturally sensitive environment/location that has community support and is not directly related or co-located with traditional COUNTY mental health program services.
- K. Increase opportunity for service provision without the use of an interpreter, thus increasing trust and engagement within the treatment relationship.
- L. Mental health services provided by clinicians with similar cultural backgrounds to better understand and support treatment needs.
- M. Provide mental health services that may focus on issues such as stigma, domestic violence, gang affiliation and violence, exposure to trauma, addictive behaviors in an effort to specifically address barriers to wellness and recovery that are met by the SEA population.
- N. Employ staff that are representative of SEA population and are qualified to recognize symptoms being addressed that include, but are not limited to: trauma leading to migration, change to socio-economic status, change in roles based on age and gender due to 'norms' in cultural where relocated.
- O. Use and/or recognition of traditional healing practices.
- P. Take into consideration the following during the initial assessment:
 - 1. Sexual orientation of the person served;
 - 2. Gender roles within the SEA culture, with sensitivity toward female and male interactions with others outside of their families in a cultural context;

3. Age within the SEA community with preference given to people who are the most senior;
 4. Birth order also plays a significant role in terms of family interactions with older sibling taking priority over younger siblings;
 5. Culturally defined role designations and attitudes are often a source of conflict as second generation children began assimilating into mainstream Western culture;
- Q. Provide outreach to SEA persons to be served and their family members through networks of community leaders and through collaborative relationship with Federally Qualified Health Center (FQHC) outpatient clinic(s). Provide and document referrals and linkages to necessary physical health care providers.
- R. Focus on recovery principles to make the persons served more self-reliant and resilient.
- S. Establish a collaborative with existing community-based organizations, community leaders and faith-based organizations in the SEA community.
- T. Establish a process with primary care providers to generate referrals for mental health services.
- U. Utilize the Southeast Asian Cross Cultural Counseling Model (SEA CCCM) to increase child/youths' knowledge and capacity, gradually improve their condition, stabilize them, and then ultimately help them to have a balanced and satisfactory life.
1. *Cognitive Behavioral Therapy (CBT) Component.* Counselors and clinicians will help SEA children/youth to identify and replace unhealthy thinking/beliefs, and avoid engaging in miserable and negative thoughts and behaviors.
 2. *Positive Psychology Component.* Counselors and clinicians will help the SEA children/youths to focus on positive emotions, thoughts, and wellness. For example being grateful, having hope, having happiness, having inspiration, practicing wellness, empowering self and having inner peace.
 3. *Skills Building Component.* Counselors and peer support will teach SEA children/youths about assertiveness, effective communication, working effectively with others, problem solving skills, and relaxation techniques.
 4. *Cultural Strengths Component.* SEA youths will be able to use their own cultural values, practices, and beliefs to help them cope with their daily life changes. Focus in on showing respect (Filial Piety!), practicing fairness (Relationship!), having compassion (i.e. exchanging knowledge/labor, having empathy & kindness, doing good deeds, and maintaining continuity with relatives and neighbors) (Happiness!), cultural identity, and celebrating their culture (A Sense of Belonging!). These are emphasis and practiced as they come to session everywhere by staff, clinicians and counselors.

Specific to the delivery of Full Service Partnership Services, The Fresno Center shall:

- A. Support the individual needs of the person served, using "whatever it takes" to help move them out of high risk and low engagement behavior into engagement and self-care.

- B. Document cultural practices and behaviors that resemble closely to hospitalization and ER utilization such as increased use of alternative healing practices, shaman, and herbal medicines.
- C. Meet individuals on the streets, in their homes, at community centers, in hospitals and clinics, and anywhere the person served might be, or at unconventional times, in order to provide services “where the person served is at”.
- D. Provide the following, but not limited to:
 - 1. 24/7 Crisis Response
 - 2. Daily Program Rehabilitation/Support
 - 3. Intensive Case Management
 - 4. Social/Recreational Activities
 - 5. Assessment/Treatment Planning
 - 6. Individual Therapy
 - 7. Educational Groups
 - 8. Peer Support Groups
 - 9. Psycho-pharmalogical Treatment
 - 10. Housing Support
 - 11. Hospitalization Support
 - 12. Probation/Court Engagement
- E. Provide transportation assistance, such as helping to purchase bus passes so individuals can access services, go to school or seek employment.
- F. Advocacy, such as negotiating with medical providers to get individuals seen more quickly to minimize distress in the waiting room.
- G. Community integration activities, such as facilitating self-care.
- H. Housing related activities, such as supporting the individual through the housing process with help assembling written documentation, making reminder calls, accompany individuals to housing program interviews, writing letters of support or purchasing furniture for individuals' homes to make it more comfortable for them.
- I. Support assistance and services to seek and participate in cultural activities and

events, and alternative healing and practices within the community.

Specific to Clinical Supervision Program, The Fresno Center shall:

- A. Facilitate the training/supervision of new SEA mental health professionals by providing a supervised clinical environment where the new SEA professional may gain valuable field experience under the terms and conditions of this Agreement.
- B. Provide a clinical training site that will provide qualified and supervised training to SEA post-master associates, to secure required hours necessary for completion of the State licensing examination and for SEA graduate students to fulfill degree requirements in the field of mental health or social work.
- C. Keep records of student participation, including entrance into program, progress within, and departure/completion of the program.
- D. All direct services provided within this project shall be provided by licensed mental health professionals, post-master degree associates or by students as part of their graduate training program. Services provided will include assessment and mental health services (individual, family, and group therapy) as designed by an individual-driven wellness and recovery treatment plan that addresses personal goals.
- E. Increase the number of student interns to successfully enter and complete the clinical training program and obtain required licensure.
- F. Provide clinical training environment, licensed oversight and documentation of required hours of clinical training for all individuals within the clinical training program (associates, graduate students, post-graduate students, waived/registered staff, non-licensed staff), at no additional cost to COUNTY.

STAFFING LEVEL

The Fresno Center shall provide 18.45 full time equivalent (FTE) staff, as identified in Exhibit E-1, dedicated to the Living Well Center to provide the OP/ICM (15.27 FTE) and FSP (3.18 FTE) services as well as to supervise, manage and support the clinical training program.

HOURS OF OPERATION

The Living Well Center will operate from Monday through Saturday; Monday through Friday from 8 AM to 6 PM and Saturday from 8 AM to 12 PM. On-call services will be available 24 hours/7 days a week for individuals in the FSP component.

PROGRAM OBJECTIVES AND OUTCOMES

The Fresno Center will utilize a computerized tracking system with which outcome measures and other relevant individual data, such as demographics, will be maintained.

Efficiency

Service delivery cost per service unit, length of stay in the program, and direct service hours of clinical and medical staff. These can be calculated internally on a monthly basis.

Effectiveness

Outcomes in following tables address the quality of service and care provided to the persons served. Reduction in Homelessness, Incarceration, probation attendance, hospitalization, psychiatric hospitalization, increase in employment and improvement in education.

Access

Timeliness of program entry (from first request for service to first service), ongoing wait times/wait lists, minimizing barriers to getting services, convenience of service hours and locations, and number of persons served. These can be captured internally on a monthly basis.

Satisfaction and Feedback from Persons Served and Stakeholders

Individuals are informed at intake of the protocol and procedure to address grievances and concerns. These are places where they can share their thoughts and opinion of the services. The Fresno Center will also take part in completing the State semi-annual Consumer Perception Surveys. No show/cancellation rates and services to first scheduled appointment after first assessment can measure engagement and satisfaction of persons served.

Outcome Measures	Indicators	Frequency	Level of Care/Program
Service timeliness is 10 business days from the initial service request to first service for Outpatient and 15 for psychiatry appointment.	Average length of time from first request for service to first clinical assessment/outpatient service or psychiatry.	Monthly	OP/ICM/FSP
Increase access to outpatient/intensive case management specialty mental health services from 120 SEA persons served to 220 persons served in the preferred language of the person served.	Number of persons served per month that are treated; track the preferred languages of the mental health services that are provided to each SEA individual.	Monthly	OP/ICM
Evidence of improved access to mental health services of all persons engaged	Number/Percentage of individuals being linked/engaged to services (i.e., PCP, Medi-Cal, SSI).	Monthly	OP/ICM/FSP
Within 30 days of an individual's enrollment in the program, provide evidence of a plan of care developed in the individual's preferred language, approved, authorized and signed by the individual.	Number of individuals with plan of care created with 30 days.	Monthly	OP/ICM/FSP
Within 180 days of being enrolled in the program, 100% of individuals who did not have SSI will have completed applications to receive SSI. The Fresno	Number of persons served receiving SSI.	Monthly	ICM/FSP

Center will provide this data to COUNTY on a monthly basis by the 10 th of each month regarding SSI status.			
Within six months of being enrolled in the program, 100% of persons served will have documented linkages to a Primary Care Physician.	Number of persons served with linkages services to a Primary Care Physician.	Bi-annually	OP/ICM/FSP
Individuals receiving services shall have zero (0) days of homelessness after being enrolled in the program, unless the individual declined housing assistance. The Fresno Center will notify COUNTY of individual's decline and document accordingly. The Fresno Center must have clear documentation of efforts to house persons served in appropriate setting.	Number of persons served, enrolled and received services, that were homeless at intake, during, or after engaging in services.	Monthly	FSP
90% of those receiving services will not access higher level of care.	Number of persons served, enrolled and received services, that have not required a higher level of care.	Annual	FSP
90% of those receiving services will become more physically active through participating in healthy walking and exercising and other therapeutic arts and crafts activities.	Number of persons served actively participating in on physical types of activities.	Annual	OP/ICM
75% of those engaged in services will show stabled or improvement in their well-being.	Number of persons served who self-reported their condition stabilized or improved. Number of persons served that show decrease on the Hmong Adaptive Beck Depression Inventory Scale.	Annual	OP/ICM
90% reduction in days of in-patient psychiatric hospitalizations for persons served after being enrolled in FSP compared to the year before being enrolled in the FSP.	Number of FSP persons served that were not in in-patient psychiatric hospital.	Annual	FSP
Within 30 days enrollment in the FSP, 100% of persons served will have participated in forming their individualized service plan.	Number of FSP persons served with individualized service plan.	Monthly	FSP
Increase the number of mental health professionals of SEA descent qualified for licensure through hours earned. A minimum of four (4) student interns shall enter and complete, or show satisfactory progress towards completion of, required clinical hours or	Number of hours accumulated by students and by the number of students that obtain valid California licensure in their respective field that have completed the required	Annual	Clinical Supervision Program

completion of the intern program.	hours within the clinical training/supervision program.		
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FSP Outcomes	Measurement Method	Data Source
Child/Youth		
Indicator 1 – Living situation: homeless or shelter; justice system placement	FSP: Change over time	CANS
Indicator 2 – Education attendance; suspensions; expulsions	FSP: Change over time	CANS
Indicator 3 – Legal status; moved out of home; reunited	FSP: Change over time	CANS
Indicator 4 – Number of emergency room visits; physical health and mental health	FSP: Change over time	CANS
Indicator 5 - Self rating on improvement in functioning (symptoms, housing situation, school or work, social situations, relations with family, dealing with crises, control over life, dealing with problems)	FSP: Point in time	MHSIP
Adult		
Indicator 1 – Living situation: homeless or shelter; justice system placement; independent; number of moves; hospitalization	FSP: Change over time	Chart/File
Indicator 2 – Employment, if applicable	FSP: Change over time	Chart/File
Indicator 3 – Number of arrests	FSP: Change over time	Chart/File
Indicator 4 – Number of emergency room visits; physical health and mental health	FSP: Change over time	Chart/File
Indicator 5 – Self rating on improvement in functioning (symptoms, housing situation, school or work, social situations, relations with family, dealing with crises, control over life, dealing with problems)	FSP: Point in time	MHSIP/ Reaching recovery
Older Adult		
Indicator 1 – Living situation: homeless or shelter; number of moves; hospitalization	FSP: Change over time	Chart/File
Indicator 2 – Number of emergency room visits; physical health and mental health	FSP: Change over time	Chart/File
Indicator 3 – Activities of daily living	FSP: Change over time	Chart/File
Indicator 4 – Instrumental activities of daily living	FSP: Change over time	Chart/File

Indicator 5 – Self rating on improvement in functioning (symptoms, housing situation, school or work, social situations, relations with family, dealing with crises, control over life, dealing with problems)	FSP: Point in time	MHSIP/ Reaching Recovery
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DELIVERABLES

Due by the 10th of Each Month:

1. Completed Activity Log for prior month activities and Caseload Report.
2. Invoice for payment reflecting expenses and revenues for the prior month. With each invoice, The Fresno Center must clearly identify, explain and verify line items expenditures and must clarify expenses/revenues that are not consistent with the term of use/earnings.
3. Staffing report – identifying staff name, title/classification, hire date, certification date, licensure and expiration date, bilingual status, and full-time status/hours.

Due as Requested and/or Necessary:

1. All printed material (flyers, brochures, banners, etc.) and media outreach associated with the program must include the COUNTY's logo and/or state that the program is funded by the COUNTY, and must be approved by DBH Director or designee prior to use/circulation.
2. Miscellaneous reports as requested by COUNTY, DBH Director or designee, Behavioral Health Board, State, or other auditing and/or reporting entity.

FULL SERVICE PARTNERSHIP SERVICE DELIVERY MODEL

Full Service Partnerships (FSP) are designed as a partnership between enrollees and the service provider. The FSP service delivery ethic incorporates recovery and cultural competence into the services and supports offered to consumers. In this partnership, the service provider commits to do "whatever it takes" and to "meet the client where they are" in order to assist the enrollee achieve their personal recovery/resiliency and wellness goals.

1. The Target Population is consistent with the population identified in the Fresno County MHSA Community Planning Process.

The target population must meet requirements for SMI/SED diagnosis, and must address reduction of specific ethnic disparities, as indicated in the MHSA Community Services and Supports proposal.

The target population will include clients who are not currently served **and** meet one or more of the following criteria:

- Homeless.
- At risk of homelessness – such as youth aging out of foster care or persons coming out of jail.
- Involved in the criminal justice system (including adults with child protection issues).
- Frequent users of hospital and emergency room services.

or are so underserved that they are at risk of:

- Homelessness – such as persons living in institutions or nursing homes.
- Criminal justice involvement.
- Institutionalization.

Diagnoses that serve as criteria for inclusion in the target population will be based on definitions found in California Welfare and Institutions Code Section 5600.3 defining seriously emotionally disturbed mental disorder or serious mental disorder. The operational definition of "diagnosis" for programs serving the chronically homeless may also include: co-occurring disorders, personality disorders, general anxiety/mood disorders, and Post Traumatic Stress Disorder.

2. FSP Program Components:

All MHSA FSP Programs must include the following in their program descriptions:

- **Providers who are part of the multidisciplinary, community based "treatment" teams serve as an ally to the consumer's recovery process.** The partnership allows clients and family members opportunities for informed choice.
 - o The team description must demonstrate commitment and capacity to do "whatever it takes" to assist the enrolled member, specifically:
 - Low staff to client ratio (approximately 1:12 or the ratio that has been specified in the RFP's scope of work).
 - 24/7 availability of the multidisciplinary team.
 - Team culture is created where each member of the team knows each client and the clients are familiar with each member of the team.
 - Members of the team speak the client's language, are familiar with community resources that reflect the healing beliefs of the client's culture, and are positioned to assist the client make meaningful connection with those resources.

- Crisis response comes from a person known to the client.
 - Staff is given the administrative flexibility and flex-funding to connect consumers with non-mental health services and same day needs. Examples include: housing; primary care; dual disorder services; education services and supports; vocational services and supports; payee services/benefits advocacy; community recreational activities (YMCA classes, libraries, movie theaters, etc.); social services; food; transportation; and clothing.
 - Availability of Integrated Dual Diagnosis Treatment or other dual recovery intervention that will provide effective treatment for the target population.
- **Outreach and engagement.** The team's outreach and engagement strategy must be voluntary and driven by the values of client culture. This means that consumers will be engaged "where they are" in terms of their community location, their need for clinical and non-clinical services/supports and their phase of recovery. Outreach workers will have culturally competent language skills and will function as an ally to the consumer's decision to receive services. Peer Support will be included in the outreach and engagement of new clients.
 - **Procedures for enrollment and dis-enrollment will be easily understood, clearly communicated and non-coercive.** Enrollment is voluntary. A condition of enrollment is that the client indicates that they want services from the assertive-community treatment model team.
 - **Each adult, older adult, and transition age youth enrollee must have a Personal Service Coordinator (PSC).** The PSC is an ally to the enrollee and acts as a "single point of responsibility" within the multidisciplinary team for coordinating services and supports.

"Personal Service Coordinators (PSCs) for adults – case managers for children and youth – must have a caseload that is low enough so that: (1) their availability to the individual and family is appropriate to their service needs, (2) they are able to provide intensive services and supports when needed, and (3) they can give the individual served and/or family member considerable personal attention...PSCs/case managers must be culturally competent, and know the community resources of the client's racial ethnic community." (Source: DMH Planning Requirements, Section III Identifying Populations for Full Service Partnerships, Aug 2005)

- **Each enrollee must have an Integrated Services and Supports Plan (ISSP) that is developed with their Personal Services Coordinator.** This ISSP is a planning tool that builds on the consumer's strengths. It includes goals and provides a map of the steps that the enrollee identifies as necessary to move along his/her recovery path.

"Integrated Services and Supports Plans must operationalize the five fundamental concepts (identified in section three of this exhibit) and should reflect community collaboration, be culturally competent, be client/family driven with a wellness/recovery/resiliency focus and they must provide an integrated service experience for the client/family. In addition, the ISSP will be person/child-centered, and give individuals and their families' sufficient information to allow them to make informed choices about the services in which they participate. Services should also include linkage to, or provision of, all needed services or benefits as defined by the client and or family in consultation with the PSC/case manager. This includes the capability of increasing or decreasing service intensity as needed." (Source: DMH Planning

Requirements, Section III Identifying Populations for Full Service Partnerships, Aug 2005)

- **Peer support services will be made available to the client.** At least two staff (a minimum of 1 FTE) who act in peer support roles will be employed in each MHSA program.
 - o The enrollee is given significant access to peer recovery and self-help services. Tools such as Advanced Directives are made available to adult and older adult clients, and Wellness Recovery Action Plans (WRAP) are made available to adult, transition age youth and older adult clients.
 - o Peer Counselors are included as equal partners in the multidisciplinary team, and play a critical role in developing the recovery culture and client orientation of the team.

3. The Five (5) Core MHSA Concepts are embedded in each program.

Concept 1: Recovery/Resiliency Orientation: FSPs will embody the values of recovery and resiliency (i.e., hope, personal responsibility, self-advocacy, choice, respect) and the program principles of recovery and resiliency, including:

- Client-driven goal setting and Individualized Services and Supports Plans.
- Providers are allies to the client's recovery process.
- A harm-reduction approach to substance use that encourages recovery and abstinence but does not penalize consumers or withdraw help from them if they are using.
- A built in understanding and expectation of setbacks as part of recovery.
- Links to a range of services that are part of the consumers "pathway to wellness" (i.e., employment, health care, peer support, housing, medications, food and clothing).

Concept 2: Cultural Competence Orientation: The program's structure, staffing and service delivery values will reflect the cultural values and orientation of the program's target populations.

The FSP program will embody principals of cultural competence including:

- Diverse staff, representative of the primary ethnic groups to be reached through the program.
- Staff trained regarding common access barriers for racial and ethnic groups targeted (including the impact of housing discrimination).
- Links to community-based organizations that share the healing beliefs and practices of ethnic communities served by the FSP.

The FSP program must also be able to deal with gender and sexual orientation diversity. Training in sensitivity to gender and sexuality issues is a key component for staff on the team.

Concept 3: Community Collaboration: FSP Collaborations ensure that community resources are made available to enrollees. These collaborations include subcontracts between the vendor and other agencies, memoranda of understanding with community non-profits and businesses regarding providing services to clients, and informal relationships built between FSP staff and community stakeholders that result in improved access and decreased discrimination.

Concept 4: Client/Family Driven program: In FSPs, the Integrated Services and Supports Plan (ISSP) is used by adult clients and families of children and youth to identify their needs and preferences which lead to the services and supports that will be most effective for them. Providers work in full partnership with clients to develop these ISSPs. Their needs and preferences drive the policy and financing decisions that affect them.

Concept 5: Integrated Service Experience: FSP programs were incorporated into the MHSA to ensure that these dollars funded “integrated service experiences”. This means that services are “seamless” to clients and that clients do not have to negotiate multiple agencies and funding sources to get critical needs met and to move towards recovery and develop resiliency. Services are delivered, or at a minimum, coordinated through a single agency or a system of care. The integrated service experience centers on the individual/family, uses a strength-based approach, and includes multi-agency programs and joint planning to best address the individual/family’s needs using the full range of community-based treatment, case management, and interagency system components required by children/transition age youth/adults/older adults.

Fresno County Department of Behavioral Health

Guiding Principles of Care Delivery

DBH VISION:

Health and well-being for our community.

DBH MISSION:

The Department of Behavioral Health is dedicated to supporting the wellness of individuals, families and communities in Fresno County who are affected by, or are at risk of, mental illness and/or substance use disorders through cultivation of strengths toward promoting recovery in the least restrictive environment.

DBH GOALS:

Quadruple Aim

- Deliver quality care
- Maximize resources while focusing on efficiency
- Provide an excellent care experience
- Promote workforce well-being

GUIDING PRINCIPLES OF CARE DELIVERY:

The DBH 11 principles of care delivery define and guide a system that strives for excellence in the provision of behavioral health services where the values of wellness, resiliency, and recovery are central to the development of programs, services, and workforce. The principles provide the clinical framework that influences decision-making on all aspects of care delivery including program design and implementation, service delivery, training of the workforce, allocation of resources, and measurement of outcomes.

1. Principle One - Timely Access & Integrated Services

- o Individuals and families are connected with services in a manner that is streamlined, effective, and seamless
- o Collaborative care coordination occurs across agencies, plans for care are integrated, and whole person care considers all life domains such as health, education, employment, housing, and spirituality
- o Barriers to access and treatment are identified and addressed
- o Excellent customer service ensures individuals and families are transitioned from one point of care to another without disruption of care

Fresno County Department of Behavioral Health

Guiding Principles of Care Delivery

2. Principle Two - Strengths-based

- o Positive change occurs within the context of genuine trusting relationships
- o Individuals, families, and communities are resourceful and resilient in the way they solve problems
- o Hope and optimism is created through identification of, and focus on, the unique abilities of individuals and families

3. Principle Three - Person-driven and Family-driven

- o Self-determination and self-direction are the foundations for recovery
- o Individuals and families optimize their autonomy and independence by leading the process, including the identification of strengths, needs, and preferences
- o Providers contribute clinical expertise, provide options, and support individuals and families in informed decision making, developing goals and objectives, and identifying pathways to recovery
- o Individuals and families partner with their provider in determining the services and supports that would be most effective and helpful and they exercise choice in the services and supports they receive

4. Principle Four - Inclusive of Natural Supports

- o The person served identifies and defines family and other natural supports to be included in care
- o Individuals and families speak for themselves
- o Natural support systems are vital to successful recovery and the maintaining of ongoing wellness; these supports include personal associations and relationships typically developed in the community that enhance a person's quality of life
- o Providers assist individuals and families in developing and utilizing natural supports.

5. Principle Five - Clinical Significance and Evidence Based Practices (EBP)

- o Services are effective, resulting in a noticeable change in daily life that is measurable.
- o Clinical practice is informed by best available research evidence, best clinical expertise, and client values and preferences
- o Other clinically significant interventions such as innovative, promising, and emerging practices are embraced

Fresno County Department of Behavioral Health

Guiding Principles of Care Delivery

6. Principle Six - Culturally Responsive

- o Values, traditions, and beliefs specific to an individual's or family's culture(s) are valued and referenced in the path of wellness, resilience, and recovery
- o Services are culturally grounded, congruent, and personalized to reflect the unique cultural experience of each individual and family
- o Providers exhibit the highest level of cultural humility and sensitivity to the self-identified culture(s) of the person or family served in striving to achieve the greatest competency in care delivery

7. Principle Seven - Trauma-informed and Trauma-responsive

- o The widespread impacts of all types of trauma are recognized and the various potential paths for recovery from trauma are understood
- o Signs and symptoms of trauma in individuals, families, staff, and others are recognized and persons receive trauma-informed responses
- o Physical, psychological and emotional safety for individuals, families, and providers is emphasized

8. Principle Eight - Co-occurring Capable

- o Services are reflective of whole-person care; providers understand the influence of bio-psycho-social factors and the interactions between physical health, mental health, and substance use disorders
- o Treatment of substance use disorders and mental health disorders are integrated; a provider or team may deliver treatment for mental health and substance use disorders at the same time

9. Principle Nine - Stages of Change, Motivation, and Harm Reduction

- o Interventions are motivation-based and adapted to the client's stage of change
- o Progression through stages of change are supported through positive working relationships and alliances that are motivating
- o Providers support individuals and families to develop strategies aimed at reducing negative outcomes of substance misuse through a harm reduction approach
- o Each individual defines their own recovery and recovers at their own pace when provided with sufficient time and support

Fresno County Department of Behavioral Health

Guiding Principles of Care Delivery

10. Principle Ten - Continuous Quality Improvement and Outcomes-Driven

- o Individual and program outcomes are collected and evaluated for quality and efficacy
- o Strategies are implemented to achieve a system of continuous quality improvement and improved performance outcomes
- o Providers participate in ongoing professional development activities needed for proficiency in practice and implementation of treatment models

11. Principle Eleven - Health and Wellness Promotion, Illness and Harm Prevention, and Stigma Reduction

- o The rights of all people are respected
- o Behavioral health is recognized as integral to individual and community well-being
- o Promotion of health and wellness is interwoven throughout all aspects of DBH services
- o Specific strategies to prevent illness and harm are implemented at the individual, family, program, and community levels
- o Stigma is actively reduced by promoting awareness, accountability, and positive change in attitudes, beliefs, practices, and policies within all systems
- o The vision of health and well-being for our community is continually addressed through collaborations between providers, individuals, families, and community members

Living Well Center - FACILITY START-UP/FSP START-UP
The Fresno Center
October 1, 2018 - December 31, 2018

Budget Categories -		Total Proposed Budget		
Line Item Description (Must be itemized)	FTE %	Admin.	Direct	Total
PERSONNEL SALARIES:				
0001 Program Director	0.10	\$ -	\$ 95,004	\$ 2,375
0002 Medical Director/Psychiatrist	0.10	\$ -	\$ 250,008	\$ 6,250
0003 Clinical Supervisor	0.05	\$ -	\$ 90,000	\$ 1,125
0004 Unlicensed Psychologist	0.40	\$ -	\$ 75,000	\$ 7,500
0005 Clinical Psychologist	0.05	\$ -	\$ 104,004	\$ 1,300
0006 Licensed Clinical	0.05	\$ -	\$ 72,804	\$ 910
0007 Senior Rehab Counselor	0.10	\$ -	\$ 57,000	\$ 1,425
0008 Nonlicensed Clinical II	0.47	\$ -	\$ 57,000	\$ 6,698
0009 Nonlicensed Clinical I	0.30	\$ -	\$ 50,004	\$ 3,750
0010 Personal Coordinator Service/CM II	0.30	\$ -	\$ 44,004	\$ 3,300
0011 Personal Coordinator Service/CM I	0.96	\$ -	\$ 38,004	\$ 9,121
0012 Medical Biller	0.10	\$ -	\$ 45,000	\$ 1,125
0013 Peer Specialist	0.20	\$ -	\$ 30,000	\$ 1,500
SALARY TOTAL	3.18	\$0	\$1,007,832	\$46,379
PAYROLL TAXES:				
0030 OASDI @ 6.2%				\$2,876
0031 FICA/MEDICARE @ 1.45%				\$673
0032 SUI 1st \$7,000 @ 6.8%				\$1,514
PAYROLL TAX TOTAL		\$0	\$0	\$5,062
EMPLOYEE BENEFITS:				
0040 Retirement				\$1,391
0041 Workers Compensation				\$1,159
0042 Health Insurance (medical, vision, life, dental)				\$4,770
EMPLOYEE BENEFITS TOTAL		\$0	\$0	\$7,321
SALARY & BENEFITS GRAND TOTAL				\$58,762
FACILITIES/EQUIPMENT EXPENSES:				
1010 Rent/Lease Building				\$4,237
1011 Rent/Lease Equipment				\$434
1012 Utilities				\$714
1013 Building Maintenance				\$893
1014 Equipment Purchase				\$0
FACILITY/EQUIPMENT TOTAL				\$6,277

Living Well Center - FACILITY START-UP/FSP START-UP
The Fresno Center
October 1, 2018 - December 31, 2018

OPERATING EXPENSES:

1060	Telephone	\$357
1061	Answering Service	\$0
1062	Postage	\$15
1063	Printing/Reproduction	\$166
1064	Publications	\$0
1065	Legal Notices/Advertising	\$170
1066	Office Supplies & Equipment	\$43
1067	Household Supplies	\$0
1068	Food	\$0
1069	Program Supplies - Therapeutic	\$0
1070	Program Supplies - Medical	\$0
1071	Transportation of Clients	\$0
1072	Staff Mileage/Vehicle Maintenance	\$535
1073	Staff Travel (Out of County)	\$0
1074	Staff Training/Registration	\$0
1075	Lodging	\$0
1076	IT Support & Upgrades	\$595
OPERATING EXPENSES TOTAL		\$1,880

FINANCIAL SERVICES EXPENSES:

1080	Accounting/Bookkeeping	\$0
1081	External Audit	\$765
1082	Liability Insurance	\$255
1083	Administrative Overhead	\$54,653
1084	Payroll Services	\$102
1085	Professional Liability Insurance	\$0
FINANCIAL SERVICES TOTAL		\$55,775

SPECIAL EXPENSES (Consultant/Etc.):

1090	Stipend	\$0
1091	Nurse	\$0
1092	Pain Specialist	\$0
1093	Alternate Healer	\$0
1094	Medication Supports	\$0
SPECIAL EXPENSES TOTAL		\$0

FIXED ASSETS:

1190	Computers & Software	\$10,000
1191	Furniture & Fixtures	\$65,000

Living Well Center - FACILITY START-UP/FSP START-UP

The Fresno Center

October 1, 2018 - December 31, 2018

1192	Office Expansion	\$181,310
1193	Vehicle	\$40,000
FIXED ASSETS TOTAL		\$296,310

NON MEDI-CAL CLIENT SUPPORT EXPENSES:

2000	Client Housing Support Expenditures (SFC 70)	\$0
2001	Client Housing Operating Expenditures (SFC 71)	\$0
2002.1	Clothing, Food & Hygiene (SFC 72)	\$0
2002.2	Client Flexible Support Expenditures Support (SFC 72)	\$0
2002.3	Education Support (SFC 72)	\$0
2002.4	Employment Support (SFC 72)	\$0
2002.5	Respite Care (SFC 72)	\$0
2002.6	Household Items	\$0
2002.7	Utility Vouchers (SFC 72)	\$0
2002.8	Child Care (SFC 72)	\$0
NON MEDI-CAL CLIENT SUPPORT TOTAL		\$0
TOTAL PROGRAM EXPENSES		\$419,004

MEDI-CAL REVENUE:

	Service	Rate	\$ Amount
3000	Mental Health Services (Individual/Family/Group Therapy)	\$2.61	\$0
3100	Case Management	\$2.02	\$0
3200	Crisis Services	\$3.88	\$0
3300	Medication Support	\$4.82	\$0
3400	Collateral	\$2.61	\$0
3500	Plan Development	\$2.61	\$0
3600	Assessment	\$2.61	\$0
3700	Rehabilitation	\$2.61	\$0
Estimated Specialty Mental Health Services Billing Totals		0	\$0
Estimated % of Clients that are Medi-Cal Beneficiaries			90%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries			\$0
Federal M/Cal Share of Cost % (Federal Financial Participation-FFP)		50.00%	\$0
State M/Cal Share of Cost % (BH Realignment/EPSTDT)		0.00%	\$0
MEDI-CAL REVENUE TOTAL			\$0

OTHER REVENUE:

4100	Other - (Identify)	\$0
4200	Other - (Identify)	\$0
4300	Other - (Identify)	\$0
OTHER REVENUE TOTAL		\$0

Living Well Center - FACILITY START-UP/FSP START-UP

The Fresno Center

October 1, 2018 - December 31, 2018

MENTAL HEALTH SERVICES ACT (MHSA) REVENUE:

5000	Prevention & Early Intervention (PEI) Funds	\$0
5100	Community Services & Supports (CSS) Funds	\$419,004
5200	Innovation (INN) Funds	\$0
5300	Workforce Education & Training (WET) Funds	\$0
MHSA FUNDS TOTAL		\$419,004
TOTAL PROGRAM REVENUE		\$419,004

Living Well Center - FACILITY START-UP/FSP START-UP
The Fresno Center
October 1, 2018 - December 31, 2018
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

Personnel Salaries, Payroll Taxes & Employee Benefits - Line Items 0001- 0042

- 0001 • 1 Program Director @ \$7,917/mon. x 3 months x 0.10 FTE= \$2,375. The Program Director will oversee the overall development and management of the Living Well Center and its staff.
- 0002 • 1 Medical Director/Psychiatrist @ \$20,834/mon. x 3 months x 0.10 FTE = \$6,250. The Medical Director/Psychiatrist will works closely with primary medical providers, psychologist(s), behavioral health clinicians, counselors and care coordinators to meet the clinical and non-clinical health needs Southeast Asian persons served at the Living Well Center. Duties may include but not limited to conducting psychiatric evaluation as needed and be available on-call and if need by telehealth as necessary; conduct mental status examinations and pharmacological evaluations, prescribe psychotic medications, teach clients about side effects and monitor response to prescribed medications.
- 0003 • 1 Clinical Supervisor @ \$7,500/mon. x 3 months x 0.05 FTE = \$1,125. The Clinical Supervisor will assist in the management of the LWC program, supervise clinic staff, student interns and be responsible for the day to day functioning of the LWC clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0004 • 1 Unlicensed Psychologist @ \$ 6,250/mon. x 3 months x 0.40 FTE = \$7,500. A licensed or licensed eligible clinical psychologist who is bilingual and bicultural in any of the Southeast Asian languages to provide psychotherapy and clinical assessments. Also, the psychologist will assist in the development and implementation of various culturally and linguistic techniques, assessment, and methods in the program.
- 0005 • 1 Clinical Psychologist @ \$8,667/mon. x 3 months x .05 FTE = \$1,300. The licensed clinician will assist the clinical supervisor in providing supervision for the clinic staff, student interns, and assist in the day to day functioning of the LWC clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0006 • 1 Licensed Clinical I @ \$6,067/mon. x 3 months x .05 FTE = \$910. The licensed clinician will assist the clinical supervisor in providing supervision for the clinic staff, student interns, and assist in the day to day functioning of the LWC clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0007 • 1 Senior Rehab. Counselor @ \$4,750/mon. x 3 months x .10 FTE=\$1,425. Under the supervision of licensed personnel, provides professional cultural and linguistic rehabilitation mental health services, which includes individual and group rehab therapy. Assist in performing assessments, case management, and performs related work as required.
- 0008 • 4.75 Nonlicensed Clinical II @ \$4,750/mon. x 3 months x 0.10 FTE = \$6,698. The Mental Health Unlicensed Clinician II is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required.

Living Well Center - FACILITY START-UP/FSP START-UP
The Fresno Center
October 1, 2018 - December 31, 2018
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

- 0008 • 3 Nonlicensed Clinical I @ \$4,167/mon. x 3 months x 0.1 FTE= \$3,750. The Mental Health Unlicensed Clinician I is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required.
- 0009 • 1 Personal Coordinator Service/Case Manager II @ \$3,667/mon. x 3 months x .30 FTE= \$3,300. TThis position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
- 0009 • 2.10 Personal Coordinator Service/Case Manager I @ \$3,167/mon. x 3 months 0.31 FTE = \$9,121. TThis position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
- 0010 • 1 Medical Biller @ \$3,750/mon. x 3 months x 0.10 FTE = \$1,125. The Medical Biller will be work closely with Case Manager and clinicians to ensure that all billing are entered in a timely manager. Managing monthly billable units and revenues. Work with Program Director to make sure billable goals are met.
- 0011 • 2 Peer Specialists @ \$2,500/mon. x 3 months x 0.10 FTE = \$1,500. The Peer Specialist will be responsible for monitoring, informing, supporting, assisting, and empowering consumers and their family/caregivers who directly or indirectly receive behavioral health services; facilitating peer-to-peer assistance as a part of a team setting; conducting outreach to consumers, families/caregivers and the community; and acting in a liaison role between consumers, families/caregivers and community service providers.
- 0030 • OASDI
OASDI cost is estimated @ 6.2% x total salary = \$2,876 annually.
- 0031 • FICA/MEDICARE
FICA/MEDICARE cost is estimated @ 1.45% x total salary = \$673 annually.
- 0032 • SUI
SUI cost is estimated @ 1st \$7,000 x 6.8% x 3.18 FTE = \$1,514 annually.
- 0040 • Retirement
Retirement cost is estimated @ 3% x total salary = \$1,391 annually.
- 0041 • Workers Compensation
Workers Compensation cost is estimated @ 2.5% x total salary = \$1,159 annually.

Living Well Center - FACILITY START-UP/FSP START-UP
The Fresno Center
October 1, 2018 - December 31, 2018
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

• Health Insurance

0042 Health Insurance (medical, vision, life, and dental) cost are estimated @ \$500/staff x 3.18 FTE x 3 months = \$4,770 annually.

\$58,762

Facilities/Equipment Expenses – Line Items 1010-1014

• Rent/Office Lease

1010 Office Lease cost are estimated @ 6,700 sq. ft @ \$1.24/sq.ft. x 3 months @ 17%= \$4,237

• Rent/Equipment Lease

1011 Lease copy machines cost are estimated @ \$850/month x 3 months x 17%= \$434

• Utilities

1012 Utilities cost is estimated annually at \$1,400/month x 3 months annually @ 17%= \$714

• Building Maintenance

1013 Building Maintenance includes janitorial services, pest control, material, AC services, and other maintenance cost are estimated @ \$1,750/month x 3 months x 17%= \$893

\$6,277

Operating Expenses - Line Items 1060-1077

• Telephone

1060 Telephone (include local, long distance, cell phone, and internet services) cost is estimated @ \$700/month x 3 months x 17%= \$357

• Postage

1062 Postage & Delivery cost are estimated @ \$30/month x 3 months x 17%= \$15

• Printing/Reproduction

1063 In-house printing, business cards, flyers and brochures, etc. cost are estimated @ \$325/month x 3 months x 17% = \$166

• Legal Notices/Advertising

1065 Marketing on ethnic magazines and radio stations and TV station cost is estimated \$4,000 annually x 17% x 3 months=\$170

• Office Supplies

1066 General office supplies cost is estimated @ \$1,000/month x 3 months x 17%= \$43

• Staff Mileage/Vehicle Maintenance

1072 Local travel for staff to attend meeting/trainings and maintenance for gas, vehicle maintenance, registrations, and insurance for 3 cars @ \$12,576/month x 3 months x 17% = \$535

• IT Support & Upgrades

1076 IT Support services cost is estimated @ \$14,000 annually x 17% x 3 months = \$595

\$1,880

Living Well Center - FACILITY START-UP/FSP START-UP
The Fresno Center
October 1, 2018 - December 31, 2018
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

Financial Services Expenses – Line Items 1080-1085

- External Audit
- 1081 External Audit perform by Price Paige & Company cost is estimated @ \$18,000 annually x 17% x 3 months=\$765
- Liability Insurance
- 1082 General liability insurance cost is estimated @ \$6,000 annually x 17% x 3 months = \$255
- Administration Overhead
- 1083 Administration Overhead includes salaries and benefits for the Executive Director, Chief Development Officer, Human Resource Generalist, Program Assistants, Office Manager, Bookkeeper, and the Secretary/Receptionist to support program staff cost is estimated @ \$53,796 annually.
- Payroll Services
- 1084 Outside payroll services cost is estimated @ \$2,400 annually x 17% x 3 months = \$102
- Professional Liability Insurance
- 1085 Professional Liability Insurance cost is estimated at \$5,000 annually @ 17% x 3 months= \$850.

\$55,775

Fixed Assets – Line Items 1190-1193

- Computers & Software
- 1190 Purchase five new computers for staff and 1 server estimated cost @ \$10,000 for 1st year only
- Furniture & Fixtures
- 1191 Purchase new desks, chairs, office furniture, for new expansion office, etc. estimated cost @ \$65,000 annually for 1st year only
- Office Expansion
- 1192 A one-time office build out expansion of a 4,200 sq feet area for 18 FTE to implement expansion of service (ICM, FSP and youth). Estimated cost at \$181,310
- Vehicle
- 1193 1 time purchase of passenger vans for transporting consumers @ \$40,000 for 1st year only

\$296,310

Non Medi-Cal Client Support Expenses – Line Items 2000 - 2002.8

- 2000 N/A

\$0

TOTAL PROGRAM EXPENSE: \$419,004

Desk	18	\$	700	\$	12,600
Chairs	46	\$	250	\$	11,500
Sofa	3	\$	750	\$	2,250
Waiting room chairs	20	\$	150	\$	3,000
Break room table & chairs	1	\$	750	\$	750
Great Activity Room chairs	30	\$	350	\$	10,500
Great Activity Room tables	12	\$	850	\$	10,200
				\$	50,800

Living Well Center - OP/ICM
The Fresno Center
October 1, 2018 - June 30, 2019

Budget Categories - Line Item Description (Must be itemized)		FTE %	Total Proposed Budget		
			Admin.	Direct	Total
PERSONNEL SALARIES:					
0001	Program Director	0.85	\$ -	\$ 95,004	\$ 60,565
0002	Medical Director/Psychiatrist	0.10	\$ -	\$ 250,008	\$ 18,751
0003	Clinical Supervisor	0.20	\$ -	\$ 90,000	\$ 13,500
0004	Unlicensed Psychologist	0.60	\$ -	\$ 75,000	\$ 33,750
0005	Clinical Psychologist	0.05	\$ -	\$ 104,004	\$ 3,900
0006	Licensed Clinical	0.05	\$ -	\$ 72,804	\$ 2,730
0007	Senior Rehab Counselor	0.90	\$ -	\$ 57,000	\$ 38,475
0008	Nonlicensed Clinical II	4.28	\$ -	\$ 57,000	\$ 182,970
0009	Nonlicensed Clinical I	2.70	\$ -	\$ 50,004	\$ 101,258
0010	Personal Coordinator Service/CM II	0.70	\$ -	\$ 44,004	\$ 23,102
0011	Personal Coordinator Service/CM I	2.14	\$ -	\$ 38,004	\$ 60,996
0012	Medical Biller	0.90	\$ -	\$ 45,000	\$ 30,375
0013	Peer Specialist	1.80	\$ -	\$ 30,000	\$ 40,500
SALARY TOTAL		15.27	\$0	\$1,007,832	\$610,873
PAYROLL TAXES:					
0030	OASDI @ 6.2%				\$37,874
0031	FICA/MEDICARE @ 1.45%				\$8,858
0032	SUI 1st \$7,000 @ 6.8%				\$7,269
PAYROLL TAX TOTAL			\$0	\$0	\$54,000
EMPLOYEE BENEFITS:					
0040	Retirement				\$18,326
0041	Workers Compensation				\$15,272
0042	Health Insurance (medical, vision, life, dental)				\$68,715
EMPLOYEE BENEFITS TOTAL			\$0	\$0	\$102,313
SALARY & BENEFITS GRAND TOTAL					\$767,186
FACILITIES/EQUIPMENT EXPENSES:					
1010	Rent/Lease Building				\$62,061
1011	Rent/Lease Equipment				\$6,350
1012	Utilities				\$8,591
1013	Building Maintenance				\$13,073
1014	Equipment purchase				\$0
FACILITY/EQUIPMENT TOTAL					\$90,073

Living Well Center - OP/ICM
The Fresno Center
October 1, 2018 - June 30, 2019

OPERATING EXPENSES:

1060	Telephone	\$5,229
1061	Answering Service	\$0
1062	Postage	\$224
1063	Printing/Reproduction	\$2,428
1064	Publications	\$0
1065	Legal Notices/Advertising	\$2,490
1066	Office Supplies & Equipment	\$7,470
1067	Household Supplies	\$0
1068	Food	\$0
1069	Program Supplies - Therapeutic	\$7,655
1070	Program Supplies - Medical	\$0
1071	Transportation of Clients	\$0
1072	Staff Mileage/vehicle maintenance	\$7,830
1073	Staff Travel (Out of County)	\$0
1074	Staff Training/Registration	\$3,750
1075	Lodging	\$0
1076	IT Support & Upgrades	\$8,715
1077		
OPERATING EXPENSES TOTAL		\$45,791

FINANCIAL SERVICES EXPENSES:

1080	Accounting/Bookkeeping	\$0
1081	External Audit	\$11,205
1082	Liability Insurance	\$3,735
1083	Administrative Overhead	\$140,601
1084	Payroll Services	\$1,494
1085	Professional Liability Insurance	\$3,113
FINANCIAL SERVICES TOTAL		\$160,148

SPECIAL EXPENSES (Consultant/Etc.):

1090	Stipend	\$1,245
1091	Nurse	\$1,500
1092	Pain Specialist	\$1,500
1093	Alternative Healer	\$1,500
1094	Medication Supports	\$0
SPECIAL EXPENSES TOTAL		\$5,745

FIXED ASSETS:

1190	Computers & Software	\$0
1191	Furniture & Fixtures	\$0
1192	Office Landscaping	\$0
1193	Vehicle	\$0
FIXED ASSETS TOTAL		\$0

Living Well Center - OP/ICM
The Fresno Center
October 1, 2018 - June 30, 2019

NON MEDI-CAL CLIENT SUPPORT EXPENSES:

2000	Client Housing Support Expenditures (SFC 70)	\$750
2001	Client Housing Operating Expenditures (SFC 71)	\$0
2002.1	Clothing, Food & Hygiene (SFC 72)	\$750
2002.2	Client Flexible Support Expenditures Support (SFC 72)	\$3,000
2002.3	Education Support (SFC 72)	\$1,875
2002.4	Employment Support (SFC 72)	\$0
2002.5	Respite Care (SFC 72)	\$0
2002.6	Household Items	\$750
2002.7	Utility Vouchers (SFC 72)	\$0
2002.8	Child Care (SFC 72)	\$1,875
NON MEDI-CAL CLIENT SUPPORT TOTAL		\$9,000
TOTAL PROGRAM EXPENSES		\$1,077,943

MEDI-CAL REVENUE:

MEDI-CAL REVENUE:		Units of Service	Rate	\$ Amount
3000	Mental Health Services (Individual/Family/Group Therapy)	18,225	\$2.61	\$47,567
3100	Case Management	22,500	\$2.02	\$45,450
3200	Crisis Services	150	\$3.88	\$582
3300	Medication Support	6,000	\$4.82	\$28,920
3400	Collateral	375	\$2.61	\$979
3500	Plan Development	4,219	\$2.61	\$11,011
3600	Assessment	16,875	\$2.61	\$44,044
3700	Rehabilitation	101,250	\$2.61	\$264,263
Estimated Specialty Mental Health Services Billing Totals		169,594		\$442,815
Estimated % of Clients that are Medi-Cal Beneficiaries				90%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				\$398,534
Federal M/Cal Share of Cost % (Federal Financial Participation-FFP)			50.00%	\$199,267
State M/Cal Share of Cost % (BH Realignment/EPSTD)			0.00%	\$0
MEDI-CAL REVENUE TOTAL				\$199,267

OTHER REVENUE:

4100	Other - (Identify)	\$0
4200	Other - (Identify)	\$0
4300	Other - (Identify)	\$0
OTHER REVENUE TOTAL		\$0

MENTAL HEALTH SERVICES ACT (MHSA) REVENUE:

5000	Prevention & Early Intervention (PEI) Funds	\$0
5100	Community Services & Supports (CSS) Funds	\$878,676
5200	Innovation (INN) Funds	\$0
5300	Workforce Education & Training (WET) Funds	\$0
MHSA FUNDS TOTAL		\$878,676
TOTAL PROGRAM REVENUE		\$1,077,943

Living Well Center - OP/ICM
The Fresno Center
October 1, 2018 - June 30, 2019
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

Personnel Salaries, Payroll Taxes & Employee Benefits - Line Items 0001- 0042

- 0001 • 1 Program Director @ \$7,917/mon. x 9 months x 0.85 FTE=\$60,565. The Program Director will oversee the overall development and management of the Living Wells Project and its staff.
- 0002 • 1 Medical Director/Psychiatrist @ \$20,834/mon. x 9 months x 0.10 FTE = \$18,751. The Medical Director/Psychiatrist will works closely with consumers' primary medical providers, psychologist(s), behavioral health clinicians, counselors and care coordinators to meet the clinical and non-clinical health needs Southeast Asian consumers at the Living Well Program. Duties may include but not limited to conducting psychiatric evaluation, as needed and be available on-call and if need by telehealth as necessary; conduct mental status examinations and pharmacological evaluations, prescribe psychotic medications, teach clients about side effects and monitor response to prescribed medications.
- 0003 • 1 Clinical Supervisor @ \$7,500/mon. x 9 months x 0.20 FTE = \$13,500. The Clinical Supervisor will assist in the management of the LWP program, supervise clinic staff, student interns and be responsible for the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0004 • 1 Unlicensed Psychologist @ \$ 6,250/mon. x 9 months x 0.60 FTE = \$33,750. A licensed or licensed eligible clinical psychologist who is bilingual and bicultural in any of the Southeast Asian languages to provide psychotherapy and clinical assessments. Also, the psychologist will assist in the development and implementation of various culturally and linguistic techniques, assessment, and methods in the program.
- 0005 • 1 Clinical psychologist @ \$8,667/mon. x 9 months x .05 FTE = \$3,900. The licensed clinician will assist the clinical supervisor in providing supervision for the clinic staff, student interns, and assist in the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0006 • 1 Licensed Clinical I @ \$6,067/mon. x 9 months x .05 FTE = \$2,730. The licensed clinician will assist the clinical supervisor in providing supervision for the clinic staff, student interns, and assist in the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0007 • 1 Senior Rehab. Counselor @ 4,750/mon. x 9 months x .90 FTE=\$38,475. Under the supervision of license personnel, provides professional cultural and linguistic rehabilitation mental health services, which includes individual and group rehab therapy. Assist in performing assessments, case management, and performs related work as required.
- 0008 • 4.75 Nonlicensed Clinical II @ \$4,750/mon. x 9 months x .90 FTE = \$182,970. The Mental Health Unlicensed Clinician II is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required

**Living Well Center - OP/ICM
The Fresno Center
October 1, 2018 - June 30, 2019
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

- 0008 • 3 Nonlicensed Clinical I @ \$4,167/mon. x 9 months x 0.90 FT = \$101,258. The Mental Health Unlicensed Clinician I is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required
- 0009 • 1 Personal Coordinator Service/Case Manager II @ \$3,667/mon. x 9 months x .70 FTE= \$23,102. This position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
- 0009 • 3.10 Personal Coordinator Service/Case Manager I @ \$3,167/mon. x 9 months x 0.31 FTE = \$60,996. This position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
- 0010 • 1 Medical Biller @ \$3,750/mon. x 9 months x 0.90 FTE = \$30,375. The Medical Biller will be work closely with Case Manager and clinicians to ensure that all billing are entered in a timely manner. Managing monthly billable units and revenues. Work with Program Director to make sure billable goals are met.
- 0011 • 2 Peer Specialists @ \$2,500/mon. x 9 months x 0.90 FTE = \$40,500. The Peer Specialist will be responsible for monitoring, informing, supporting, assisting, and empowering consumers and their family/caregivers who directly or indirectly receive behavioral health services; facilitating peer-to-peer assistance as a part of a team setting; conducting outreach to consumers, families/caregivers and the community; and acting in a liaison role between consumers, families/caregivers and community service providers.
- 0030 • OASDI
OASDI cost is estimated @ 6.2% x total salary = \$37,874 annually.
- 0031 • FICA/MEDICARE
FICA/MEDICARE cost is estimated @ 1.45% x total salary = \$8,858 annually.
- 0032 • SUI
SUI cost is estimated @ 1st \$7,000 x 6.8% x 15.27 FTE = \$7,269 annually.
- 0040 • Retirement
Retirement cost is estimated @ 3% x total salary = \$18,326 annually.
- 0041 • Workers Compensation
Workers Compensation cost is estimated @ 2.5% x total salary = \$15,272 annually.

Living Well Center - OP/ICM
The Fresno Center
October 1, 2018 - June 30, 2019
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

• Health Insurance

0042 Health Insurance (medical, vision, life, and dental) cost are estimated @ \$500/staff x 15.27 FTE x 9 months = \$68,715

\$767,186

Facilities/Equipment Expenses – Line Items 1010-1014

• Rent/Office Lease

1010 Office Lease cost are estimated @ 6,700 sq. ft. @ \$1.24/sq.ft. x 9 months x 83%= \$62,061

• Rent/Equipment Lease

1011 Lease copy machines cost are estimated @ \$850/month x 9 months x 83%= \$6,350.

• Utilities

1012 Utilities cost are estimated \$1,400/month x 9 months annually x 83%= \$8,591

• Building Maintenance

1013 Building Maintenance includes janitorial services, pest control, material, AC services, and other maintenance cost are estimated @ \$1,750/month x 9 months x 83%= \$13,073

\$90,073

Operating Expenses - Line Items 1060-1077

• Telephone

1060 Telephone (include local, long distance, cell phone, and internet services) cost is estimated @ \$700/month x 9 months x 83%= \$5,229

• Postage

1062 Postage & Delivery cost are estimated @ \$30/month x 9 months x 83%= \$224

• Printing/Reproduction

1063 In-house printing, business cards, flyers and brochures, etc. cost are estimated @ \$325/month x 9 months x 83% = \$2,428

• Legal Notices/Advertising

1065 Marketing on ethnic magazines and radio stations and TV station cost is estimated \$4,000 annually x 83%=\$2,490

• Office Supplies

1066 General office supplies cost is estimated @ \$1,000/month x 9 months x 83%= \$7,470

• Program Supplies - Therapeutic

1069 Supplies and materials for individual activity cost is estimated @ \$1,024.75/month x 9 months x 83%= \$7,655

Living Well Center - OP/ICM
The Fresno Center
October 1, 2018 - June 30, 2019
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

- Staff Mileage/Vehicle Maintenance;
1072 Local travel for staff to attend meeting/trainings and maintenance for gas, vehicle maintenance, registrations, and insurance for 3 cars @ \$12,579 annually x 83% x 9 months = \$7,830
- Staff Training/Registration
1074 Staff Training/Conference for staff cost is estimated @ \$5,000 annually x .83% x 9 months = \$3,750
- IT Support & Upgrades
1076 IT Support services cost is estimated \$14,000 annually x 83% x 9 months = \$8,715

\$45,791

Financial Services Expenses – Line Items 1080-1085

- External Audit
1081 External Audit perform by Price Paige & Company cost is estimated \$18,000 annually x 83% x 9 months = \$11,205
- Liability Insurance
1082 General liability insurance cost is estimated @ \$6,000 annually x 83% x 9 months = \$3,735
- Administration Overhead
Administration Overhead includes salaries and benefits for the Executive Director, Fund Developer,
1083 Human Resource Generalist, Program Assistants, Office Manager, Bookkeeper, and the Secretary/Receptionist to support program staff cost is estimated @ \$140,601 annually.
- Payroll Services
1084 Outside payroll services cost is estimated \$2,400 annually @ 83% x 9 months = \$1,494
- Professional Liability Insurance
1085 Professional Liability Insurance cost is estimated at \$5,000 annually x 83% x 9 months = \$3,113

\$160,148

Special Expenses – Line Items 1090-1092

- Stipend
1090 To train 2 graduate students in mental health work force @ \$500 per semester for 2 semesters x 2 x 83% = \$1,660. 9 months cost = \$1,245
- Nurse
Nurse consultant with medication supports and education, and to assist psychiatrist in the administration
1091 of medication and treatment of patients as needed. Estimated annually @ \$2,000. 9 months cost = \$1,500
- Pain Specialist
Pain specialist to support psychiatrist and staff on chronic pain symptom managements and medication
1092 consultation of pain medications. Estimated annually @ \$2,000. 9 months cost = \$1,500

Living Well Center - OP/ICM
The Fresno Center
October 1, 2018 - June 30, 2019
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

• Alternative Healer

1093 Traditional alternative Healer to support consumers with spiritual wellness and recovering practices and methods. Estimated annually @ \$2,000. 9 months cost = \$1,500

\$5,745

Fixed Assets – Line Items 1190-1193

1190 N/A

\$0

Non Medi-Cal Client Support Expenses – Line Items 2000 - 2002.8

• Client Housing Support Expenditures (SFC 70)

2000 For cost of providing housing supports. including housing subsidies for permanent, transitional and temporary housing; master leases; motel and other housing vouchers and shelters; rental security deposits; first and last month rental payments; and eviction prevention and other fiscal housing supports. Estimated @ \$1,000 annually. 9 months cost = \$750

• Clothing, Food & Hygiene (SFC 72)

2002.1 To provide supports to clients, which may include food vouchers and other items necessary for daily living (such as, clothing, hygiene, etc.). Estimated @ \$1,000 annually. 9 months cost = \$750

• Client Flexible Support Expenditures Support (SFC 72)

2002.2 To provide supports to clients and their caregivers, may include vouchers, goods, services, and other family support services. Also maybe use for personal/community integration to assist clients in achieving their treatment goals and in supporting their integration into the larger community. Items may include, but are not limited to socialization and recreational activities. This funding may also be used for medical, dental and optical care, prescriptions, and laboratory tests when the client does not have insurance to pay for such care. Estimated @ \$4,000 annually. 9 months cost = \$3,000

• Educational Support (SFC 72)

2002.3 To provide educational support to clients, which may include transportation to and from school, school materials, tuitions, and other school resources and/or activities expenses. Estimated at \$2,500. 9 months cost = \$1,875

• Household Items (SFC 72)

2002.6 To provide supports for clients with household items need. Estimated at \$1,000. 9 months cost = \$750

• Child Care (SFC 72)

2002.8 To provide childcare supports to clients and their family to help clients meets treatment goals . Estimated @ 2,500 annually. 9 months cost = \$1,875

\$9,000

TOTAL PROGRAM EXPENSE: \$1,077,943

Living Well Center - OP/ICM
The Fresno Center
FY 2019-2020

Budget Categories - Line Item Description (Must be itemized)		FTE %	Total Proposed Budget		
			Admin.	Direct	Total
PERSONNEL SALARIES:					
0001	Program Director	0.85	\$ -	\$ 97,860	\$ 83,181
0002	Medical Director/Psychiatrist	0.10	\$ -	\$ 257,508	\$ 25,751
0003	Clinical Supervisor	0.20	\$ -	\$ 92,700	\$ 18,540
0004	Unlicensed Psychologist	0.60	\$ -	\$ 77,256	\$ 46,354
0005	Clinical Psychologist	0.05	\$ -	\$ 107,120	\$ 5,356
0006	Licensed Clinical	0.05	\$ -	\$ 74,160	\$ 3,708
0007	Senior Rehab Counselor	0.90	\$ -	\$ 58,716	\$ 52,844
0008	Nonlicensed Clinical II	4.28	\$ -	\$ 58,716	\$ 251,304
0009	Nonlicensed Clinical I	2.70	\$ -	\$ 51,504	\$ 139,061
0010	Personal Coordinator Service/CM II	0.70	\$ -	\$ 45,365	\$ 31,756
0011	Personal Coordinator Service/CM I	2.14	\$ -	\$ 39,144	\$ 83,768
0012	Medical Biller	0.90	\$ -	\$ 46,356	\$ 41,720
0013	Peer Specialist	1.80	\$ -	\$ 30,900	\$ 55,620
SALARY TOTAL		15.27	\$0	\$1,037,306	\$838,964
PAYROLL TAXES:					
0030	OASDI @ 6.2%				\$52,016
0031	FICA/MEDICARE @ 1.45%				\$12,165
0032	SUI 1st \$7,000 @ 6.8%				\$7,269
PAYROLL TAX TOTAL			\$0	\$0	\$71,449
EMPLOYEE BENEFITS:					
0040	Retirement				\$25,169
0041	Workers Compensation				\$20,974
0042	Health Insurance (medical, vision, life, dental)				\$91,620
EMPLOYEE BENEFITS TOTAL			\$0	\$0	\$137,763
SALARY & BENEFITS GRAND TOTAL					\$1,048,176
FACILITIES/EQUIPMENT EXPENSES:					
1010	Rent/Lease Building				\$82,748
1011	Rent/Lease Equipment				\$8,466
1012	Utilities				\$11,454
1013	Building Maintenance				\$17,430
1014	Equipment purchase				\$0
FACILITY/EQUIPMENT TOTAL					\$120,098

Living Well Center - OP/ICM
The Fresno Center
FY 2019-2020

OPERATING EXPENSES:

1060	Telephone	\$6,972
1061	Answering Service	\$0
1062	Postage	\$299
1063	Printing/Reproduction	\$3,237
1064	Publications	\$0
1065	Legal Notices/Advertising	\$3,320
1066	Office Supplies & Equipment	\$9,960
1067	Household Supplies	\$0
1068	Food	\$0
1069	Program Supplies - Therapeutic	\$10,216
1070	Program Supplies - Medical	\$0
1071	Transportation of Clients	\$0
1072	Staff Mileage/vehicle maintenance	\$10,441
1073	Staff Travel (Out of County)	\$0
1074	Staff Training/Registration	\$5,000
1075	Lodging	\$0
1076	IT Support & Upgrades	\$11,623
1077		
OPERATING EXPENSES TOTAL		\$61,067

FINANCIAL SERVICES EXPENSES:

1080	Accounting/Bookkeeping	\$0
1081	External Audit	\$14,940
1082	Liability Insurance	\$4,980
1083	Administrative Overhead	\$191,110
1084	Payroll Services	\$1,992
1085	Professional Liability Insurance	\$4,150
FINANCIAL SERVICES TOTAL		\$217,172

SPECIAL EXPENSES (Consultant/Etc.):

1090	Stipend	\$1,660
1091	Nurse	\$2,000
1092	Pain Specialist	\$2,000
1093	Alternate Healer	\$2,000
1094		\$0
SPECIAL EXPENSES TOTAL		\$7,660

FIXED ASSETS:

1190	Computers & Software	\$0
1191	Furniture & Fixtures	\$0
1192	Office Landscaping	\$0
1193	Vehicle	\$0
FIXED ASSETS TOTAL		\$0

Living Well Center - OP/ICM
The Fresno Center
FY 2019-2020

NON MEDI-CAL CLIENT SUPPORT EXPENSES:

2000	Client Housing Support Expenditures (SFC 70)	\$1,000
2001	Client Housing Operating Expenditures (SFC 71)	\$0
2002.1	Clothing, Food & Hygiene (SFC 72)	\$1,000
2002.2	Client Flexible Support Expenditures Support (SFC 72)	\$3,000
2002.3	Education Support (SFC 72)	\$2,500
2002.4	Employment Support (SFC 72)	\$0
2002.5	Respite Care (SFC 72)	\$0
2002.6	Household Items	\$1,000
2002.7	Utility Vouchers (SFC 72)	\$0
2002.8	Child Care (SFC 72)	\$2,500
NON MEDI-CAL CLIENT SUPPORT TOTAL		\$11,000
TOTAL PROGRAM EXPENSES		\$1,465,173

MEDI-CAL REVENUE:

MEDI-CAL REVENUE:		Units of Service	Rate	\$ Amount
3000	Mental Health Services (Individual/Family/Group Therapy)	243,000	\$2.61	\$634,230
3100	Case Management	30,000	\$2.02	\$60,600
3200	Crisis Services	200	\$3.88	\$776
3300	Medication Support	8,000	\$4.82	\$38,560
3400	Collateral	500	\$2.61	\$1,305
3500	Plan Development	5,625	\$2.61	\$14,681
3600	Assessment	22,500	\$2.61	\$58,725
3700	Rehabilitation	13,500	\$2.61	\$35,235
Estimated Specialty Mental Health Services Billing Totals		323,325		\$844,112
Estimated % of Clients that are Medi-Cal Beneficiaries				90%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				\$759,701
Federal M/Cal Share of Cost % (Federal Financial Participation-FFP)			50.00%	\$379,851
State M/Cal Share of Cost % (BH Realignment/EPSTD)			0.00%	\$0
MEDI-CAL REVENUE TOTAL				\$379,851

OTHER REVENUE:

4100	Other - (Identify)	\$0
4200	Other - (Identify)	\$0
4300	Other - (Identify)	\$0
OTHER REVENUE TOTAL		\$0

MENTAL HEALTH SERVICES ACT (MHSA) REVENUE:

5000	Prevention & Early Intervention (PEI) Funds	\$0
5100	Community Services & Supports (CSS) Funds	\$1,085,322
5200	Innovation (INN) Funds	\$0
5300	Workforce Education & Training (WET) Funds	\$0
MHSA FUNDS TOTAL		\$1,085,322
TOTAL PROGRAM REVENUE		\$1,465,173

**Living Well Program: OP/ICM
The Fresno Center
FY 2019-2020
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

Personnel Salaries, Payroll Taxes & Employee Benefits - Line Items 0001- 0042

- 0001 • 1 Program Director @ \$8,155/mon. x 12 months x 0.85 FTE=\$83,181. The Program Director will oversee the overall development and management of the Living Wells Project and its staff.
- 0002 • 1 Medical Director/Psychiatrist @ \$21,459/mon. x 12 months x 0.10 FTE = \$25,751. The Medical Director/Psychiatrist will works closely with consumers' primary medical providers, psychologist(s), behavioral health clinicians, counselors and care coordinators to meet the clinical and non-clinical health needs Southeast Asian consumers at the Living Well Program. Duties may include but not limited to conducting psychiatric evaluation, as needed and be available on-call and if need by telehealth as necessary; conduct mental status examinations and pharmacological evaluations, prescribe psychotic medications, teach clients about side effects and monitor response to prescribed medications.
- 0003 • 1 Clinical Supervisor @ \$7,725/mon. x 12 months x .20 FTE = \$18,540. The Clinical Supervisor will assist in the management of the LWP program, supervise clinic staff, student interns and be responsible for the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0004 • 1 Unlicensed Psychologist @ \$ 6,438/mon. x 12 months x 0.60 FTE = \$46,354. A licensed or licensed eligible clinical psychologist who is bilingual and bicultural in any of the Southeast Asian languages to provide psychotherapy and clinical assessments. Also, the psychologist will assist in the development and implementation of various culturally and linguistic techniques, assessment, and methods in the program.
- 0005 • 1 Clinical psychologist @ \$8,927/mon. x 12 months x .05 FTE = \$5,356. The licensed clinician will assist the clinical supervisor in providing supervision for the clinic staff, student interns, and assist in the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0006 • 1 Licensed Clinical I @ \$6,180/mon. x 12 months x .05 FTE = \$3,708. The licensed clinician will assist the clinical supervisor in providing supervision for the clinic staff, student interns, and assist in the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0007 Senior Rehab. Counselor @ \$4,893/mon. x 12 months x .90 FTE = \$52,844. Under the supervision of licensed personnel, provides professional cultural and linguistic rehabilitation mental health services, which includes individual and group rehab therapy. Assist in performing assessments, case management, and performs related work as required.
- 0008 • 4.75 Nonlicensed Clinical II @ \$4,893/mon. x 12 months x 0.90 FTE = \$251,304. The Mental Health Unlicensed Clinician II is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required

**Living Well Program: OP/ICM
The Fresno Center
FY 2019-2020
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

- 0008 • 3 Nonlicensed Clinical I @ \$4,292/mon. x 12 months x 0.90 FTE= \$139,061. The Mental Health Unlicensed Clinician I is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required
- 0009 • 1 Personal Coordinator Service/Case Manager II @ \$3,780/mon. x 12 months x 0.70 FTE= \$31,756. This position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
- 0009 • 3.10 Personal Coordinator Service/Case Manager I @ \$3,262/mon. x 12 months 0.69 FTE = \$83,768. This position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
- 0010 • 1 Medical Biller @ \$3,863/mon. x 12 months x 0.90 FTE = \$41,720. The Medical Biller will be work closely with Case Manager and clinicians to ensure that all billing are entered in a timely manner. Managing monthly billable units and revenues. Work with Program Director to make sure billable goals are met.
- 0011 • 2 Peer Specialists @ \$2,575/mon. x 12 months x 0.90 FTE = \$55,620. The Peer Specialist will be responsible for monitoring, informing, supporting, assisting, and empowering consumers and their family/caregivers who directly or indirectly receive behavioral health services; facilitating peer-to-peer assistance as a part of a team setting; conducting outreach to consumers, families/caregivers and the community; and acting in a liaison role between consumers, families/caregivers and community service providers.
- 0030 • OASDI
OASDI cost is estimated @ 6.2% x total salary = \$52,016 annually.
- 0031 • FICA/MEDICARE
FICA/MEDICARE cost is estimated @ 1.45% x total salary = \$12,165 annually.
- 0032 • SUI
SUI cost is estimated @ 1st \$7,000 x 6.8% x 15.27 FTE = \$7,269 annually.
- 0040 • Retirement
Retirement cost is estimated @ 3% x total salary = \$25,169 annually.
- 0041 • Workers Compensation
Workers Compensation cost is estimated @ 2.5% x total salary = \$20,974 annually.

**Living Well Program: OP/ICM
The Fresno Center
FY 2019-2020
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

• Health Insurance

0042 Health Insurance (medical, vision, life, and dental) cost are estimated @ \$500/staff x 15.27 FTE x 12 months = \$91,620 annually.

\$1,048,176

Facilities/Equipment Expenses – Line Items 1010-1014

• Rent/Office Lease

1010 Office Lease cost are estimated @ 6,700 sq. ft. @ \$1.24/sq.ft.. x 12 months x 83%= \$82,748

• Rent/Equipment Lease

1011 Lease copy machines cost are estimated @ \$850/month x 12 months x 83%= \$8,466.

• Utilities

1012 Utilities cost is estimated annually at \$13,800 x 83%= \$11,454

• Building Maintenance

1013 Building Maintenance includes janitorial services, pest control, material, AC services, and other maintenance cost are estimated @ \$1,750/month x 12 months x 83%= \$17,430

\$120,098

Operating Expenses - Line Items 1060-1077

• Telephone

1060 Telephone (include local, long distance, cell phone, and internet services) cost is estimated @ \$700/month x 12 months @ 83%= \$6,972

• Postage

1062 Postage & Delivery cost are estimated @ \$30/month x 12 months @ 83%= \$299

• Printing/Reproduction

1063 In-house printing, business cards, flyers and brochures, etc. cost are estimated @ \$325/month x 12 months @ 83% = \$3,237

• Legal Notices/Advertising

1065 Marketing on ethnic magazines and radio stations and TV station cost is estimated \$4,000 annually x 83%=\$3,320.

• Office Supplies

1066 General office supplies cost is estimated @ \$1,000/month x 12 months x 83%= \$9,960

• Program Supplies - Therapeutic

1069 Supplies and materials for individual activity cost is estimated @ \$1,025.7/month x 12 months x 83%= \$10,216

**Living Well Program: OP/ICM
The Fresno Center
FY 2019-2020
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

- Staff Mileage/Vehicle Maintenance;
Local travel for staff to attend meeting/trainings and maintenance for gas, vehicle maintenance, registrations, and insurance for 3 cars @ \$12,580 annually x 83%= \$10,441
- Staff Training/Registration
Staff Training/Conference for staff cost is estimated @ \$5,000 annually
- IT Support & Upgrades
IT Support services cost is estimated @ \$14,000 annually x 83% = \$11,623

\$61,067

Financial Services Expenses – Line Items 1080-1085

- External Audit
External Audit perform by Price Paige & Company cost is estimated \$18,000 annually x 83%=\$14,940.
- Liability Insurance
General liability insurance cost is estimated \$6,000 annually x 83% = \$4,980.
- Administration Overhead
Administration Overhead includes salaries and benefits for the Executive Director, Fund Developer, Human Resource Generalist, Program Assistants, Office Manager, Bookkeeper, and the Secretary/Receptionist to support program staff cost is estimated @ \$191,110 annually.
- Payroll Services
Outside payroll services cost is estimated @ \$2,400 annually x 83% = \$1,992.
- Professional Liability Insurance
Professional Liability Insurance cost is estimated at \$5,000 annually x 83%=\$4,150.

\$217,172

Special Expenses – Line Items 1090-1092

- Stipend
To train 2 graduate students in mental health work force @ \$500 per semester for 2 semesters x 2 @ \$2,000 annually at 83% = \$1,660.
- Nurse
Nurse consultant with medication supports and education, and to assist psychiatrist in the administration of medication and treatment of patients as needed. Estimated annually at \$2,000
- Pain Specialist
Pain specialist to support psychiatrist and staff on chronic pain symptom managements and medication consultation of pain medications. Estimated annually \$2,000

Living Well Program: OP/ICM
The Fresno Center
FY 2019-2020
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

• Alternative Healer

1093 Traditional alternative Healer to support consumers with spiritual wellness and recovering practices and methods. Estimated annually at \$2,000

\$7,660

Non Medi-Cal Client Support Expenses – Line Items 2000 - 2002.8

• Client Housing Support Expenditures (SFC 70)

2000 For cost of providing housing supports. including housing subsidies for permanent, transitional and temporary housing; master leases; motel and other housing vouchers and shelters; rental security deposits; first and last month rental payments; and eviction prevention and other fiscal housing supports. Estimated @ \$1,000 annually.

• Clothing, Food & Hygiene (SFC 72)

2002.1 To provide supports to clients, which may include food vouchers and other items necessary for daily living (such as, clothing, hygiene, etc.). Estimated @ \$1,000 annually.

• Client Flexible Support Expenditures Support (SFC 72)

2002.2 To provide supports to clients and their caregivers, may include vouchers, goods, services, and other family support services. Also maybe use for personal/community integration to assist clients in achieving their treatment goals and in supporting their integration into the larger community. Items may include, but are not limited to socialization and recreational activities. This funding may also be used for medical, dental and optical care, prescriptions, and laboratory tests when the client does not have insurance to pay for such care. Estimated @ \$3,000 annually

• Educational Support (SFC 72)

2002.3 To provide educational support to clients, which may include transportation to and from school, school materials, tuitions, and other school resources and/or activities expenses. Estimated at \$2,500.

• Household Items (SFC 72)

2002.6 To provide supports for clients with household items need. Estimated at \$1,000

• Child Care (SFC 72)

2002.8 To provide childcare supports to clients and their family to help clients meets treatment goals . Estimated @ \$2,500 annually.

\$11,000

TOTAL PROGRAM EXPENSE: \$1,465,173

Living Well Center - OP/ICM
The Fresno Center
FY 2020-2021

Budget Categories - Line Item Description (Must be itemized)		FTE %	Total Proposed Budget		
			Admin.	Direct	Total
PERSONNEL SALARIES:					
0001	Program Director	0.85	\$ -	\$ 100,796	\$ 85,676
0002	Medical Director/Psychiatrist	0.10	\$ -	\$ 265,233	\$ 26,523
0003	Clinical Supervisor	0.20	\$ -	\$ 95,481	\$ 19,096
0004	Unlicensed Psychologist	0.60	\$ -	\$ 79,574	\$ 47,744
0005	Clinical Psychologist	0.05	\$ -	\$ 110,334	\$ 5,517
0006	Licensed Clinical	0.05	\$ -	\$ 76,385	\$ 3,819
0007	Senior Rehab Counselor	0.90	\$ -	\$ 60,477	\$ 54,430
0008	Nonlicensed Clinical II	4.28	\$ -	\$ 60,477	\$ 258,844
0009	Nonlicensed Clinical I	2.70	\$ -	\$ 53,049	\$ 143,233
0010	Personal Coordinator Service/CM II	0.70	\$ -	\$ 46,726	\$ 32,708
0011	Personal Coordinator Service/CM I	2.14	\$ -	\$ 40,318	\$ 86,281
0012	Medical Biller	0.90	\$ -	\$ 47,747	\$ 42,972
0013	Peer Specialist	1.80	\$ -	\$ 31,827	\$ 57,289
SALARY TOTAL		15.27	\$0	\$1,068,424	\$864,132
PAYROLL TAXES:					
0030	OASDI @ 6.2%				\$53,576
0031	FICA/MEDICARE @ 1.45%				\$12,530
0032	SUI 1st \$7,000 @ 6.8%				\$7,269
PAYROLL TAX TOTAL			\$0	\$0	\$73,375
EMPLOYEE BENEFITS:					
0040	Retirement				\$25,924
0041	Workers Compensation				\$21,603
0042	Health Insurance (medical, vision, life, dental)				\$91,620
EMPLOYEE BENEFITS TOTAL			\$0	\$0	\$139,147
SALARY & BENEFITS GRAND TOTAL					\$1,076,654
FACILITIES/EQUIPMENT EXPENSES:					
1010	Rent/Lease Building				\$82,748
1011	Rent/Lease Equipment				\$8,466
1012	Utilities				\$11,454
1013	Building Maintenance				\$17,430
1014	Equipment purchase				\$0
FACILITY/EQUIPMENT TOTAL					\$120,098

Living Well Center - OP/ICM
The Fresno Center
FY 2020-2021

OPERATING EXPENSES:

1060	Telephone	\$6,972
1061	Answering Service	\$0
1062	Postage	\$299
1063	Printing/Reproduction	\$3,237
1064	Publications	\$0
1065	Legal Notices/Advertising	\$3,320
1066	Office Supplies & Equipment	\$9,960
1067	Household Supplies	\$0
1068	Food	\$0
1069	Program Supplies - Therapeutic	\$11,046
1070	Program Supplies - Medical	\$0
1071	Transportation of Clients	\$0
1072	Staff Mileage/vehicle maintenance	\$10,441
1073	Staff Travel (Out of County)	\$0
1074	Staff Training/Registration	\$5,000
1075	Lodging	\$0
1076	IT Support & Upgrades	\$11,620
1077		
OPERATING EXPENSES TOTAL		\$61,894

FINANCIAL SERVICES EXPENSES:

1080	Accounting/Bookkeeping	\$0
1081	External Audit	\$14,940
1082	Liability Insurance	\$4,980
1083	Administrative Overhead	\$195,531
1084	Payroll Services	\$1,992
1085	Professional Liability Insurance	\$4,150
FINANCIAL SERVICES TOTAL		\$221,593

SPECIAL EXPENSES (Consultant/Etc.):

1090	Stipend	\$1,660
1091	Nurse	\$2,000
1092	Pain Specialist	\$2,000
1093	Alternate Healer	\$2,000
1094		\$0
SPECIAL EXPENSES TOTAL		\$7,660

FIXED ASSETS:

1190	Computers & Software	\$0
1191	Furniture & Fixtures	\$0
1192	Automobile	\$0
1193	Office Landscaping	\$0
FIXED ASSETS TOTAL		\$0

Living Well Center - OP/ICM
The Fresno Center
FY 2020-2021

NON MEDI-CAL CLIENT SUPPORT EXPENSES:

2000	Client Housing Support Expenditures (SFC 70)	\$1,171
2001	Client Housing Operating Expenditures (SFC 71)	\$0
2002.1	Clothing, Food & Hygiene (SFC 72)	\$1,000
2002.2	Client Flexible Support Expenditures Support (SFC 72)	\$3,000
2002.3	Education Support (SFC 72)	\$2,500
2002.4	Employment Support (SFC 72)	\$0
2002.5	Respite Care (SFC 72)	\$0
2002.6	Household Items	\$1,000
2002.7	Utility Vouchers (SFC 72)	\$0
2002.8	Child Care (SFC 72)	\$2,500
NON MEDI-CAL CLIENT SUPPORT TOTAL		\$11,171
TOTAL PROGRAM EXPENSES		\$1,499,069

MEDI-CAL REVENUE:

MEDI-CAL REVENUE:		Units of Service	Rate	\$ Amount
3000	Mental Health Services (Individual/Family/Group Therapy)	243,000	\$2.61	\$634,230
3100	Case Management	30,000	\$2.02	\$60,600
3200	Crisis Services	200	\$3.88	\$776
3300	Medication Support	8,000	\$4.82	\$38,560
3400	Collateral	500	\$2.61	\$1,305
3500	Plan Development	5,625	\$2.61	\$14,681
3600	Assessment	22,500	\$2.61	\$58,725
3700	Rehabilitation	13,500	\$2.61	\$35,235
Estimated Specialty Mental Health Services Billing Totals		323,325		\$844,112
Estimated % of Clients that are Medi-Cal Beneficiaries				90%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				\$759,701
Federal M/Cal Share of Cost % (Federal Financial Participation-FFP)			50.00%	\$379,851
State M/Cal Share of Cost % (BH Realignment/EPSTDT)			0.00%	\$0
MEDI-CAL REVENUE TOTAL				\$379,851

OTHER REVENUE:

4100	Other - (Identify)	\$0
4200	Other - (Identify)	\$0
4300	Other - (Identify)	\$0
OTHER REVENUE TOTAL		\$0

MENTAL HEALTH SERVICES ACT (MHSA) REVENUE:

5000	Prevention & Early Intervention (PEI) Funds	\$0
5100	Community Services & Supports (CSS) Funds	\$1,119,218
5200	Innovation (INN) Funds	\$0
5300	Workforce Education & Training (WET) Funds	\$0
MHSA FUNDS TOTAL		\$1,119,218
TOTAL PROGRAM REVENUE		\$1,499,069

**Living Well Program: OP/ICM
The Fresno Center
FY 2020-2021
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

Personnel Salaries, Payroll Taxes & Employee Benefits - Line Items 0001- 0042

- 0001 • 1 Program Director @ \$8,400/mon. x 12 months x 0.85 FTE=\$85,676. The Program Director will oversee the overall development and management of the Living Wells Project and its staff.
- 0002 • 1 Medical Director/Psychiatrist @ \$22,103/mon. x 12 months x 0.10 FTE = \$26,523. The Medical Director/Psychiatrist will works closely with consumers' primary medical providers, psychologist(s), behavioral health clinicians, counselors and care coordinators to meet the clinical and non-clinical health needs Southeast Asian consumers at the Living Well Program. Duties may include but not limited to conducting psychiatric evaluation, as needed and be available on-call and if need by telehealth as necessary; conduct mental status examinations and pharmacological evaluations, prescribe psychotic medications, teach clients about side effects and monitor response to prescribed medications.
- 0003 • 1 Clinical Supervisor @ \$7,957/mon. x 12 months x 0.20 FTE = \$19,096. The Clinical Supervisor will assist in the management of the LWP program, supervise clinic staff, student interns and be responsible for the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0004 • 1 Unlicensed Psychologist @ \$6,631/mon. x 12 months x 0.60 FTE = \$47,444. A licensed or licensed eligible clinical psychologist who is bilingual and bicultural in any of the Southeast Asian languages to provide psychotherapy and clinical assessments. Also, the psychologist will assist in the development and implementation of various culturally and linguistic techniques, assessment, and methods in the program.
- 0005 • 1 Clinical psychologist @ \$9,195/mon. x 12 months x .05 FTE = \$5,517. The licensed clinician will assist the clinical supervisor in providing supervision for the clinic staff, student interns, and assist in the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0006 • 1 Licensed Clinical I @ \$6,366/mon. x 12 months x .05 FTE = \$3,819. The licensed clinician will assist the clinical supervisor in providing supervision for the clinic staff, student interns, and assist in the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0007 • 1 Senior Rehab. Counselor @ \$5,040/mon. x 12 months x .90 FTE=\$54,430. Under the supervision of license personnel, provides professional cultural and linguistic rehabilitation mental health services, which includes individual and group rehab therapy. Assist in performing assessments, case management, and performs related work as required.
- 0008 • 4.75Nonlicensed Clinical II @ \$5,040/mon. x 12 months x 0.90 FTE = \$258,844. The Mental Health Unlicensed Clinician II is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required

**Living Well Program: OP/ICM
The Fresno Center
FY 2020-2021
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

- 0008 • 3 Nonlicensed Clinical I @ \$4,421/mon. x 12 months x .90 FT = \$143,233. The Mental Health Unlicensed Clinician I is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required
- 0009 • 1 Personal Coordinator Service/Case Manager II @ \$3,894/mon. x 12 months x 0.70 FTE= \$32,708. This position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
- 0009 • 3.10 Personal Coordinator Service/Case Manager I @ \$3,360/mon. x 12 months x 0.31 FTE = \$86,281. This position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
- 0010 • 1 Medical Biller @ \$3,979/mon. x 12 months x 0.90 FTE = \$42,972. The Medical Biller will be work closely with Case Manager and clinicians to ensure that all billing are entered in a timely manager. Managing monthly billable units and revenues. Work with Program Director to make sure billable goals are met.
- 0011 • 2 Peer Specialists @ \$2,652/mon. x 12 months x 0.90 FTE = \$57,289. The Peer Specialist will be responsible for monitoring, informing, supporting, assisting, and empowering consumers and their family/caregivers who directly or indirectly receive behavioral health services; facilitating peer-to-peer assistance as a part of a team setting; conducting outreach to consumers, families/caregivers and the community; and acting in a liaison role between consumers, families/caregivers and community service providers.
- 0030 • OASDI
OASDI cost is estimated @ 6.2% x total salary = \$53,576 annually.
- 0031 • FICA/MEDICARE
FICA/MEDICARE cost is estimated @ 1.45% x total salary = \$12,530 annually.
- 0032 • SUI
SUI cost is estimated @ 1st \$7,000 x 6.8% x 15.27 FTE = \$7,269 annually.
- 0040 • Retirement
Retirement cost is estimated @ 3% x total salary = \$25,924 annually.
- 0041 • Workers Compensation
Workers Compensation cost is estimated @ 2.5% x total salary = \$21,603 annually.

**Living Well Program: OP/ICM
The Fresno Center
FY 2020-2021
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

• Health Insurance

0042 Health Insurance (medical, vision, life, and dental) cost are estimated @ \$500/staff x 15.27 FTE x 12 months = \$91,620 annually.

\$1,076,654

Facilities/Equipment Expenses – Line Items 1010-1014

• Rent/Office Lease

1010 Office Lease cost are estimated @ 6,700 sq. ft. @ \$1.24/sq.ft.. x 12 months x 83%= \$82,748

• Rent/Equipment Lease

1011 Lease copy machines cost are estimated @ \$850/month x 12 months x 83%= \$8,466.

• Utilities

1012 Utilities cost is estimated annually at \$13,800 x 83%= \$11,454

• Building Maintenance

1013 Building Maintenance includes janitorial services, pest control, material, AC services, and other maintenance cost are estimated @ \$1,750/month x 12 months x 83%= \$17,430

\$120,098

Operating Expenses - Line Items 1060-1077

• Telephone

1060 Telephone (include local, long distance, cell phone, and internet services) cost is estimated @ \$700/month x 12 months x 83%= \$6,972

• Postage

1062 Postage & Delivery cost are estimated @ \$30/month x 12 months x 83%= \$299

• Printing/Reproduction

1063 In-house printing, business cards, flyers and brochures, etc. cost are estimated @ \$325/month x 12 months x 83% = \$3,237

• Legal Notices/Advertising

1065 Marketing on ethnic magazines and radio stations and TV station cost is estimated \$4,000 annually x 83%=\$3,320.

• Office Supplies

1066 General office supplies cost is estimated @ \$1,000/month x 12 months x 83%= \$9,960

• Program Supplies - Therapeutic

1069 Supplies and materials for individual activity cost is estimated @ \$1,109/month x 12 months x 83%= \$11,046

**Living Well Program: OP/ICM
The Fresno Center
FY 2020-2021
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

- Staff Mileage/Vehicle Maintenance;
- 1072 Local travel for staff to attend meeting/trainings and maintenance for gas, vehicle maintenance, registrations, and insurance for 3 cars @ \$12,580 annually x 83%= \$10,441
- Staff Training/Registration
- 1074 Staff Training/Conference for staff cost is estimated annually @ \$5,000
- IT Support & Upgrades
- 1076 IT Support services cost is estimated @ \$14,000 annually x 83% = \$11,620

\$61,894

Financial Services Expenses – Line Items 1080-1085

- External Audit
- 1081 External Audit perform by Price Paige & Company cost is estimated \$18,00 annually x 83%=\$14,940.
- Liability Insurance
- 1082 General liability insurance cost is estimated \$6,000 annually x 83% = \$4,980.
- Administration Overhead
- Administration Overhead includes salaries and benefits for the Executive Director, Fund Developer,
- 1083 Human Resource Generalist, Program Assistants, Office Manager, Bookkeeper, and the Secretary/Receptionist to support program staff cost is estimated @ \$195,530 annually.
- Payroll Services
- 1084 Outside payroll services cost is estimated \$2,400 annually x 83% = \$1,992.
- Professional Liability Insurance
- 1085 Professional Liability Insurance cost is estimated at \$5,000 annually x 83%=\$4,150.

\$221,592

Special Expenses – Line Items 1090-1092

- Stipend
- 1090 To train 2 graduate students in mental health work force @ 500 per semester for 2 semesters x 2 @ \$2,000 annually x 83%=\$1,660.
- Nurse
- 1091 Nurse consultant with medication supports and education, and to assist psychiatrist in the administration of medication and treatment of patients as needed. Estimated annually at \$2,000
- Pain Specialist
- 1092 Pain specialist to support psychiatrist and staff on chronic pain symptom managements and medication consultation of pain medications. Estimated annually \$2,000
- Alternative Healer
- 1093 Traditional alternative Healer to support consumers with spiritual wellness and recovering practices and methods. Estimated annually at \$2,000

\$7,660

Living Well Program: OP/ICM
The Fresno Center
FY 2020-2021
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

Non Medi-Cal Client Support Expenses – Line Items 2000 - 2002.8

- Client Housing Support Expenditures (SFC 70)
For cost of providing housing supports. including housing subsidies for permanent, transitional and temporary housing; master leases; motel and other housing vouchers and shelters; rental security deposits; first and last month rental payments; and eviction prevention and other fiscal housing supports. Estimated @ \$1,171 annually.
2000
- Clothing, Food & Hygiene (SFC 72)
2002.1 To provide supports to clients, which may include food vouchers and other items necessary for daily living (such as, clothing, hygiene, etc.). Estimated @ \$1,000 annually.
- Client Flexible Support Expenditures Support (SFC 72)
To provide supports to clients and their caregivers, may include vouchers, goods, services, and other family support services. Also maybe use for personal/community integration to assist clients in achieving their treatment goals and in supporting their integration into the larger community. Items may include, but are not limited to socialization and recreational activities. This funding may also be used for medical, dental and optical care, prescriptions, and laboratory tests when the client does not have insurance to pay for such care. Estimated @ \$3,000 annually
2002.2
- Educational Support (SFC 72)
To provide educational support to clients, which may include transportation to and from school, school materials, tuitions, and other school resources and/or activities expenses. Estimated at \$2,500.
2002.3
- Household Items (SFC 72)
2002.6 To provide supports for clients with household items need. Estimated at \$1,000
- Child Care (SFC 72)
2002.8 To provide childcare supports to clients and their family to help clients meets treatment goals . Estimated @ \$2,500 annually.

\$11,171

TOTAL PROGRAM EXPENSE: \$1,499,069

Living Well Center - OP/ICM
The Fresno Center
FY 2021-2022

Budget Categories - Line Item Description (Must be itemized)		FTE %	Total Proposed Budget		
			Admin.	Direct	Total
PERSONNEL SALARIES:					
0001	Program Director	0.85	\$ -	\$ 103,820	\$ 88,247
0002	Medical Director/Psychiatrist	0.10	\$ -	\$ 273,190	\$ 27,319
0003	Clinical Supervisor	0.20	\$ -	\$ 98,345	\$ 19,669
0004	Unlicensed Psychologist	0.60	\$ -	\$ 81,961	\$ 49,177
0005	Clinical Psychologist	0.05	\$ -	\$ 113,644	\$ 5,682
0006	Licensed Clinical	0.05	\$ -	\$ 78,677	\$ 3,934
0007	Senior Rehab Counselor	0.90	\$ -	\$ 62,291	\$ 56,062
0008	Nonlicensed Clinical II	4.28	\$ -	\$ 62,291	\$ 266,607
0009	Nonlicensed Clinical I	2.70	\$ -	\$ 54,640	\$ 147,529
0010	Personal Coordinator Service/CM II	0.70	\$ -	\$ 48,128	\$ 33,689
0011	Personal Coordinator Service/CM I	2.14	\$ -	\$ 41,528	\$ 88,869
0012	Medical Biller	0.90	\$ -	\$ 49,179	\$ 44,261
0013	Peer Specialist	1.80	\$ -	\$ 32,782	\$ 59,007
SALARY TOTAL		15.27	\$0	\$1,100,477	\$890,053
PAYROLL TAXES:					
0030	OASDI @ 6.2%				\$55,183
0031	FICA/MEDICARE @ 1.45%				\$12,906
0032	SUI 1st \$7,000 @ 6.8%				\$7,269
PAYROLL TAX TOTAL			\$0	\$0	\$75,358
EMPLOYEE BENEFITS:					
0040	Retirement				\$26,702
0041	Workers Compensation				\$22,251
0042	Health Insurance (medical, vision, life, dental)				\$91,620
EMPLOYEE BENEFITS TOTAL			\$0	\$0	\$140,573
SALARY & BENEFITS GRAND TOTAL					\$1,105,984
FACILITIES/EQUIPMENT EXPENSES:					
1010	Rent/Lease Building				\$82,748
1011	Rent/Lease Equipment				\$8,466
1012	Utilities				\$11,454
1013	Building Maintenance				\$17,430
1014	Equipment purchase				\$0
FACILITY/EQUIPMENT TOTAL					\$120,098

Living Well Center - OP/ICM
The Fresno Center
FY 2021-2022

OPERATING EXPENSES:

1060	Telephone	\$6,972
1061	Answering Service	\$0
1062	Postage	\$299
1063	Printing/Reproduction	\$3,237
1064	Publications	\$0
1065	Legal Notices/Advertising	\$3,320
1066	Office Supplies & Equipment	\$9,960
1067	Household Supplies	\$0
1068	Food	\$0
1069	Program Supplies - Therapeutic	\$11,046
1070	Program Supplies - Medical	\$0
1071	Transportation of Clients	\$0
1072	Staff Mileage/vehicle maintenance	\$10,441
1073	Staff Travel (Out of County)	\$0
1074	Staff Training/Registration	\$5,000
1075	Lodging	\$0
1076	IT Support & Upgrades	\$11,620
1077		
OPERATING EXPENSES TOTAL		\$61,894

FINANCIAL SERVICES EXPENSES:

1080	Accounting/Bookkeeping	\$0
1081	External Audit	\$14,940
1082	Liability Insurance	\$4,980
1083	Administrative Overhead	\$200,264
1084	Payroll Services	\$1,992
1085	Professional Liability Insurance	\$4,150
FINANCIAL SERVICES TOTAL		\$226,326

SPECIAL EXPENSES (Consultant/Etc.):

1090	Stipend	\$1,660
1091	Nurse	\$2,000
1092	Pain Specialist	\$2,000
1093	Alternate Healer	\$2,000
1094		\$0
SPECIAL EXPENSES TOTAL		\$7,660

FIXED ASSETS:

1190	Computers & Software	\$0
1191	Furniture & Fixtures	\$0
1192	Automobile	\$0
1193	Office Landscaping	\$0
FIXED ASSETS TOTAL		\$0

Living Well Center - OP/ICM
The Fresno Center
FY 2021-2022

NON MEDI-CAL CLIENT SUPPORT EXPENSES:

2000	Client Housing Support Expenditures (SFC 70)	\$1,643
2001	Client Housing Operating Expenditures (SFC 71)	\$0
2002.1	Clothing, Food & Hygiene (SFC 72)	\$1,000
2002.2	Client Flexible Support Expenditures Support (SFC 72)	\$4,750
2002.3	Education Support (SFC 72)	\$2,500
2002.4	Employment Support (SFC 72)	\$0
2002.5	Respite Care (SFC 72)	\$0
2002.6	Household Items	\$1,000
2002.7	Utility Vouchers (SFC 72)	\$0
2002.8	Child Care (SFC 72)	\$2,500
NON MEDI-CAL CLIENT SUPPORT TOTAL		\$13,393
TOTAL PROGRAM EXPENSES		\$1,535,354

MEDI-CAL REVENUE:

MEDI-CAL REVENUE:		Units of Service	Rate	\$ Amount
3000	Mental Health Services (Individual/Family/Group Therapy)	243,000	\$2.61	\$634,230
3100	Case Management	30,000	\$2.02	\$60,600
3200	Crisis Services	200	\$3.88	\$776
3300	Medication Support	8,000	\$4.82	\$38,560
3400	Collateral	500	\$2.61	\$1,305
3500	Plan Development	5,625	\$2.61	\$14,681
3600	Assessment	22,500	\$2.61	\$58,725
3700	Rehabilitation	13,500	\$2.61	\$35,235
Estimated Specialty Mental Health Services Billing Totals		323,325		\$844,112
Estimated % of Clients that are Medi-Cal Beneficiaries				90%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				\$759,701
Federal M/Cal Share of Cost % (Federal Financial Participation-FFP)			50.00%	\$379,851
State M/Cal Share of Cost % (BH Realignment/EPSTD)			0.00%	\$0
MEDI-CAL REVENUE TOTAL				\$379,851

OTHER REVENUE:

4100	Other - (Identify)	\$0
4200	Other - (Identify)	\$0
4300	Other - (Identify)	\$0
OTHER REVENUE TOTAL		\$0

MENTAL HEALTH SERVICES ACT (MHSA) REVENUE:

5000	Prevention & Early Intervention (PEI) Funds	\$0
5100	Community Services & Supports (CSS) Funds	\$1,155,503
5200	Innovation (INN) Funds	\$0
5300	Workforce Education & Training (WET) Funds	\$0
MHSA FUNDS TOTAL		\$1,155,503
TOTAL PROGRAM REVENUE		\$1,535,354

**Living Well Program: OP/ICM
The Fresno Center
FY 2021-2022
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

Personnel Salaries, Payroll Taxes & Employee Benefits - Line Items 0001- 0042

- 0001 • 1 Program Director @ \$8,652/mon. x 12 months x 0.85 FTE=\$88,247. The Program Director will oversee the overall development and management of the Living Wells Project and its staff.
- 0002 • 1 Medical Director/Psychiatrist @ \$22,766/mon. x 12 months x 0.10 FTE = \$27,319. The Medical Director/Psychiatrist will works closely with consumers' primary medical providers, psychologist(s), behavioral health clinicians, counselors and care coordinators to meet the clinical and non-clinical health needs Southeast Asian consumers at the Living Well Program. Duties may include but not limited to conducting psychiatric evaluation, as needed and be available on-call and if need by telehealth as necessary; conduct mental status examinations and pharmacological evaluations, prescribe psychotic medications, teach clients about side effects and monitor response to prescribed medications.
- 0003 • 1 Clinical Supervisor @ \$8,195/mon. x 12 months x 0.20 FTE = \$19,669. The Clinical Supervisor will assist in the management of the LWP program, supervise clinic staff, student interns and be responsible for the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0004 • 1 Unlicensed Psychologist @ \$ 6,830/mon. x 12 months x 0.60 FTE = \$49,177. A licensed or licensed eligible clinical psychologist who is bilingual and bicultural in any of the Southeast Asian languages to provide psychotherapy and clinical assessments. Also, the psychologist will assist in the development and implementation of various culturally and linguistic techniques, assessment, and methods in the program.
- 0005 • 1 Clinical psychologist @ \$9,470/mon. x 12 months x .05 FTE = \$5,682. The licensed clinician will assist the clinical supervisor in providing supervision for the clinic staff, student interns, and assist in the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0006 • 1 Licensed Clinical I @ \$6,557/mon. x 12 months x .05 FTE = \$3,934. The licensed clinician will assist the clinical supervisor in providing supervision for the clinic staff, student interns, and assist in the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0007 • 1 Senior Rehab. Counselor @ \$5,191/mon. x 12 months x .90 FTE=\$56,062. Under the supervision of license personnel, provides professional cultural and linguistic rehabilitation mental health services, which includes individual and group rehab therapy. Assist in performing assessments, case management, and performs related work as required.
- 0008 • 4.75 Nonlicensed Clinical II @ \$5,191/mon. x 12 months x 0.90 FTE = \$266,707. The Mental Health Unlicensed Clinician II is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required

**Living Well Program: OP/ICM
The Fresno Center
FY 2021-2022
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

- 0008 • 3 Nonlicensed Clinical I @ \$4,553/mon. x 12 months x 0.90 FT = \$147,529. The Mental Health Unlicensed Clinician I is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required
- 0009 • 1 Personal Coordinator Service/Case Manager II @ \$4,011/mon. x 12months x 0.70 FTE= \$33,689. This position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
- 0009 • 3.10 Personal Coordinator Service/Case Manager I @ \$3,461/mon. x 12 months x 0.69 FTE = \$88,869. This position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
- 0010 • 1 Medical Biller @ \$4,098/mon. x 12 months x 0.90 FTE = \$44,261. The Medical Biller will be work closely with Case Manager and clinicians to ensure that all billing are entered in a timely manager. Managing monthly billable units and revenues. Work with Program Director to make sure billable goals are met.
- 0011 • 2 Peer Specialists @ \$2,732/mon. x 12 months x 0.90 FTE = \$59,007. The Peer Specialist will be responsible for monitoring, informing, supporting, assisting, and empowering consumers and their family/caregivers who directly or indirectly receive behavioral health services; facilitating peer-to-peer assistance as a part of a team setting; conducting outreach to consumers, families/caregivers and the community; and acting in a liaison role between consumers, families/caregivers and community service providers.
- 0030 • OASDI
OASDI cost is estimated @ 6.2% x total salary = \$58,183 annually.
- 0031 • FICA/MEDICARE
FICA/MEDICARE cost is estimated @ 1.45% x total salary = \$12,906 annually.
- 0032 • SUI
SUI cost is estimated @ 1st \$7,000 x 6.8% x 15.27 FTE = \$7,269 annually.
- 0040 • Retirement
Retirement cost is estimated @ 3% x total salary = \$26,702 annually.
- 0041 • Workers Compensation
Workers Compensation cost is estimated @ 2.5% x total salary = \$22,251 annually.

**Living Well Program: OP/ICM
The Fresno Center
FY 2021-2022
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

• Health Insurance

0042 Health Insurance (medical, vision, life, and dental) cost are estimated @ \$500/staff x 15.27 FTE x 12 months = \$91,620 annually.

\$1,105,984

Facilities/Equipment Expenses – Line Items 1010-1014

• Rent/Office Lease

1010 Office Lease cost are estimated @ 6,700 sq. ft. @ \$1.24/sq.ft.. x 12 months x 83%= \$82,748

• Rent/Equipment Lease

1011 Lease copy machines cost are estimated @ \$850/month x 12 months x 83%= \$8,466.

• Utilities

1012 Utilities cost is estimated annually at \$13,800 x 83%= \$11,454

• Building Maintenance

1013 Building Maintenance includes janitorial services, pest control, material, AC services, and other maintenance cost are estimated @ \$1,750/month x 12 months x 83%= \$17,430

\$120,098

Operating Expenses - Line Items 1060-1077

• Telephone

1060 Telephone (include local, long distance, cell phone, and internet services) cost is estimated @ \$700/month x 12 months x 83%= \$6,972

• Postage

1062 Postage & Delivery cost are estimated @ \$30/month x 12 months x 83%= \$299

• Printing/Reproduction

1063 In-house printing, business cards, flyers and brochures, etc. cost are estimated @ \$325/month x 12 months x 83% = \$3,237

• Legal Notices/Advertising

1065 Marketing on ethnic magazines and radio stations and TV station cost is estimated annually x 83%=\$3,320.

• Office Supplies

1066 General office supplies cost is estimated @ \$1,000/month x 12 months @ 83%= \$9,960 annually.

• Program Supplies - Therapeutic

1069 Supplies and materials for individual activity cost is estimated @ \$1,109/month x 12 months @ 83%= \$11,046 annually.

• Staff Mileage/Vehicle Maintenance;

1072 Local travel for staff to attend meeting/trainings and maintenance for gas, vehicle maintenance, registrations, and insurance for 3 cars @ \$12,580 annually x 83%= \$10,441

**Living Well Program: OP/ICM
The Fresno Center
FY 2021-2022
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

- Staff Training/Registration

1074 Staff Training/Conference for staff cost is estimated annually @ \$5,000

- IT Support & Upgrades

1076 IT Support services cost is estimated @ \$14,000 annually x 83% = \$11,620

\$61,894

Financial Services Expenses – Line Items 1080-1085

- External Audit

1081 External Audit perform by Price Paige & Company cost is estimated @ \$18,000 annually x 83%=\$14,940.

- Liability Insurance

1082 General liability insurance cost is estimated@ \$6,000 annually x 83% \$4,980.

- Administration Overhead

Administration Overhead includes salaries and benefits for the Executive Director, Fund Developer, Human Resource Generalist, Program Assistants, Office Manager, Bookkeeper, and the Secretary/Receptionist to support program staff cost is estimated @ \$200,264 annually.

1083

- Payroll Services

1084 Outside payroll services cost is estimated @2,400 annually x 83% = \$1,992.

- Professional Liability Insurance

1085 Professional Liability Insurance cost is estimated at \$5,000 annually x 83%=\$4,150.

\$226,326

Special Expenses – Line Items 1090-1092

- Stipend

1090 To train 2 graduate students in mental health work force @ 500 per semester for 2 semesters x 2 @ \$2,000 annually at 83%=\$1,660.

- Nurse

1091 Nurse consultant with medication supports and education, and to assist psychiatrist in the administration of medication and treatment of patients as needed. Estimated annually at \$2,000

- Pain Specialist

1092 Pain specialist to support psychiatrist and staff on chronic pain symptom managements and medication consultation of pain medications. Estimated annually \$2,000

- Alternative Healer

1093 Traditional alternative Healer to support consumers with spiritual wellness and recovering practices and methods. Estimated annually at \$2,000

\$7,660

Living Well Program: OP/ICM
The Fresno Center
FY 2021-2022
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

Non Medi-Cal Client Support Expenses – Line Items 2000 - 2002.8

- Client Housing Support Expenditures (SFC 70)
For cost of providing housing supports. including housing subsidies for permanent, transitional and temporary housing; master leases; motel and other housing vouchers and shelters; rental security deposits; first and last month rental payments; and eviction prevention and other fiscal housing supports. Estimated @ \$1,643 annually.
2000
- Clothing, Food & Hygiene (SFC 72)
To provide supports to clients, which may include food vouchers and other items necessary for daily living (such as, clothing, hygiene, etc.). Estimated @ \$1,000 annually.
2002.1
- Client Flexible Support Expenditures Support (SFC 72)
To provide supports to clients and their caregivers, may include cash payments, vouchers, goods, services, and other family support services. Also maybe use for personal/community integration to assist clients in achieving their treatment goals and in supporting their integration into the larger community. Items may include, but are not limited to socialization and recreational activities. This funding may also be used for medical, dental and optical care, prescriptions, and laboratory tests when the client does not have insurance to pay for such care. Estimated @ \$4,750 annually
2002.2
- Educational Support (SFC 72)
To provide educational support to clients, which may include transportation to and from school, school materials, tuitions, and other school resources and/or activities expenses. Estimated at \$2,500.
2002.3
- Household Items (SFC 72)
To provide supports for clients with household items need. Estimated at \$1,000
2002.6
- Child Care (SFC 72)
To provide childcare supports to clients and their family to help clients meets treatment goals . Estimated @ \$2,500 annually.
2002.8

\$13,393

TOTAL PROGRAM EXPENSE: \$1,535,354

Living Well Center - OP/ICM
The Fresno Center
FY 2022-2023

Budget Categories - Line Item Description (Must be itemized)		FTE %	Total Proposed Budget		
			Admin.	Direct	Total
PERSONNEL SALARIES:					
0001	Program Director	0.85	\$ -	\$ 106,935	\$ 90,894
0002	Medical Director/Psychiatrist	0.10	\$ -	\$ 281,386	\$ 28,139
0003	Clinical Supervisor	0.20	\$ -	\$ 101,295	\$ 20,259
0004	Unlicensed Psychologist	0.60	\$ -	\$ 84,420	\$ 50,652
0005	Clinical Psychologist	0.05	\$ -	\$ 117,053	\$ 5,853
0006	Licensed Clinical	0.05	\$ -	\$ 81,037	\$ 4,052
0007	Senior Rehab Counselor	0.90		\$ 64,160	\$ 57,744
0008	Nonlicensed Clinical II	4.28	\$ -	\$ 64,160	\$ 274,604
0009	Nonlicensed Clinical I	2.70	\$ -	\$ 56,279	\$ 151,954
0010	Personal Coordinator Service/CM II	0.70	\$ -	\$ 49,572	\$ 34,700
0011	Personal Coordinator Service/CM I	2.14	\$ -	\$ 42,774	\$ 91,536
0012	Medical Biller	0.90	\$ -	\$ 50,654	\$ 45,589
0013	Peer Specialist	1.80	\$ -	\$ 33,765	\$ 60,778
SALARY TOTAL		15.27	\$0	\$1,133,490	\$916,753
PAYROLL TAXES:					
0030	OASDI @ 6.2%				\$56,839
0031	FICA/MEDICARE @ 1.45%				\$13,293
0032	SUI 1st \$7,000 @ 6.8%				\$7,269
PAYROLL TAX TOTAL			\$0	\$0	\$77,400
EMPLOYEE BENEFITS:					
0040	Retirement				\$27,503
0041	Workers Compensation				\$22,919
0042	Health Insurance (medical, vision, life, dental)				\$91,620
EMPLOYEE BENEFITS TOTAL			\$0	\$0	\$142,041
SALARY & BENEFITS GRAND TOTAL					\$1,136,194
FACILITIES/EQUIPMENT EXPENSES:					
1010	Rent/Lease Building				\$82,748
1011	Rent/Lease Equipment				\$8,466
1012	Utilities				\$11,454
1013	Building Maintenance				\$17,430
1014	Equipment purchase				\$0
FACILITY/EQUIPMENT TOTAL					\$120,098

Living Well Center - OP/ICM
The Fresno Center
FY 2022-2023

OPERATING EXPENSES:

1060	Telephone	\$6,972
1061	Answering Service	\$0
1062	Postage	\$299
1063	Printing/Reproduction	\$3,237
1064	Publications	\$0
1065	Legal Notices/Advertising	\$3,320
1066	Office Supplies & Equipment	\$10,624
1067	Household Supplies	\$0
1068	Food	\$0
1069	Program Supplies - Therapeutic	\$10,962
1070	Program Supplies - Medical	\$0
1071	Transportation of Clients	\$0
1072	Staff Mileage/vehicle maintenance	\$10,441
1073	Staff Travel (Out of County)	\$0
1074	Staff Training/Registration	\$5,000
1075	Lodging	\$0
1076	IT Support & Upgrades	\$11,620
1077		
OPERATING EXPENSES TOTAL		\$62,474

FINANCIAL SERVICES EXPENSES:

1080	Accounting/Bookkeeping	\$0
1081	External Audit	\$14,940
1082	Liability Insurance	\$4,980
1083	Administrative Overhead	\$205,423
1084	Payroll Services	\$1,992
1085	Professional Liability Insurance	\$4,150
FINANCIAL SERVICES TOTAL		\$231,485

SPECIAL EXPENSES (Consultant/Etc.):

1090	Stipend	\$1,660
1091	Nurse	\$2,000
1092	Pain Specialist	\$2,000
1093	Alternate Healer	\$2,000
1094		\$0
SPECIAL EXPENSES TOTAL		\$7,660

FIXED ASSETS:

1190	Computers & Software	\$0
1191	Furniture & Fixtures	\$0
1192	Automobile	\$0
1193	Office Landscaping	\$0
FIXED ASSETS TOTAL		\$0

Living Well Center - OP/ICM
The Fresno Center
FY 2022-2023

NON MEDI-CAL CLIENT SUPPORT EXPENSES:

2000	Client Housing Support Expenditures (SFC 70)	\$3,000
2001	Client Housing Operating Expenditures (SFC 71)	\$0
2002.1	Clothing, Food & Hygiene (SFC 72)	\$1,000
2002.2	Client Flexible Support Expenditures Support (SFC 72)	\$7,000
2002.3	Education Support (SFC 72)	\$2,500
2002.4	Employment Support (SFC 72)	\$0
2002.5	Respite Care (SFC 72)	\$0
2002.6	Household Items	\$1,000
2002.7	Utility Vouchers (SFC 72)	\$0
2002.8	Child Care (SFC 72)	\$2,500
NON MEDI-CAL CLIENT SUPPORT TOTAL		\$17,000
TOTAL PROGRAM EXPENSES		\$1,574,911

MEDI-CAL REVENUE:

MEDI-CAL REVENUE:		Units of Service	Rate	\$ Amount
3000	Mental Health Services (Individual/Family/Group Therapy)	243,000	\$2.61	\$634,230
3100	Case Management	30,000	\$2.02	\$60,600
3200	Crisis Services	200	\$3.88	\$776
3300	Medication Support	8,000	\$4.82	\$38,560
3400	Collateral	500	\$2.61	\$1,305
3500	Plan Development	5,625	\$2.61	\$14,681
3600	Assessment	22,500	\$2.61	\$58,725
3700	Rehabilitation	13,500	\$2.61	\$35,235
Estimated Specialty Mental Health Services Billing Totals		323,325		\$844,112
Estimated % of Clients that are Medi-Cal Beneficiaries				90%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				\$759,701
Federal M/Cal Share of Cost % (Federal Financial Participation-FFP)			50.00%	\$379,851
State M/Cal Share of Cost % (BH Realignment/EPSTD)			0.00%	\$0
MEDI-CAL REVENUE TOTAL				\$379,851

OTHER REVENUE:

4100	Other - (Identify)	\$0
4200	Other - (Identify)	\$0
4300	Other - (Identify)	\$0
OTHER REVENUE TOTAL		\$0

MENTAL HEALTH SERVICES ACT (MHSA) REVENUE:

5000	Prevention & Early Intervention (PEI) Funds	\$0
5100	Community Services & Supports (CSS) Funds	\$1,195,060
5200	Innovation (INN) Funds	\$0
5300	Workforce Education & Training (WET) Funds	\$0
MHSA FUNDS TOTAL		\$1,195,060
TOTAL PROGRAM REVENUE		\$1,574,911

**Living Well Program: OP/ICM
The Fresno Center
2022- 2023 CONTRACT PERIOD
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

Personnel Salaries, Payroll Taxes & Employee Benefits - Line Items 0001- 0042

- 0001 • 1 Program Director @ \$8,911/mon. x 12 months x 0.83 FTE=\$90,894. The Program Director will oversee the overall development and management of the Living Wells Project and its staff.
- 0002 • 1 Medical Director/Psychiatrist @ \$23,449/mon. x 12 months x 0.83 FTE = \$28,139. The Medical Director/Psychiatrist will works closely with consumers' primary medical providers, psychologist(s), behavioral health clinicians, counselors and care coordinators to meet the clinical and non-clinical health needs Southeast Asian consumers at the Living Well Program. Duties may include but not limited to conducting psychiatric evaluation, as needed and be available on-call and if need by telehealth as necessary; conduct mental status examinations and pharmacological evaluations, prescribe psychotic medications, teach clients about side effects and monitor response to prescribed medications.
- 0003 • 1 Clinical Supervisor @ \$8,441/mon. x 12 months x 0.20 FTE = \$20,259. The Clinical Supervisor will assist in the management of the LWP program, supervise clinic staff, student interns and be responsible for the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0004 • 1 Unlicensed Psychologist @ \$ 7,035/mon. x 12 months x 0.60 FTE = \$50,259. A licensed or licensed eligible clinical psychologist who is bilingual and bicultural in any of the Southeast Asian languages to provide psychotherapy and clinical assessments. Also, the psychologist will assist in the development and implementation of various culturally and linguistic techniques, assessment, and methods in the program.
- 0005 • 1 Clinical psychologist @ \$9,754/mon. x 12 months x .05 FTE = \$5,853. The licensed clinician will assist the clinical supervisor in providing supervision for the clinic staff, student interns, and assist in the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0006 • 1 Licensed Clinical I @ \$6,753/mon. x 12 months x .05 FTE = \$4,052. The licensed clinician will assist the clinical supervisor in providing supervision for the clinic staff, student interns, and assist in the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0007 • 1 Senior Rehab. Counselor @ \$5,347/mon. x 12 months x .90 FTE=\$57,744. Under the supervision of license personnel, provides professional cultural and linguistic rehabilitation mental health services, which includes individual and group rehab therapy. Assist in performing assessments, case management, and performs related work as required.
- 0008 • 4.75 Nonlicensed Clinical II @ \$5,347/mon. x 12 months x 0.90 FTE = \$274604. The Mental Health Unlicensed Clinician II is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required

**Living Well Program: OP/ICM
The Fresno Center
2022- 2023 CONTRACT PERIOD
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

- 0008 • 3 Nonlicensed Clinical I @ \$4,690/mon. x 12 months x 0.90 FT = \$151,954. The Mental Health Unlicensed Clinician I is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required
- 0009 • 1 Personal Coordinator Service/Case Manager II @ \$4,131/mon. x 12months x .70 FTE= \$34,700. This position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
- 0009 • 3.10 Personal Coordinator Service/Case Manager I @ \$3,564/mon. x 12 months x 0.69 FTE = \$91,536. This position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
- 0010 • 1 Medical Biller @ \$4,221/mon. x 12 months x 0.90 FTE = \$45,589. The Medical Biller will be work closely with Case Manager and clinicians to ensure that all billing are entered in a timely manager. Managing monthly billable units and revenues. Work with Program Director to make sure billable goals are met.
- 0011 • 2 Peer Specialists @ \$2,814/mon. x 12 months x 0.90 FTE = \$60,778. The Peer Specialist will be responsible for monitoring, informing, supporting, assisting, and empowering consumers and their family/caregivers who directly or indirectly receive behavioral health services; facilitating peer-to-peer assistance as a part of a team setting; conducting outreach to consumers, families/caregivers and the community; and acting in a liaison role between consumers, families/caregivers and community service providers.
- 0030 • OASDI
OASDI cost is estimated @ 6.2% x total salary = \$56,839 annually.
- 0031 • FICA/MEDICARE
FICA/MEDICARE cost is estimated @ 1.45% x total salary = \$13,293 annually.
- 0032 • SUI
SUI cost is estimated @ 1st \$7,000 x 6.8% x 15.27 FTE = \$7,269 annually.
- 0040 • Retirement
Retirement cost is estimated @ 3% x total salary = \$27,503 annually.
- 0041 • Workers Compensation
Workers Compensation cost is estimated @ 2.5% x total salary = \$22,919 annually.

**Living Well Program: OP/ICM
The Fresno Center
2022- 2023 CONTRACT PERIOD
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

• Health Insurance

0042 Health Insurance (medical, vision, life, and dental) cost are estimated @ \$500/staff x 15.27 FTE x 12 months = \$91,620 annually.

\$1,136,194

Facilities/Equipment Expenses – Line Items 1010-1014

• Rent/Office Lease

1010 Office Lease cost are estimated @ 6,700 sq. ft. @ \$1.24/sq.ft. x 12 months x 83%= \$82,748

• Rent/Equipment Lease

1011 Lease copy machines cost are estimated @ \$850/month x 12 months x 83%= \$8,466.

• Utilities

1012 Utilities cost is estimated annually at \$13,800 x 83%= \$11,454

• Building Maintenance

1013 Building Maintenance includes janitorial services, pest control, material, AC services, and other maintenance cost are estimated @ \$1,750/month x 12 months x 83%= \$17,430

\$120,098

Operating Expenses - Line Items 1060-1077

• Telephone

1060 Telephone (include local, long distance, cell phone, and internet services) cost is estimated @ \$700/month x 12 months x 83%= \$6,972

• Postage

1062 Postage & Delivery cost are estimated @ \$30/month x 12 months x 83%= \$299

• Printing/Reproduction

1063 In-house printing, business cards, flyers and brochures, etc. cost are estimated @ \$325/month x 12 months x 83% = \$3,237

• Legal Notices/Advertising

1065 Marketing on ethnic magazines and radio stations and TV station cost is estimated @ \$4,000 annually x 83%=\$3,320.

• Office Supplies

1066 General office supplies cost is estimated @ \$1,066.7/month x 12 months x 83%= \$10,962 annually.

• Program Supplies - Therapeutic

1069 Supplies and materials for individual activity cost is estimated @ \$1,100.6/month x 12 months x 83%= \$10,962

• Staff Mileage/Vehicle maintenance;

1072 Local travel for staff to attend meeting/trainings and maintenance for gas, vehicle maintenance, registrations, and insurance for 3 cars @ \$12,580 annually x83%=\$10,441

**Living Well Program: OP/ICM
The Fresno Center
2022- 2023 CONTRACT PERIOD
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

- Staff Training/Registration

1074 Staff Training/Conference for staff cost is estimated annually @ \$5,000

- IT Support & Upgrades

1076 IT Support services cost is estimated @ \$14,000 annually x 83% = \$11,620

\$62,474

Financial Services Expenses – Line Items 1080-1085

- External Audit

1081 External Audit perform by Price Paige & Company cost is estimated annually @ 83%=\$14,940.

- Liability Insurance

1082 General liability insurance cost is estimated \$6,000 annually x 83% \$4,980.

- Administration Overhead

Administration Overhead includes salaries and benefits for the Executive Director, Fund Developer, Human Resource Generalist, Program Assistants, Office Manager, Bookkeeper, and the Secretary/Receptionist to support program staff cost is estimated @ \$205,423 annually.

- Payroll Services

1084 Outside payroll services cost is estimated \$2,400 annually @ 83% = \$1,992.

- Professional Liability Insurance

1085 Professional Liability Insurance cost is estimated at \$5,000 annually x 83%=\$4,150.

\$231,485

Special Expenses – Line Items 1090-1092

- Stipend

1090 To train 2 graduate students in mental health work force @ 500 per semester for 2 semesters x 2 @ \$2,000 annually x 83%=\$1,660.

- Nurse

1091 Nurse consultant with medication supports and education, and to assist psychiatrist in the administration of medication and treatment of patients as needed. Estimated annually at \$2,000

- Pain Specialist

1092 Pain specialist to support psychiatrist and staff on chronic pain symptom managements and medication consultation of pain medications. Estimated annually \$2,000

- Alternative Healer

1093 Traditional alternative Healer to support consumers with spiritual wellness and recovering practices and methods. Estimated annually at \$2,000

\$7,660

Living Well Program: OP/ICM
The Fresno Center
2022- 2023 CONTRACT PERIOD
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

Non Medi-Cal Client Support Expenses – Line Items 2000 - 2002.8

- Client Housing Support Expenditures (SFC 70)
For cost of providing housing supports. including housing subsidies for permanent, transitional and temporary housing; master leases; motel and other housing vouchers and shelters; rental security deposits; first and last month rental payments; and eviction prevention and other fiscal housing supports. Estimated @ \$3,000 annually.
2000
- Clothing, Food & Hygiene (SFC 72)
To provide supports to clients, which may include food vouchers and other items necessary for daily living (such as, clothing, hygiene, etc.). Estimated @ \$1,000 annually.
2002.1
- Client Flexible Support Expenditures Support (SFC 72)
To provide supports to clients and their caregivers, may include vouchers, goods, services, and other family support services. Also maybe use for personal/community integration to assist clients in achieving their treatment goals and in supporting their integration into the larger community. Items may include, but are not limited to socialization and recreational activities. This funding may also be used for medical, dental and optical care, prescriptions, and laboratory tests when the client does not have insurance to pay for such care. Estimated @ \$7,000 annually
2002.2
- Educational Support (SFC 72)
To provide educational support to clients, which may include transportation to and from school, school materials, tuitions, and other school resources and/or activities expenses. Estimated at \$2,500.
2002.3
- Household Items (SFC 72)
To provide supports for clients with household items need. Estimated at \$1,000
2002.6
- Child Care (SFC 72)
To provide childcare supports to clients and their family to help clients meets treatment goals . Estimated @ \$2,500 annually.
2002.8

\$17,000

TOTAL PROGRAM EXPENSE: \$1,574,911

Living Well Center - FSP
The Fresno Center
January 1, 2019 - June 30, 2019

Budget Categories - Line Item Description (Must be itemized)		FTE %	Total Proposed Budget		
			Admin.	Direct	Total
PERSONNEL SALARIES:					
0001	Program Director	0.10	\$ -	\$ 95,004	\$ 4,750
0002	Medical Director/Psychiatrist	0.10	\$ -	\$ 250,008	\$ 12,500
0003	Clinical Supervisor	0.05	\$ -	\$ 90,000	\$ 2,250
0004	Unlicensed Psychologist	0.40	\$ -	\$ 75,000	\$ 15,000
0005	Clinical Psychologist	0.05	\$ -	\$ 104,004	\$ 2,600
0006	Licensed Clinical	0.05	\$ -	\$ 72,804	\$ 1,820
0007	Senior Rehab Counselor	0.10	\$ -	\$ 57,000	\$ 2,850
0008	Nonlicensed Clinical II	0.47	\$ -	\$ 57,000	\$ 13,395
0009	Nonlicensed Clinical I	0.30	\$ -	\$ 50,004	\$ 7,501
0010	Personal Coordinator Service/CM II	0.30	\$ -	\$ 44,004	\$ 6,601
0011	Personal Coordinator Service/CM I	0.96	\$ -	\$ 38,004	\$ 18,242
0012	Medical Biller	0.10	\$ -	\$ 45,000	\$ 2,250
0013	Peer Specialist	0.20	\$ -	\$ 30,000	\$ 3,000
SALARY TOTAL		3.18	\$0	\$1,007,832	\$92,759
PAYROLL TAXES:					
0030	OASDI @ 6.2%				\$5,751
0031	FICA/MEDICARE @ 1.45%				\$1,345
0032	SUI 1st \$7,000 @ 6.8%				\$1,680
PAYROLL TAX TOTAL			\$0	\$0	\$8,776
EMPLOYEE BENEFITS:					
0040	Retirement				\$2,783
0041	Workers Compensation				\$2,319
0042	Health Insurance (medical, vision, life, dental)				\$9,540
EMPLOYEE BENEFITS TOTAL			\$0	\$0	\$14,642
SALARY & BENEFITS GRAND TOTAL					\$116,177
FACILITIES/EQUIPMENT EXPENSES:					
1010	Rent/Lease Building				\$8,474
1011	Rent/Lease Equipment				\$867
1012	Utilities				\$1,428
1013	Building Maintenance				\$1,785
1014	Equipment purchase				\$0
FACILITY/EQUIPMENT TOTAL					\$12,554

Living Well Center - FSP
The Fresno Center
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OPERATING EXPENSES:

1060	Telephone	\$714
1061	Answering Service	\$0
1062	Postage	\$31
1063	Printing/Reproduction	\$332
1064	Publications	\$0
1065	Legal Notices/Advertising	\$340
1066	Office Supplies & Equipment	\$1,020
1067	Household Supplies	\$0
1068	Food	\$0
1069	Program Supplies - Therapeutic	\$1,045
1070	Program Supplies - Medical	\$0
1071	Transportation of Clients	\$0
1072	Staff Mileage/vehicle maintenance	\$1,069
1073	Staff Travel (Out of County)	\$0
1074	Staff Training/Registration	\$0
1075	Lodging	\$0
1076	IT Support & Upgrades	\$1,190
1077		
OPERATING EXPENSES TOTAL		\$5,741

FINANCIAL SERVICES EXPENSES:

1080	Accounting/Bookkeeping	\$0
1081	External Audit	\$1,530
1082	Liability Insurance	\$510
1083	Administrative Overhead	\$23,267
1084	Payroll Services	\$204
1085	Professional Liability Insurance	\$425
FINANCIAL SERVICES TOTAL		\$25,936

SPECIAL EXPENSES (Consultant/Etc.):

1090	Stipend	\$170
1091	Nurse	\$1,500
1092	Pain Specialist	\$1,500
1093	Alternate Healer	\$1,500
1094	Medication Supports	\$0
SPECIAL EXPENSES TOTAL		\$4,670

FIXED ASSETS:

1190	Computers & Software	\$0
1191	Furniture & Fixtures	\$0
1192	Office Landscaping	\$0
1193	Vehicle	\$0
FIXED ASSETS TOTAL		\$0

Living Well Center - FSP
The Fresno Center
January 1, 2019 - June 30, 2019

NON MEDI-CAL CLIENT SUPPORT EXPENSES:

2000	Client Housing Support Expenditures (SFC 70)	\$2,000
2001	Client Housing Operating Expenditures (SFC 71)	\$0
2002.1	Clothing, Food & Hygiene (SFC 72)	\$1,800
2002.2	Client Flexible Support Expenditures Support (SFC 72)	\$3,000
2002.3	Education Support (SFC 72)	\$2,500
2002.4	Employment Support (SFC 72)	\$0
2002.5	Respite Care (SFC 72)	\$0
2002.6	Household Items	\$1,500
2002.7	Utility Vouchers (SFC 72)	\$2,500
2002.8	Child Care (SFC 72)	\$0
NON MEDI-CAL CLIENT SUPPORT TOTAL		\$13,300
TOTAL PROGRAM EXPENSES		\$178,377

MEDI-CAL REVENUE:

MEDI-CAL REVENUE:		Units of Service	Rate	\$ Amount
3000	Mental Health Services (Individual/Family/Group Therapy)	13,500	\$2.61	\$35,235
3100	Case Management	10,000	\$2.02	\$20,200
3200	Crisis Services	400	\$3.88	\$1,552
3300	Medication Support	3,500	\$4.82	\$16,870
3400	Collateral	250	\$2.61	\$653
3500	Plan Development	313	\$2.61	\$816
3600	Assessment	1,250	\$2.61	\$3,263
3700	Rehabilitation	7,500	\$2.61	\$19,575
Estimated Specialty Mental Health Services Billing Totals		36,713		\$98,163
Estimated % of Clients that are Medi-Cal Beneficiaries				90%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				\$88,346
Federal M/Cal Share of Cost % (Federal Financial Participation-FFP)			50.00%	\$44,173
State M/Cal Share of Cost % (BH Realignment/EPSTD)			0.00%	\$0
MEDI-CAL REVENUE TOTAL				\$44,173

OTHER REVENUE:

4100	Other - (Identify)	\$0
4200	Other - (Identify)	\$0
4300	Other - (Identify)	\$0
OTHER REVENUE TOTAL		\$0

MENTAL HEALTH SERVICES ACT (MHSA) REVENUE:

5000	Prevention & Early Intervention (PEI) Funds	\$0
5100	Community Services & Supports (CSS) Funds	\$134,204
5200	Innovation (INN) Funds	\$0
5300	Workforce Education & Training (WET) Funds	\$0
MHSA FUNDS TOTAL		\$134,204
TOTAL PROGRAM REVENUE		\$178,377

**Living Well Center - FSP
The Fresno Center
January 1, 2019 - June 30, 2019
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

Personnel Salaries, Payroll Taxes & Employee Benefits - Line Items 0001- 0042

- 0001 • 1 Program Director @ \$7,917/mon. x 6 months x 0.10 FTE=\$4,750. The Program Director will oversee the overall development and management of the Living Wells Project and its staff.
- 0002 • 1 Medical Director/Psychiatrist @ \$20,834/mon. x 6 months x 0.10 FTE = \$12,500. The Medical Director/Psychiatrist will works closely with consumers' primary medical providers, psychologist(s), behavioral health clinicians, counselors and care coordinators to meet the clinical and non-clinical health needs Southeast Asian consumers at the Living Well Program. Duties may include but not limited to conducting psychiatric evaluation, as needed and be available on-call and if need by telehealth as necessary; conduct mental status examinations and pharmacological evaluations, prescribe psychotic medications, teach clients about side effects and monitor response to prescribed medications.
- 0003 • 1 Clinical Supervisor @ \$7,500/mon. x 6 months x 0.05 FTE = \$2,250. The Clinical Supervisor will assist in the management of the LWP program, supervise clinic staff, student interns and be responsible for the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0004 • 1 Unlicensed Psychologist @ \$ 6,250/mon. x 6 months x 0.40 FTE = \$15,000. A licensed or licensed eligible clinical psychologist who is bilingual and bicultural in any of the Southeast Asian languages to provide psychotherapy and clinical assessments. Also, the psychologist will assist in the development and implementation of various culturally and linguistic techniques, assessment, and methods in the program.
- 0005 • 1 Clinical psychologist @ \$8,667/mon. x 6 months x .05 FTE = \$2,600. The licensed clinician will assist the clinical supervisor in providing supervision for the clinic staff, student interns, and assist in the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0006 • 1 Licensed Clinical I @ \$6,067/mon. x 6 months x .05 FTE = \$1,820. The licensed clinician will assist the clinical supervisor in providing supervision for the clinic staff, student interns, and assist in the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0007 Senior Rehab. Counselor @ \$4,750/mon. x 6 months x .10 FTE=\$2,850. Under the supervision of licensed personnel, provides professional cultural and linguistic rehabilitation mental health services, which includes individual and group rehab therapy. Assist in performing assessments, case management, and performs related work as required.
- 0008 • 4.75 Nonlicensed Clinical II @ \$4,750/mon. x 6 months x 0.10 FTE = \$13,395. The Mental Health Unlicensed Clinician II is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required

**Living Well Center - FSP
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BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

- 0008 • 3 Nonlicensed Clinical I @ \$4,167/mon. x 6 months x 0.10 FTE= \$7,501. The Mental Health Unlicensed Clinician I is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required
- 0009 • 1 Personal Coordinator Service/Case Manager II @ \$3,667/mon. x 6 months x 0.30 FTE= \$6,601. This position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
- 0009 • 3.10 Personal Coordinator Service/Case Manager I @ \$3,167/mon. x 6 months 0.31 FTE = \$18,242. This position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
- 0010 • 1 Medical Biller @ \$3,750/mon. x 6 months x 0.10 FTE = \$2,250. The Medical Biller will be work closely with Case Manager and clinicians to ensure that all billing are entered in a timely manager. Managing monthly billable units and revenues. Work with Program Director to make sure billable goals are met.
- 0011 • 2 Peer Specialists @ \$2,500/mon. x 6 months x 0.10 FTE = \$3,000. The Peer Specialist will be responsible for monitoring, informing, supporting, assisting, and empowering consumers and their family/caregivers who directly or indirectly receive behavioral health services; facilitating peer-to-peer assistance as a part of a team setting; conducting outreach to consumers, families/caregivers and the community; and acting in a liaison role between consumers, families/caregivers and community service providers.
- 0030 • OASDI
OASDI cost is estimated @ 6.2% x total salary = \$5,751 annually.
- 0031 • FICA/MEDICARE
FICA/MEDICARE cost is estimated @ 1.45% x total salary = \$1,345 annually.
- 0032 • SUI
SUI cost is estimated @ 1st \$7,000 x 6.8% x 3.18 FTE = \$1,680 annually.
- 0040 • Retirement
Retirement cost is estimated @ 3% x total salary = \$2,783 annually.
- 0041 • Workers Compensation
Workers Compensation cost is estimated @ 2.5% x total salary = \$2,319 annually.

Living Well Center - FSP
The Fresno Center
January 1, 2019 - June 30, 2019
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

• Health Insurance

0042 Health Insurance (medical, vision, life, and dental) cost are estimated @ \$500/staff x 3.18 FTE x 6 months = \$9,540 annually.

\$116,177

Facilities/Equipment Expenses – Line Items 1010-1014

• Rent/Office Lease

1010 Office Lease cost are estimated @ 6,700 sq. ft. @ \$1.24/sq.ft... x 6 months x 17%= \$8,474

• Rent/Equipment Lease

1011 Lease copy machines cost are estimated @ \$850/month x 6 months x 17%= \$867

• Utilities

1012 Utilities cost is estimated annually at \$1,400/month x 6 months x 17%= \$1,428.

• Building Maintenance

1013 Building Maintenance includes janitorial services, pest control, material, AC services, and other maintenance cost are estimated @ \$1,750/month x 6 months x 17%= \$1,785

\$12,554

Operating Expenses - Line Items 1060-1077

• Telephone

1060 Telephone (include local, long distance, cell phone, and internet services) cost is estimated @ \$700/month x 6 months x 17%= \$714 annually.

• Postage

1062 Postage & Delivery cost are estimated @ \$30/month x 6 months x 17%= \$31 annually

• Printing/Reproduction

1063 In-house printing, business cards, flyers and brochures, etc. cost are estimated @ \$325/month x 6 months x 17% = \$332 annually.

• Legal Notices/Advertising

1065 Marketing on ethnic magazines and radio stations and TV station cost is estimated \$2,000 annually @ 17% x 6 months= \$340

• Office Supplies

1066 General office supplies cost is estimated @ \$1,000/month x 6 months x 17%= \$1,020 annually.

• Program Supplies - Therapeutic

1069 Supplies and materials for individual activity cost is estimated @ \$1,025/month x 6 months x 17%= \$1,045 annually.

• Staff Mileage/Vehicle Maintenance;

1072 Local travel for staff to attend meeting/trainings and maintenance for gas, vehicle maintenance, registrations, and insurance for 3 cars \$12,576 annually x 17% x 6 months=\$1,069.

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BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

- 1076 • IT Support & Upgrades
IT Support services cost is estimated @ \$14,000 annually x 17% x 6 months = \$1,190

\$5,741

Financial Services Expenses – Line Items 1080-1085

- 1081 • External Audit
External Audit perform by Price Paige & Company cost is estimated \$18,000 annually x 17% x 6 months= \$1,530
- 1082 • Liability Insurance
General liability insurance cost is estimated @ \$6,000 annually x 17% x 6 months = \$510
- 1083 • Administration Overhead
Administration Overhead includes salaries and benefits for the Executive Director, Chief Development Officer, Human Resource Generalist, Program Assistants, Office Manager, Bookkeeper, and the Secretary/Receptionist to support program staff cost is estimated @ \$23,267 annually.
- 1084 • Payroll Services
Outside payroll services cost is estimated @ \$2,400 annually @ 17% x 6 months = \$204.
- 1085 • Professional Liability Insurance
Professional Liability Insurance cost is estimated at \$5,000 annually @ 17% x 6 months= \$425.

\$25,936

Special Expenses – Line Items 1090-1092

- 1090 • Stipend
To train 2 graduate students in mental health work force @ 500 per semester for 2 semesters x 2 @ \$2,000 annually x 17%= \$340. 6 months costs = \$170
- 1091 • Nurse
Nurse consultant with medication supports and education, and to assist psychiatrist in the administration of medication and treatment of patients as needed. Estimated biannually at \$1,500.
- 1092 • Pain Specialist
Pain specialist to support psychiatrist and staff on chronic pain symptom managements and medication consultation of pain medications. Estimated biannually \$1,500.
- 1093 • Alternative Healer
Traditional alternative Healer to support consumers with spiritual wellness and recovering practices and methods. Estimated biannually at \$1,500.

\$4,670

Living Well Center - FSP
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BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

Fixed Assets – Line Items 1190-1193

1190 N/A

\$0

Non Medi-Cal Client Support Expenses – Line Items 2000 - 2002.8

• Client Housing Support Expenditures (SFC 70)

2000 For cost of providing housing supports. including housing subsidies for permanent, transitional and temporary housing; master leases; motel and other housing vouchers and shelters; rental security deposits; first and last month rental payments; and eviction prevention and other fiscal housing supports. Estimated @ \$2,000 biannually.

• Client Housing Operating Expenditures (SFC 71)

2001 For costs of providing housing supports to clients, including building repair and maintenance; utilities; housing agency management fees; insurance; property taxes and assessments; credit reporting fees; and other operating costs incurred in providing client housing supports. Estimated @ \$1,800 biannually.

• Clothing, Food & Hygiene (SFC 72)

2002.1 To provide supports to clients, which may include food vouchers and other items necessary for daily living (such as, clothing, hygiene, etc.). Estimated @ \$3,000 biannually.

• Client Flexible Support Expenditures Support (SFC 72)

2002.2 To provide supports to clients and their caregivers, may include vouchers, goods, services, and other family support services. Also maybe use for personal/community integration to assist clients in achieving their treatment goals and in supporting their integration into the larger community. Items may include, but are not limited to socialization and recreational activities. This funding may also be used for medical, dental and optical care, prescriptions, and laboratory tests when the client does not have insurance to pay for such care. Estimated @ \$2,500 biannually.

• Household Items (SFC 72)

2002.6 To provide supports for clients with household items need. Estimated at \$1,500 biannually.

• Utility Vouchers (SFC 72)

2002.7 To provide supports to clients with helping utilities problems. Estimated @ \$2,500 biannually.

\$13,300

TOTAL PROGRAM EXPENSE: \$178,377

Living Well Center - FSP
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FY 2019-2020

Budget Categories - Line Item Description (Must be itemized)		FTE %	Total Proposed Budget		
			Admin.	Direct	Total
PERSONNEL SALARIES:					
0001	Program Director	0.10	\$ -	\$ 97,860	\$ 9,786
0002	Medical Director/Psychiatrist	0.10	\$ -	\$ 257,508	\$ 25,751
0003	Clinical Supervisor	0.05	\$ -	\$ 92,700	\$ 4,635
0004	Unlicensed Psychologist	0.40	\$ -	\$ 77,256	\$ 30,902
0005	Clinical Psychologist	0.05	\$ -	\$ 107,120	\$ 5,356
0006	Licensed Clinical	0.05	\$ -	\$ 74,160	\$ 3,708
0007	Senior Rehab Counselor	0.10	\$ -	\$ 58,716	\$ 5,872
0008	Nonlicensed Clinical II	0.47	\$ -	\$ 58,716	\$ 27,597
0009	Nonlicensed Clinical I	0.30	\$ -	\$ 51,504	\$ 15,451
0010	Personal Coordinator Service/CM II	0.30	\$ -	\$ 45,365	\$ 13,610
0011	Personal Coordinator Service/CM I	0.96		\$ 39,144	\$ 37,578
0012	Medical Biller	0.10	\$ -	\$ 46,356	\$ 4,636
0013	Peer Specialist	0.20	\$ -	\$ 30,900	\$ 6,180
SALARY TOTAL		3.18	\$0	\$1,037,306	\$191,061
PAYROLL TAXES:					
0030	OASDI @ 6.2%				\$11,846
0031	FICA/MEDICARE @ 1.45%				\$2,770
0032	SUI 1st \$7,000 @ 6.8%				\$1,680
PAYROLL TAX TOTAL			\$0	\$0	\$16,296
EMPLOYEE BENEFITS:					
0040	Retirement				\$5,732
0041	Workers Compensation				\$4,777
0042	Health Insurance (medical, vision, life, dental)				\$19,080
EMPLOYEE BENEFITS TOTAL			\$0	\$0	\$29,588
SALARY & BENEFITS GRAND TOTAL					\$236,946
FACILITIES/EQUIPMENT EXPENSES:					
1010	Rent/Lease Building				\$16,948
1011	Rent/Lease Equipment				\$1,734
1012	Utilities				\$2,346
1013	Building Maintenance				\$3,570
1014	Equipment purchase				\$0
FACILITY/EQUIPMENT TOTAL					\$24,598

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OPERATING EXPENSES:

1060	Telephone	\$1,428
1061	Answering Service	\$0
1062	Postage	\$61
1063	Printing/Reproduction	\$663
1064	Publications	\$0
1065	Legal Notices/Advertising	\$680
1066	Office Supplies & Equipment	\$2,040
1067	Household Supplies	\$0
1068	Food	\$0
1069	Program Supplies - Therapeutic	\$2,092
1070	Program Supplies - Medical	\$0
1071	Transportation of Clients	\$0
1072	Staff Mileage/vehicle maintenance	\$2,138
1073	Staff Travel (Out of County)	\$0
1074	Staff Training/Registration	\$0
1075	Lodging	\$0
1076	IT Support & Upgrades	\$2,380
1077		\$0
OPERATING EXPENSES TOTAL		\$11,483

FINANCIAL SERVICES EXPENSES:

1080	Accounting/Bookkeeping	\$0
1081	External Audit	\$3,060
1082	Liability Insurance	\$1,020
1083	Administrative Overhead	\$45,301
1084	Payroll Services	\$408
1085	Professional Liability Insurance	\$850
FINANCIAL SERVICES TOTAL		\$50,639

SPECIAL EXPENSES (Consultant/Etc.):

1090	Stipend	\$340
1091	Nurse	\$3,000
1092	Pain Specialist	\$3,000
1093	Alternate Healer	\$3,000
1094	Medication Supports	\$0
SPECIAL EXPENSES TOTAL		\$9,340

FIXED ASSETS:

1190	Computers & Software	\$0
1191	Furniture & Fixtures	\$0
1192	Office Landscaping	\$0
1193	Vehicle	\$0
FIXED ASSETS TOTAL		\$0

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NON MEDI-CAL CLIENT SUPPORT EXPENSES:

2000	Client Housing Support Expenditures (SFC 70)	\$4,000
2001	Client Housing Operating Expenditures (SFC 71)	\$0
2002.1	Clothing, Food & Hygiene (SFC 72)	\$1,800
2002.2	Client Flexible Support Expenditures Support (SFC 72)	\$2,000
2002.3	Education Support (SFC 72)	\$2,500
2002.4	Employment Support (SFC 72)	\$0
2002.5	Respite Care (SFC 72)	\$0
2002.6	Household Items	\$1,500
2002.7	Utility Vouchers (SFC 72)	\$2,500
2002.8	Child Care (SFC 72)	\$0
NON MEDI-CAL CLIENT SUPPORT TOTAL		\$14,300
TOTAL PROGRAM EXPENSES		\$347,306

MEDI-CAL REVENUE:

MEDI-CAL REVENUE:		Units of Service	Rate	\$ Amount
3000	Mental Health Services (Individual/Family/Group Therapy)	27,000	\$2.61	\$70,470
3100	Case Management	20,000	\$2.02	\$40,400
3200	Crisis Services	800	\$3.88	\$3,104
3300	Medication Support	7,000	\$4.82	\$33,740
3400	Collateral	500	\$2.61	\$1,305
3500	Plan Development	625	\$2.61	\$1,631
3600	Assessment	2,500	\$2.61	\$6,525
3700	Rehabilitation	15,000	\$2.61	\$39,150
Estimated Specialty Mental Health Services Billing Totals		73,425		\$196,325
Estimated % of Clients that are Medi-Cal Beneficiaries				90%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				\$176,693
Federal M/Cal Share of Cost % (Federal Financial Participation-FFP)			50.00%	\$88,346
State M/Cal Share of Cost % (BH Realignment/EPSTD)			0.00%	\$0
MEDI-CAL REVENUE TOTAL				\$88,346

OTHER REVENUE:

4100	Other - (Identify)	\$0
4200	Other - (Identify)	\$0
4300	Other - (Identify)	\$0
OTHER REVENUE TOTAL		\$0

MENTAL HEALTH SERVICES ACT (MHSA) REVENUE:

5000	Prevention & Early Intervention (PEI) Funds	\$0
5100	Community Services & Supports (CSS) Funds	\$258,960
5200	Innovation (INN) Funds	\$0
5300	Workforce Education & Training (WET) Funds	\$0
MHSA FUNDS TOTAL		\$258,960
TOTAL PROGRAM REVENUE		\$347,306

**Living Well Center - FSP
The Fresno Center
FY 2019-2020
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

Personnel Salaries, Payroll Taxes & Employee Benefits - Line Items 0001- 0042

- 0001 • 1 Program Director @ \$8,155/mon. x 12 months x 0.10 FTE=\$9,786. The Program Director will oversee the overall development and management of the Living Wells Project and its staff.
- 0002 • 1 Medical Director/Psychiatrist @ \$21,459/mon. x 12 months x 0.10 FTE = \$25,751. The Medical Director/Psychiatrist will works closely with consumers' primary medical providers, psychologist(s), behavioral health clinicians, counselors and care coordinators to meet the clinical and non-clinical health needs Southeast Asian consumers at the Living Well Program. Duties may include but not limited to conducting psychiatric evaluation, as needed and be available on-call and if need by telehealth as necessary; conduct mental status examinations and pharmacological evaluations, prescribe psychotic medications, teach clients about side effects and monitor response to prescribed medications.
- 0003 • 1 Clinical Supervisor @ \$7,725/mon. x 12 months x .05 FTE = \$4,635. The Clinical Supervisor will assist in the management of the LWP program, supervise clinic staff, student interns and be responsible for the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0004 • 1 Unlicensed Psychologist @ \$ 6,438/mon. x 12 months x 0.40 FTE = \$30,902. A licensed or licensed eligible clinical psychologist who is bilingual and bicultural in any of the Southeast Asian languages to provide psychotherapy and clinical assessments. Also, the psychologist will assist in the development and implementation of various culturally and linguistic techniques, assessment, and methods in the program.
- 0005 • 1 Clinical psychologist @ \$8,927/mon. x 12 months x .05 FTE = \$5,356. The licensed clinician will assist the clinical supervisor in providing supervision for the clinic staff, student interns, and assist in the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0006 • 1 Licensed Clinical I @ \$6,180/mon. x 12 months x .05 FTE = \$3,708. The licensed clinician will assist the clinical supervisor in providing supervision for the clinic staff, student interns, and assist in the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0007 Senior Rehab. Counselor @ \$4,893/mon. x 12 months x .10 FTE=\$5,872. Under the supervision of licensed personnel, provides professional cultural and linguistic rehabilitation mental health services, which includes individual and group rehab therapy. Assist in performing assessments, case management, and performs related work as required.
- 0008 • 4.75 No licensed Clinical II @ \$4,893/mon. x 12 months x 0.10 FTE = \$27,597. The Mental Health Unlicensed Clinician II is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required

**Living Well Center - FSP
The Fresno Center
FY 2019-2020
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

- 0008 • 3 No licensed Clinical I @ \$4,375/mon. x 12 months x 0.10 FTE= \$48,451. The Mental Health Unlicensed Clinician I is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required
- 0009 • 1 Personal Coordinator Service/Case Manager II @ \$3,780/mon. x 12 months x .30 FTE= \$13,610. This position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
- 0009 • 3.10 Personal Coordinator Service/Case Manager I @ \$3,262/mon. x 12 months 0.31 FTE = \$37,578. This position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
- 0010 • 1 Medical Biller @ \$3,863/mon. x 12 months x 0.10 FTE = \$4,636. The Medical Biller will be work closely with Case Manager and clinicians to ensure that all billing are entered in a timely manager. Managing monthly billable units and revenues. Work with Program Director to make sure billable goals are met.
- 0011 • 2 Peer Specialists @ \$2,575/mon. x 12 months x 0.10 FTE = \$6,180. The Peer Specialist will be responsible for monitoring, informing, supporting, assisting, and empowering consumers and their family/caregivers who directly or indirectly receive behavioral health services; facilitating peer-to-peer assistance as a part of a team setting; conducting outreach to consumers, families/caregivers and the community; and acting in a liaison role between consumers, families/caregivers and community service providers.
- 0030 • OASDI
OASDI cost is estimated @ 6.2% x total salary = \$11,846 annually.
- 0031 • FICA/MEDICARE
FICA/MEDICARE cost is estimated @ 1.45% x total salary = \$2,770 annually.
- 0032 • SUI
SUI cost is estimated @ 1st \$7,000 x 6.8% x 3.18 FTE = \$1,680 annually.
- 0040 • Retirement
Retirement cost is estimated @ 3% x total salary = \$5,732 annually.
- 0041 • Workers Compensation
Workers Compensation cost is estimated @ 2.5% x total salary = \$4,777 annually.

Living Well Center - FSP
The Fresno Center
FY 2019-2020
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

• Health Insurance

0042 Health Insurance (medical, vision, life, and dental) cost are estimated @ \$500/staff x 3.18 FTE x 12 months = \$19,080 annually.

\$236,946

Facilities/Equipment Expenses – Line Items 1010-1014

• Rent/Office Lease

1010 Office Lease cost are estimated @ 6,700 sq. ft. @ \$1.24/sq.ft... x 12 months @ \$99,696, annually @ 17%= 16,948

• Rent/Equipment Lease

1011 Lease copy machines cost are estimated @ \$850/month x 12 months at \$10,200 annually @ 17%= \$1,734.

• Utilities

1012 Utilities cost is estimated annually at \$13,800 @ 17%= \$2,346.

• Building Maintenance

1013 Building Maintenance includes janitorial services, pest control, material, AC services, and other maintenance cost are estimated @ \$1,750/month x 12 months @ \$21,000 annually @ 17%= \$3,570

\$24,598

Operating Expenses - Line Items 1060-1077

• Telephone

1060 Telephone (include local, long distance, cell phone, and internet services) cost is estimated @ \$700/month x 12 months @ 17%= \$1,428 annually.

• Postage

1062 Postage & Delivery cost are estimated @ \$30/month x 12 months @ 17%= \$61 annually.

• Printing/Reproduction

1063 In-house printing, business cards, flyers and brochures, etc. cost are estimated @ \$325/month x 12 months @ 17% = \$663 annually.

• Legal Notices/Advertising

1065 Marketing on ethnic magazines and radio stations and TV station cost is estimated annually @ 17%=\$680.

• Office Supplies

1066 General office supplies cost is estimated @ \$12,000 annually @ 17%= \$2,040 annually.

• Program Supplies - Therapeutic

1069 Supplies and materials for individual activity cost is estimated @ \$1,025.5/month x 12 months @ 17%= \$2,092 annually.

**Living Well Center - FSP
The Fresno Center
FY 2019-2020
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

- Staff Mileage/Vehicle Maintenance;

1072 Local travel for staff to attend meeting/trainings and maintenance for gas, vehicle maintenance, registrations, and insurance for 3 cars @ \$12,579 x 17%=\$2,138.

- IT Support & Upgrades

1076 IT Support services cost is estimated @ \$14,000 annually x 17% x 12 months = \$2,380

\$11,483

Financial Services Expenses – Line Items 1080-1085

- External Audit

1081 External Audit perform by Price Paige & Company cost is estimated @ \$18,000 annually @ 17%=\$3,060.

- Liability Insurance

1082 General liability insurance cost is estimated @ \$6,000 annually x 17% \$1,020.

- Administration Overhead

1083 Administration Overhead includes salaries and benefits for the Executive Director, Chief Development Officer, Human Resource Generalist, Program Assistants, Office Manager, Bookkeeper, and the Secretary/Receptionist to support program staff cost is estimated @ \$45,301 annually.

- Payroll Services

1084 Outside payroll services cost is estimated @ \$2,400 annually x 17% =\$ 408.

- Professional Liability Insurance

1085 Professional Liability Insurance cost is estimated @ \$5,000 annually x 17%= \$850.

\$9,340

Special Expenses – Line Items 1090-1092

- Stipend

1090 To train 2 graduate students in mental health work force @ 500 per semester for 2 semesters x 2 @ \$2,000 annually x 17%=\$340.

- Nurse

1091 Nurse consultant with medication supports and education, and to assist psychiatrist in the administration of medication and treatment of patients as needed. Estimated annually at \$3,000

- Pain Specialist

1092 Pain specialist to support psychiatrist and staff on chronic pain symptom managements and medication consultation of pain medications. Estimated annually \$3,000

- Alternative Healer

1093 Traditional alternative Healer to support consumers with spiritual wellness and recovering practices and methods. Estimated annually at \$3,000

\$50,639

Living Well Center - FSP
The Fresno Center
FY 2019-2020
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

Non Medi-Cal Client Support Expenses – Line Items 2000 - 2002.8

- Client Housing Support Expenditures (SFC 70)
For cost of providing housing supports. including housing subsidies for permanent, transitional and temporary housing; master leases; motel and other housing vouchers and shelters; rental security deposits; first and last month rental payments; and eviction prevention and other fiscal housing supports. Estimated @ \$4,000 annually.
2000
- Clothing, Food & Hygiene (SFC 72)
2002.1 To provide supports to clients, which may include food vouchers and other items necessary for daily living (such as, clothing, hygiene, etc.). Estimated @ \$1,800 annually
- Client Flexible Support Expenditures Support (SFC 72)
To provide supports to clients and their caregivers, may include cash payments, vouchers, goods, services, and other family support services. Also maybe use for personal/community integration to assist clients in achieving their treatment goals and in supporting their integration into the larger community. Items may include, but are not limited to socialization and recreational activities. This funding may also be used for medical, dental and optical care, prescriptions, and laboratory tests when the client does not have insurance to pay for such care. Estimated @ \$2,000 annually
2002.2
- Educational Support (SFC 72)
2002.3 To provide educational support to clients, which may include transportation to and from school, school materials, tuitions, and other school resources and/or activities expenses. Estimated at \$2,500.
- Household Items (SFC 72)
2002.6 To provide supports for clients with household items need. Estimated at \$1,500
- Utility Vouchers (SFC 72)
2002.7 To provide supports to clients with helping utilities problems. Estimated @ 2,500 annually.

\$14,300

TOTAL PROGRAM EXPENSE: \$347,306

Living Well Center - FSP
The Fresno Center
FY 2020-2021

Budget Categories - Line Item Description (Must be itemized)		FTE %	Total Proposed Budget		
			Admin.	Direct	Total
PERSONNEL SALARIES:					
0001	Program Director	0.10	\$ -	\$ 100,796	\$ 10,080
0002	Medical Director/Psychiatrist	0.10	\$ -	\$ 265,233	\$ 26,523
0003	Clinical Supervisor	0.05	\$ -	\$ 95,481	\$ 4,774
0004	Unlicensed Psychologist	0.40	\$ -	\$ 79,574	\$ 31,829
0005	Clinical Psychologist	0.05	\$ -	\$ 110,334	\$ 5,517
0006	Licensed Clinical	0.05	\$ -	\$ 76,385	\$ 3,819
0007	Senior Rehab Counselor	0.10		\$ 60,477	\$ 6,048
0008	Nonlicensed Clinical II	0.47	\$ -	\$ 60,477	\$ 28,424
0009	Nonlicensed Clinical I	0.30	\$ -	\$ 53,049	\$ 15,915
0010	Personal Coordinator Service/CM II	0.30	\$ -	\$ 46,726	\$ 14,018
0011	Personal Coordinator Service/CM I	0.96	\$ -	\$ 40,318	\$ 38,705
0012	Medical Biller	0.10	\$ -	\$ 47,747	\$ 4,775
0013	Peer Specialist	0.20	\$ -	\$ 31,827	\$ 6,365
SALARY TOTAL		3.18	\$0	\$1,068,424	\$196,792
PAYROLL TAXES:					
0030	OASDI @ 6.2%				\$12,201
0031	FICA/MEDICARE @ 1.45%				\$2,853
0032	SUI 1st \$7,000 @ 6.8%				\$1,680
PAYROLL TAX TOTAL			\$0	\$0	\$16,735
EMPLOYEE BENEFITS:					
0040	Retirement				\$5,904
0041	Workers Compensation				\$4,920
0042	Health Insurance (medical, vision, life, dental)				\$19,080
EMPLOYEE BENEFITS TOTAL			\$0	\$0	\$29,904
SALARY & BENEFITS GRAND TOTAL					\$243,431
FACILITIES/EQUIPMENT EXPENSES:					
1010	Rent/Lease Building				\$16,948
1011	Rent/Lease Equipment				\$1,734
1012	Utilities				\$2,346
1013	Building Maintenance				\$3,570
1014	Equipment purchase				\$0
FACILITY/EQUIPMENT TOTAL					\$24,598

Living Well Center - FSP
The Fresno Center
FY 2020-2021

OPERATING EXPENSES:

1060	Telephone	\$1,428
1061	Answering Service	\$0
1062	Postage	\$61
1063	Printing/Reproduction	\$663
1064	Publications	\$0
1065	Legal Notices/Advertising	\$680
1066	Office Supplies & Equipment	\$2,040
1067	Household Supplies	\$0
1068	Food	\$0
1069	Program Supplies - Therapeutic	\$2,262
1070	Program Supplies - Medical	\$0
1071	Transportation of Clients	\$0
1072	Staff Mileage/vehicle maintenance	\$2,138
1073	Staff Travel (Out of County)	\$0
1074	Staff Training/Registration	\$0
1075	Lodging	\$0
1076	IT Support & Upgrades	\$2,380
1077		\$0
OPERATING EXPENSES TOTAL		\$11,653

FINANCIAL SERVICES EXPENSES:

1080	Accounting/Bookkeeping	\$0
1081	External Audit	\$3,060
1082	Liability Insurance	\$1,020
1083	Administrative Overhead	\$46,449
1084	Payroll Services	\$408
1085	Professional Liability Insurance	\$850
FINANCIAL SERVICES TOTAL		\$51,787

SPECIAL EXPENSES (Consultant/Etc.):

1090	Stipend	\$340
1091	Nurse	\$3,000
1092	Pain Specialist	\$3,000
1093	Alternate Healer	\$3,000
1094	Medication Supports	\$0
SPECIAL EXPENSES TOTAL		\$9,340

FIXED ASSETS:

1190	Computers & Software	\$0
1191	Furniture & Fixtures	\$0
1192	Automobile	\$0
1193	Office Landscaping	\$0
FIXED ASSETS TOTAL		\$0

**Living Well Center - FSP
The Fresno Center
FY 2020-2021**

NON MEDI-CAL CLIENT SUPPORT EXPENSES:

2000	Client Housing Support Expenditures (SFC 70)	\$4,500
2001	Client Housing Operating Expenditures (SFC 71)	\$0
2002.1	Clothing, Food & Hygiene (SFC 72)	\$1,800
2002.2	Client Flexible Support Expenditures Support (SFC 72)	\$2,500
2002.3	Education Support (SFC 72)	\$2,500
2002.4	Employment Support (SFC 72)	\$0
2002.5	Respite Care (SFC 72)	\$0
2002.6	Household Items	\$1,500
2002.7	Utility Vouchers (SFC 72)	\$2,500
2002.8	Child Care (SFC 72)	\$0
NON MEDI-CAL CLIENT SUPPORT TOTAL		\$15,300
TOTAL PROGRAM EXPENSES		\$356,110

MEDI-CAL REVENUE:

MEDI-CAL REVENUE:		Units of Service	Rate	\$ Amount
3000	Mental Health Services (Individual/Family/Group Therapy)	27,000	\$2.61	\$70,470
3100	Case Management	20,000	\$2.02	\$40,400
3200	Crisis Services	800	\$3.88	\$3,104
3300	Medication Support	7,000	\$4.82	\$33,740
3400	Collateral	500	\$2.61	\$1,305
3500	Plan Development	625	\$2.61	\$1,631
3600	Assessment	2,500	\$2.61	\$6,525
3700	Rehabilitation	15,000	\$2.61	\$39,150
Estimated Specialty Mental Health Services Billing Totals		73,425		\$196,325
Estimated % of Clients that are Medi-Cal Beneficiaries				90%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				\$176,693
Federal M/Cal Share of Cost % (Federal Financial Participation-FFP)			50.00%	\$88,346
State M/Cal Share of Cost % (BH Realignment/EPSTDT)			0.00%	\$0
MEDI-CAL REVENUE TOTAL				\$88,346

OTHER REVENUE:

4100	Other - (Identify)	\$0
4200	Other - (Identify)	\$0
4300	Other - (Identify)	\$0
OTHER REVENUE TOTAL		\$0

MENTAL HEALTH SERVICES ACT (MHSA) REVENUE:

5000	Prevention & Early Intervention (PEI) Funds	\$0
5100	Community Services & Supports (CSS) Funds	\$267,764
5200	Innovation (INN) Funds	\$0
5300	Workforce Education & Training (WET) Funds	\$0
MHSA FUNDS TOTAL		\$267,764
TOTAL PROGRAM REVENUE		\$356,110

**Living Well Center - FSP
The Fresno Center
FY 2020-2021
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

Personnel Salaries, Payroll Taxes & Employee Benefits - Line Items 0001- 0042

- 0001 • Program Director @ \$8,400/mon. x 12 months x 0.10 FTE=\$10,800. The Program Director will oversee the overall development and management of the Living Wells Project and its staff.
- 0002 • Medical Director/Psychiatrist @ \$22,103/mon. x 12 months x 0.10 FTE = \$26,523. The Medical Director/Psychiatrist will works closely with consumers' primary medical providers, psychologist(s), behavioral health clinicians, counselors and care coordinators to meet the clinical and non-clinical health needs Southeast Asian consumers at the Living Well Program. Duties may include but not limited to conducting psychiatric evaluation, as needed and be available on-call and if need by telehealth as necessary; conduct mental status examinations and pharmacological evaluations, prescribe psychotic medications, teach clients about side effects and monitor response to prescribed medications.
- 0003 • Clinical Supervisor @ \$7,957/mon. x 12 months x 0.05 FTE = \$4,774. The Clinical Supervisor will assist in the management of the LWP program, supervise clinic staff, student interns and be responsible for the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0004 • Unlicensed Psychologist @ \$6,631/mon. x 12 months x 0.40 FTE = \$31,829. A licensed or licensed eligible clinical psychologist who is bilingual and bicultural in any of the Southeast Asian languages to provide psychotherapy and clinical assessments. Also, the psychologist will assist in the development and implementation of various culturally and linguistic techniques, assessment, and methods in the program.
- 0005 • Clinical psychologist @ \$9,195/mon. x 12 months x .05 FTE = \$5,517. The licensed clinician will assist the clinical supervisor in providing supervision for the clinic staff, student interns, and assist in the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0006 • Licensed Clinical I @ \$6,366/mon. x 12 months x .05 FTE = \$3,819. The licensed clinician will assist the clinical supervisor in providing supervision for the clinic staff, student interns, and assist in the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0007 • 1 Senior Rehab. Counselor @ \$5,040/mon. x 12 months x .10 FTE=\$6,048. Under the supervision of license personnel, provides professional cultural and linguistic rehabilitation mental health services, which includes individual and group rehab therapy. Assist in performing assessments, case management, and performs related work as required.
- 0008 • 4.75Nonlicensed Clinical II @ \$5,040/mon. x 12 months x 0.10 FTE = \$28,424. The Mental Health Unlicensed Clinician II is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required

**Living Well Center - FSP
The Fresno Center
FY 2020-2021
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

- 0008 • 3 Nonlicensed Clinical I @ \$4,862/mon. x 12 months x .10 FT = \$15,915. The Mental Health Unlicensed Clinician I is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required
- 0009 • 1 Personal Coordinator Service/Case Manager II @ \$3,890/mon. x 12 months x 0.30 FTE= \$14,018. This position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
- 0009 • 3.10 Personal Coordinator Service/Case Manager I @ \$3,360/mon. x 12 months x 0.31 FTE = \$38,705. This position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
- 0010 • 1 Medical Biller @ \$3,979/mon. x 12 months x 0.10 FTE = \$4,775. The Medical Biller will be work closely with Case Manager and clinicians to ensure that all billing are entered in a timely manager. Managing monthly billable units and revenues. Work with Program Director to make sure billable goals are met.
- 0011 • 2 Peer Specialists @ \$2,652/mon. x 12 months x 0.10 FTE = \$6,365. The Peer Specialist will be responsible for monitoring, informing, supporting, assisting, and empowering consumers and their family/caregivers who directly or indirectly receive behavioral health services; facilitating peer-to-peer assistance as a part of a team setting; conducting outreach to consumers, families/caregivers and the community; and acting in a liaison role between consumers, families/caregivers and community service providers.
- 0030 • OASDI
OASDI cost is estimated @ 6.2% x total salary = \$12,201 annually.
- 0031 • FICA/MEDICARE
FICA/MEDICARE cost is estimated @ 1.45% x total salary = \$2,853 annually.
- 0032 • SUI
SUI cost is estimated @ 1st \$7,000 x 6.8% x 3.18 FTE = \$1,680 annually.
- 0040 • Retirement
Retirement cost is estimated @ 3% x total salary = \$5,904 annually.
- 0041 • Workers Compensation
Workers Compensation cost is estimated @ 2.5% x total salary = \$4,920 annually.

**Living Well Center - FSP
The Fresno Center
FY 2020-2021
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

• Health Insurance

0042 Health Insurance (medical, vision, life, and dental) cost are estimated @ \$500/staff x 3.18 FTE x 12 months = \$19,080 annually.

\$243,431

Facilities/Equipment Expenses – Line Items 1010-1014

• Rent/Office Lease

1010 Office Lease cost are estimated @ 6,700 sq. ft. @ \$1.24/sq.ft.. x 12 months x 17%= \$16,948

• Rent/Equipment Lease

1011 Lease copy machines cost are estimated @ \$850/month x 12 months x 17%= \$1,734.

• Utilities

1012 Utilities cost is estimated annually @ \$13,800 @ 17%= \$2,346.

• Building Maintenance

1013 Building Maintenance includes janitorial services, pest control, material, AC services, and other maintenance cost are estimated @ \$1,750/month x 12 months x 17%= \$3,570

\$24,598

Operating Expenses - Line Items 1060-1077

• Telephone

1060 Telephone (include local, long distance, cell phone, and internet services) cost is estimated @ \$700/month x 12 months x 17%= \$1,428 annually.

• Postage

1062 Postage & Delivery cost are estimated @ \$30/month x 12 months x 17%= \$61 annually.

• Printing/Reproduction

1063 In-house printing, business cards, flyers and brochures, etc. cost are estimated @ \$325/month x 12 months x 17% = \$663 annually.

• Legal Notices/Advertising

1065 Marketing on ethnic magazines and radio stations and TV station cost is estimated @ \$4,000 annually x 17% = \$680.

• Office Supplies

1066 General office supplies cost is estimated @ \$12,000 annually x 17%= \$2,040

• Program Supplies - Therapeutic

1069 Supplies and materials for individual activity cost is estimated @ \$1,108.80/month x 12 months x 17%= \$2,262

**Living Well Center - FSP
The Fresno Center
FY 2020-2021
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

- Staff Mileage/Vehicle Maintenance;

1072 Local travel for staff to attend meeting/trainings and maintenance for gas, vehicle maintenance, registrations, and insurance for 3 cars @ \$12,579 annually x 17% = \$2,138.

- IT Support & Upgrades

1076 IT Support services cost is estimated @ \$14,000 annually x 17% = \$2,380

\$11,653

Financial Services Expenses – Line Items 1080-1085

- External Audit

1081 External Audit perform by Price Paige & Company cost is estimated @\$18,000 annually x 17%=\$3,060.

- Liability Insurance

1082 General liability insurance cost is estimated @\$6,000 annually x 17% = \$1,020.

- Administration Overhead

1083 Administration Overhead includes salaries and benefits for the Executive Director, Chief Development Officer, Human Resource Generalist, Program Assistants, Office Manager, Bookkeeper, and the Secretary/Receptionist to support program staff cost is estimated @ \$46,449 annually.

- Payroll Services

1084 Outside payroll services cost is estimated @ \$2,400 annually x 17% = \$408.

- Professional Liability Insurance

1085 Professional Liability Insurance cost is estimated at \$5,000 annually x 17%= \$850.

\$51,787

Special Expenses – Line Items 1090-1092

- Stipend

1090 To train 2 graduate students in mental health work force @ 500 per semester for 2 semesters x 2 @ \$2,000 annually x 17%=\$340.

- Nurse

1091 Nurse consultant with medication supports and education, and to assist psychiatrist in the administration of medication and treatment of patients as needed. Estimated annually at \$3,000

- Pain Specialist

1092 Pain specialist to support psychiatrist and staff on chronic pain symptom managements and medication consultation of pain medications. Estimated annually \$3,000

- Alternative Healer

1093 Traditional alternative Healer to support consumers with spiritual wellness and recovering practices and methods. Estimated annually at \$3,000

\$9,340

Living Well Center - FSP
The Fresno Center
FY 2020-2021
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

Non Medi-Cal Client Support Expenses – Line Items 2000 - 2002.8

• Client Housing Support Expenditures (SFC 70)

2000 For cost of providing housing supports. including housing subsidies for permanent, transitional and temporary housing; master leases; motel and other housing vouchers and shelters; rental security deposits; first and last month rental payments; and eviction prevention and other fiscal housing supports. Estimated @ \$4,500 annually.

• Clothing, Food & Hygiene (SFC 72)

2002.1 To provide supports to clients, which may include food vouchers and other items necessary for daily living (such as, clothing, hygiene, etc.). Estimated @ \$1,800 annually

• Client Flexible Support Expenditures Support (SFC 72)

2002.2 To provide supports to clients and their caregivers, may include cash payments, vouchers, goods, services, and other family support services. Also maybe use for personal/community integration to assist clients in achieving their treatment goals and in supporting their integration into the larger community. Items may include, but are not limited to socialization and recreational activities. This funding may also be used for medical, dental and optical care, prescriptions, and laboratory tests when the client does not have insurance to pay for such care. Estimated @ \$2,500 annually

• Educational Support (SFC 72)

2002.3 To provide educational support to clients, which may include transportation to and from school, school materials, tuitions, and other school resources and/or activities expenses. Estimated at \$2,500.

• Household Items (SFC 72)

2002.6 To provide supports for clients with household items need. Estimated at \$1,500

• Utility Vouchers (SFC 72)

2002.7 To provide supports to clients with helping utilities problems. Estimated @ 2,500 annually.

\$15,300

TOTAL PROGRAM EXPENSE: \$356,110

Living Well Center - FSP
The Fresno Center
FY 2021-2022

Budget Categories - Line Item Description (Must be itemized)		FTE %	Total Proposed Budget		
			Admin.	Direct	Total
PERSONNEL SALARIES:					
0001	Program Director	0.10	\$ -	\$ 103,820	\$ 10,382
0002	Medical Director/Psychiatrist	0.10	\$ -	\$ 273,190	\$ 27,319
0003	Clinical Supervisor	0.05	\$ -	\$ 98,345	\$ 4,917
0004	Unlicensed Psychologist	0.40	\$ -	\$ 81,961	\$ 32,784
0005	Clinical Psychologist	0.05	\$ -	\$ 113,644	\$ 5,682
0006	Licensed Clinical	0.05	\$ -	\$ 78,677	\$ 3,934
0007	Senior Rehab Counselor	0.10		\$ 62,291	\$ 6,229
0008	Nonlicensed Clinical II	0.47	\$ -	\$ 62,291	\$ 29,277
0009	Nonlicensed Clinical I	0.30	\$ -	\$ 54,640	\$ 16,392
0010	Personal Coordinator Service/CM II	0.30	\$ -	\$ 48,128	\$ 14,438
0011	Personal Coordinator Service/CM I	0.96	\$ -	\$ 41,528	\$ 39,866
0012	Medical Biller	0.10	\$ -	\$ 49,179	\$ 4,918
0013	Peer Specialist	0.20	\$ -	\$ 32,782	\$ 6,556
SALARY TOTAL		3.18	\$0	\$1,100,477	\$202,696
PAYROLL TAXES:					
0030	OASDI @ 6.2%				\$12,567
0031	FICA/MEDICARE @ 1.45%				\$2,939
0032	SUI 1st \$7,000 @ 6.8%				\$1,680
PAYROLL TAX TOTAL			\$0	\$0	\$17,187
EMPLOYEE BENEFITS:					
0040	Retirement				\$6,081
0041	Workers Compensation				\$5,067
0042	Health Insurance (medical, vision, life, dental)				\$19,080
EMPLOYEE BENEFITS TOTAL			\$0	\$0	\$30,228
SALARY & BENEFITS GRAND TOTAL					\$250,111
FACILITIES/EQUIPMENT EXPENSES:					
1010	Rent/Lease Building				\$16,948
1011	Rent/Lease Equipment				\$1,734
1012	Utilities				\$2,346
1013	Building Maintenance				\$3,570
1014	Equipment purchase				\$0
FACILITY/EQUIPMENT TOTAL					\$24,598

Living Well Center - FSP
The Fresno Center
FY 2021-2022

OPERATING EXPENSES:

1060	Telephone	\$1,428
1061	Answering Service	\$0
1062	Postage	\$61
1063	Printing/Reproduction	\$663
1064	Publications	\$0
1065	Legal Notices/Advertising	\$680
1066	Office Supplies & Equipment	\$2,040
1067	Household Supplies	\$0
1068	Food	\$0
1069	Program Supplies - Therapeutic	\$2,262
1070	Program Supplies - Medical	\$0
1071	Transportation of Clients	\$0
1072	Staff Mileage/vehicle maintenance	\$2,138
1073	Staff Travel (Out of County)	\$0
1074	Staff Training/Registration	\$0
1075	Lodging	\$0
1076	IT Support & Upgrades	\$2,380
1077		\$0
OPERATING EXPENSES TOTAL		\$11,653

FINANCIAL SERVICES EXPENSES:

1080	Accounting/Bookkeeping	\$0
1081	External Audit	\$3,060
1082	Liability Insurance	\$1,020
1083	Administrative Overhead	\$47,451
1084	Payroll Services	\$408
1085	Professional Liability Insurance	\$850
FINANCIAL SERVICES TOTAL		\$52,789

SPECIAL EXPENSES (Consultant/Etc.):

1090	Stipend	\$340
1091	Nurse	\$3,000
1092	Pain Specialist	\$3,000
1093	Alternate Healer	\$3,000
1094	Medication Supports	\$0
SPECIAL EXPENSES TOTAL		\$9,340

FIXED ASSETS:

1190	Computers & Software	\$0
1191	Furniture & Fixtures	\$0
1192	Automobile	\$0
1193	Office Landscaping	\$0
FIXED ASSETS TOTAL		\$0

Living Well Center - FSP
The Fresno Center
FY 2021-2022

NON MEDI-CAL CLIENT SUPPORT EXPENSES:

2000	Client Housing Support Expenditures (SFC 70)	\$5,000
2001	Client Housing Operating Expenditures (SFC 71)	\$0
2002.1	Clothing, Food & Hygiene (SFC 72)	\$1,800
2002.2	Client Flexible Support Expenditures Support (SFC 72)	\$2,000
2002.3	Education Support (SFC 72)	\$2,500
2002.4	Employment Support (SFC 72)	\$0
2002.5	Respite Care (SFC 72)	\$0
2002.6	Household Items	\$1,500
2002.7	Utility Vouchers (SFC 72)	\$2,500
2002.8	Child Care (SFC 72)	\$0
NON MEDI-CAL CLIENT SUPPORT TOTAL		\$15,300
TOTAL PROGRAM EXPENSES		\$363,791

MEDI-CAL REVENUE:

MEDI-CAL REVENUE:		Units of Service	Rate	\$ Amount
3000	Mental Health Services (Individual/Family/Group Therapy)	27,000	\$2.61	\$70,470
3100	Case Management	20,000	\$2.02	\$40,400
3200	Crisis Services	800	\$3.88	\$3,104
3300	Medication Support	7,000	\$4.82	\$33,740
3400	Collateral	500	\$2.61	\$1,305
3500	Plan Development	625	\$2.61	\$1,631
3600	Assessment	2,500	\$2.61	\$6,525
3700	Rehabilitation	15,000	\$2.61	\$39,150
Estimated Specialty Mental Health Services Billing Totals		73,425		\$196,325
Estimated % of Clients that are Medi-Cal Beneficiaries				90%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				\$176,693
Federal M/Cal Share of Cost % (Federal Financial Participation-FFP)			50.00%	\$88,346
State M/Cal Share of Cost % (BH Realignment/EPSTD)			0.00%	\$0
MEDI-CAL REVENUE TOTAL				\$88,346

OTHER REVENUE:

4100	Other - (Identify)	\$0
4200	Other - (Identify)	\$0
4300	Other - (Identify)	\$0
OTHER REVENUE TOTAL		\$0

MENTAL HEALTH SERVICES ACT (MHSA) REVENUE:

5000	Prevention & Early Intervention (PEI) Funds	\$0
5100	Community Services & Supports (CSS) Funds	\$275,445
5200	Innovation (INN) Funds	\$0
5300	Workforce Education & Training (WET) Funds	\$0
MHSA FUNDS TOTAL		\$275,445
TOTAL PROGRAM REVENUE		\$363,791

**Living Well Center - FSP
The Fresno Center
FY 2021-2022
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

Personnel Salaries, Payroll Taxes & Employee Benefits - Line Items 0001- 0042

- 0001 • 1 Program Director @ \$8,652/mon. x 12 months x 0.17 FTE=\$10,382. The Program Director will oversee the overall development and management of the Living Wells Project and its staff.
- 0002 • 1 Medical Director/Psychiatrist @ \$22,766/mon. x 12 months x 0.10 FTE = \$27,319. The Medical Director/Psychiatrist will works closely with consumers' primary medical providers, psychologist(s), behavioral health clinicians, counselors and care coordinators to meet the clinical and non-clinical health needs Southeast Asian consumers at the Living Well Program. Duties may include but not limited to conducting psychiatric evaluation, as needed and be available on-call and if need by telehealth as necessary; conduct mental status examinations and pharmacological evaluations, prescribe psychotic medications, teach clients about side effects and monitor response to prescribed medications.
- 0003 • 1 Clinical Supervisor @ \$8,195/mon. x 12 months x 0.05 FTE = \$4,917. The Clinical Supervisor will assist in the management of the LWP program, supervise clinic staff, student interns and be responsible for the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0004 • 1 Unlicensed Psychologist @ \$ 6,830/mon. x 12 months x 0.40 FTE = \$32,784. A licensed or licensed eligible clinical psychologist who is bilingual and bicultural in any of the Southeast Asian languages to provide psychotherapy and clinical assessments. Also, the psychologist will assist in the development and implementation of various culturally and linguistic techniques, assessment, and methods in the program.
- 0005 • 1 Clinical psychologist @ \$9,471/mon. x 12 months x .05 FTE = \$5,682. The licensed clinician will assist the clinical supervisor in providing supervision for the clinic staff, student interns, and assist in the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0006 • 1 Licensed Clinical I @ \$6,557/mon. x 12 months x .05 FTE = \$3,934. The licensed clinician will assist the clinical supervisor in providing supervision for the clinic staff, student interns, and assist in the day to day functioning of the LWP clinical services, including the provision of master's and/or doctoral level field training experience for practicum and intern students.
- 0007 • 1 Senior Rehab. Counselor @ \$5,191/mon. x 12 months x .10 FTE=\$6,229. Under the supervision of license personnel, provides professional cultural and linguistic rehabilitation mental health services, which includes individual and group rehab therapy. Assist in performing assessments, case management, and performs related work as required.
- 0008 • 4.75 Nonlicensed Clinical II @ \$5,191/mon. x 12 months x 0.10 FTE = \$29,277. The Mental Health Unlicensed Clinician II is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required

**Living Well Center - FSP
The Fresno Center
FY 2021-2022
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

- 0008 • 3 Nonlicensed Clinical I @ \$5,008/mon. x 12 months x 0.10 FT = \$16,392. The Mental Health Unlicensed Clinician I is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required
- 0009 • 1 Personal Coordinator Service/Case Manager II @ \$4,007/mon. x 12months x .30 FTE= \$14,438. This position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
- 0010 • 3.10 Personal Coordinator Service/Case Manager I @ \$3,461/mon. x 12 months x 0.10 FTE = \$39,866. This position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
- 0011 • 1 Medical Biller @ \$4,098/mon. x 12 months x 0.10 FTE = \$4,918. The Medical Biller will be work closely with Case Manager and clinicians to ensure that all billing are entered in a timely manager. Managing monthly billable units and revenues. Work with Program Director to make sure billable goals are met.
- 0011 • 2 Peer Specialists @ \$2,732/mon. x 12 months x 0.10 FTE = \$6,556. The Peer Specialist will be responsible for monitoring, informing, supporting, assisting, and empowering consumers and their family/caregivers who directly or indirectly receive behavioral health services; facilitating peer-to-peer assistance as a part of a team setting; conducting outreach to consumers, families/caregivers and the community; and acting in a liaison role between consumers, families/caregivers and community service providers.
- 0030 • OASDI
OASDI cost is estimated @ 6.2% x total salary = \$12,567 annually.
- 0031 • FICA/MEDICARE
FICA/MEDICARE cost is estimated @ 1.45% x total salary = \$2,939 annually.
- 0032 • SUI
SUI cost is estimated @ 1st \$7,000 x 6.8% x 3.18 FTE = \$1,680 annually.
- 0040 • Retirement
Retirement cost is estimated @ 3% x total salary = \$6,081 annually.
- 0041 • Workers Compensation
Workers Compensation cost is estimated @ 2.5% x total salary = \$5067 annually.

Living Well Center - FSP
The Fresno Center
FY 2021-2022
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

• Health Insurance

0042 Health Insurance (medical, vision, life, and dental) cost are estimated @ \$500/staff x 3.18 FTE x 12 months = \$19,080 annually.

\$250,111

Facilities/Equipment Expenses – Line Items 1010-1014

• Rent/Office Lease

1010 Office Lease cost are estimated @ 6,700 sq. ft. @ \$1.24/sq.ft... x 12 months x 17%= \$16,948

• Rent/Equipment Lease

1011 Lease copy machines cost are estimated @ \$850/month x 12 months x 17%= \$1,734.

• Utilities

1012 Utilities cost is estimated annually at \$13,800 x 17%= \$2,346.

• Building Maintenance

1013 Building Maintenance includes janitorial services, pest control, material, AC services, and other maintenance cost are estimated @ \$1,750/month x 12 months x 17%= \$3,570

\$24,598

Operating Expenses - Line Items 1060-1077

• Telephone

1060 Telephone (include local, long distance, cell phone, and internet services) cost is estimated @ \$700/month x 12 months x 17%= \$1,428 annually.

• Postage

1062 Postage & Delivery cost are estimated @ \$30/month x 12 months x 17%= \$61 annually.

• Printing/Reproduction

1063 In-house printing, business cards, flyers and brochures, etc. cost are estimated @ \$325/month x 12 months x 17% = \$663 annually.

• Legal Notices/Advertising

1065 Marketing on ethnic magazines and radio stations and TV station cost is estimated \$4,000 annually x 17%=\$680.

• Office Supplies

1066 General office supplies cost is estimated @ \$12,000 annually x 17%= \$2,040 annually.

• Program Supplies - Therapeutic

1069 Supplies and materials for individual activity cost is estimated @ \$1,108.80/month x 12 months x 17%= \$2,262 annually.

• Staff Mileage/Vehicle Maintenance;

1072 Local travel for staff to attend meeting/trainings and maintenance for gas, vehicle maintenance, registrations, and insurance for 3 cars @ \$12,579 x 17%= \$2,138.

Living Well Center - FSP
The Fresno Center
FY 2021-2022
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

- 1076 • IT Support & Upgrades
IT Support services cost is estimated @ \$14,000 annually x 17% = \$2,380

\$11,653

Financial Services Expenses – Line Items 1080-1085

- 1081 • External Audit
External Audit perform by Price Paige & Company cost is estimated \$18,000 annually x 17%=\$3,060.

- 1082 • Liability Insurance
General liability insurance cost is estimated \$6,000 annually x 17% = \$1,020.

- 1083 • Administration Overhead
Administration Overhead includes salaries and benefits for the Executive Director, Chief Development Officer, Human Resource Generalist, Program Assistants, Office Manager, Bookkeeper, and the Secretary/Receptionist to support program staff cost is estimated @ \$47,451 annually.

- 1084 • Payroll Services
Outside payroll services cost is estimated \$2,400 annually x 17% = \$408.

- 1085 • Professional Liability Insurance
Professional Liability Insurance cost is estimated @ \$5,000 annually x 17%= \$850.

\$9,340

Special Expenses – Line Items 1090-1092

- 1090 • Stipend
To train 2 graduate students in mental health work force @ 500 per semester for 2 semesters x 2 @ \$2,000 annually x 17%=\$340.

- 1091 • Nurse
Nurse consultant with medication supports and education, and to assist psychiatrist in the administration of medication and treatment of patients as needed. Estimated annually at \$3,000
- 1092 • Pain Specialist
Pain specialist to support psychiatrist and staff on chronic pain symptom managements and medication consultation of pain medications. Estimated annually \$3,000

- 1093 • Alternative Healer
Traditional alternative Healer to support consumers with spiritual wellness and recovering practices and methods. Estimated annually at \$3,000

\$52,789

Living Well Center - FSP
The Fresno Center
FY 2021-2022
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

Non Medi-Cal Client Support Expenses – Line Items 2000 - 2002.8

- Client Housing Support Expenditures (SFC 70)
For cost of providing housing supports. including housing subsidies for permanent, transitional and temporary housing; master leases; motel and other housing vouchers and shelters; rental security deposits; first and last month rental payments; and eviction prevention and other fiscal housing supports. Estimated @ \$5,000 annually.
- 2000
- Clothing, Food & Hygiene (SFC 72)
2002.1 To provide supports to clients, which may include food vouchers and other items necessary for daily living (such as, clothing, hygiene, etc.). Estimated @ \$1,800 annually
- Client Flexible Support Expenditures Support (SFC 72)
To provide supports to clients and their caregivers, may include cash payments, vouchers, goods, services, and other family support services. Also maybe use for personal/community integration to assist clients in achieving their treatment goals and in supporting their integration into the larger community. Items may include, but are not limited to socialization and recreational activities. This funding may also be used for medical, dental and optical care, prescriptions, and laboratory tests when the client does not have insurance to pay for such care. Estimated @ \$2,000 annually
- 2002.2
- Educational Support (SFC 72)
2002.3 To provide educational support to clients, which may include transportation to and from school, school materials, tuitions, and other school resources and/or activities expenses. Estimated at \$2,500.
- Household Items (SFC 72)
2002.6 To provide supports for clients with household items need. Estimated at \$1,500
- Utility Vouchers (SFC 72)
2002.7 To provide supports to clients with helping utilities problems. Estimated @\$2,500 annually.

\$15,300

TOTAL PROGRAM EXPENSE: \$363,791

Living Well Center - FSP
The Fresno Center
FY 2022-2023

Budget Categories - Line Item Description (Must be itemized)		FTE %	Total Proposed Budget		
			Admin.	Direct	Total
PERSONNEL SALARIES:					
0001	Program Director	0.10	\$ -	\$ 106,932	\$ 10,693
0002	Medical Director/Psychiatrist	0.10	\$ -	\$ 281,388	\$ 28,139
0003	Clinical Supervisor	0.05	\$ -	\$ 101,292	\$ 5,065
0004	Unlicensed Psychologist	0.40	\$ -	\$ 84,420	\$ 33,768
0005	Clinical Psychologist	0.05	\$ -	\$ 117,048	\$ 5,852
0006	Licensed Clinical	0.05	\$ -	\$ 81,036	\$ 4,052
0007	Senior Rehab Counselor	0.10		\$ 64,164	\$ 6,416
0008	Nonlicensed Clinical II	0.47	\$ -	\$ 64,164	\$ 30,157
0009	Nonlicensed Clinical I	0.30	\$ -	\$ 56,280	\$ 16,884
0010	Personal Coordinator Service/CM II	0.30	\$ -	\$ 49,572	\$ 14,872
0011	Personal Coordinator Service/CM I	0.96	\$ -	\$ 42,780	\$ 41,069
0012	Medical Biller	0.10	\$ -	\$ 50,652	\$ 5,065
0013	Peer Specialist	0.20	\$ -	\$ 33,768	\$ 6,754
SALARY TOTAL		3.18	\$0	\$1,133,496	\$208,785
PAYROLL TAXES:					
0030	OASDI @ 6.2%				\$12,945
0031	FICA/MEDICARE @ 1.45%				\$3,027
0032	SUI 1st \$7,000 @ 6.8%				\$1,680
PAYROLL TAX TOTAL			\$0	\$0	\$17,652
EMPLOYEE BENEFITS:					
0040	Retirement				\$6,264
0041	Workers Compensation				\$5,220
0042	Health Insurance (medical, vision, life, dental)				\$19,080
EMPLOYEE BENEFITS TOTAL			\$0	\$0	\$30,563
SALARY & BENEFITS GRAND TOTAL					\$257,001
FACILITIES/EQUIPMENT EXPENSES:					
1010	Rent/Lease Building				\$16,948
1011	Rent/Lease Equipment				\$1,734
1012	Utilities				\$2,346
1013	Building Maintenance				\$3,570
1014	Equipment purchase				\$0
FACILITY/EQUIPMENT TOTAL					\$24,598

Living Well Center - FSP
The Fresno Center
FY 2022-2023

OPERATING EXPENSES:

1060	Telephone	\$1,428
1061	Answering Service	\$0
1062	Postage	\$61
1063	Printing/Reproduction	\$663
1064	Publications	\$0
1065	Legal Notices/Advertising	\$680
1066	Office Supplies & Equipment	\$2,176
1067	Household Supplies	\$0
1068	Food	\$0
1069	Program Supplies - Therapeutic	\$2,245
1070	Program Supplies - Medical	\$0
1071	Transportation of Clients	\$0
1072	Staff Mileage/vehicle maintenance	\$2,138
1073	Staff Travel (Out of County)	\$0
1074	Staff Training/Registration	\$0
1075	Lodging	\$0
1076	IT Support & Upgrades	\$2,380
1077		\$0
OPERATING EXPENSES TOTAL		\$11,772

FINANCIAL SERVICES EXPENSES:

1080	Accounting/Bookkeeping	\$0
1081	External Audit	\$3,060
1082	Liability Insurance	\$1,020
1083	Administrative Overhead	\$48,952
1084	Payroll Services	\$408
1085	Professional Liability Insurance	\$850
FINANCIAL SERVICES TOTAL		\$54,290

SPECIAL EXPENSES (Consultant/Etc.):

1090	Stipend	\$340
1091	Nurse	\$3,000
1092	Pain Specialist	\$3,000
1093	Alternate Healer	\$3,000
1094	Medication Supports	\$0
SPECIAL EXPENSES TOTAL		\$9,340

FIXED ASSETS:

1190	Computers & Software	\$0
1191	Furniture & Fixtures	\$0
1192	Automobile	\$0
1193	Office Landscaping	\$0
FIXED ASSETS TOTAL		\$0

Living Well Center - FSP
The Fresno Center
FY 2022-2023

NON MEDI-CAL CLIENT SUPPORT EXPENSES:

2000	Client Housing Support Expenditures (SFC 70)	\$7,000
2001	Client Housing Operating Expenditures (SFC 71)	\$0
2002.1	Clothing, Food & Hygiene (SFC 72)	\$1,800
2002.2	Client Flexible Support Expenditures Support (SFC 72)	\$3,000
2002.3	Education Support (SFC 72)	\$2,500
2002.4	Employment Support (SFC 72)	\$0
2002.5	Respite Care (SFC 72)	\$0
2002.6	Household Items	\$1,500
2002.7	Utility Vouchers (SFC 72)	\$2,500
2002.8	Child Care (SFC 72)	\$0
NON MEDI-CAL CLIENT SUPPORT TOTAL		\$18,300
TOTAL PROGRAM EXPENSES		\$375,300

MEDI-CAL REVENUE:

MEDI-CAL REVENUE:		Units of Service	Rate	\$ Amount
3000	Mental Health Services (Individual/Family/Group Therapy)	27,000	\$2.61	\$70,470
3100	Case Management	20,000	\$2.02	\$40,400
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3400	Collateral	500	\$2.61	\$1,305
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Estimated % of Clients that are Medi-Cal Beneficiaries				90%
Estimated Total Cost of Specialty Mental Health Services Provided to Medi-Cal Beneficiaries				\$176,693
Federal M/Cal Share of Cost % (Federal Financial Participation-FFP)			50.00%	\$88,346
State M/Cal Share of Cost % (BH Realignment/EPSTD)			0.00%	\$0
MEDI-CAL REVENUE TOTAL				\$88,346

OTHER REVENUE:

4100	Other - (Identify)	\$0
4200	Other - (Identify)	\$0
4300	Other - (Identify)	\$0
OTHER REVENUE TOTAL		\$0

MENTAL HEALTH SERVICES ACT (MHSA) REVENUE:

5000	Prevention & Early Intervention (PEI) Funds	\$0
5100	Community Services & Supports (CSS) Funds	\$286,954
5200	Innovation (INN) Funds	\$0
5300	Workforce Education & Training (WET) Funds	\$0
MHSA FUNDS TOTAL		\$286,954
TOTAL PROGRAM REVENUE		\$375,300

**Living Well Center - FSP
The Fresno Center
FY 2022-2023
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

Personnel Salaries, Payroll Taxes & Employee Benefits - Line Items 0001- 0042

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**Living Well Center - FSP
The Fresno Center
FY 2022-2023
BUDGET NARRATIVE - EXPENSES**

PROGRAM EXPENSES

- 0008 • 3 Nonlicensed Clinical I @ \$5,008/mon. x 12 months x 0.10 FT = \$16,392. The Mental Health Unlicensed Clinician I is under immediate supervision, receives training and clinical supervision in providing professional cultural and linguistic mental health services; conducts or assists in conducting assessments; case management; rehabilitation; individual, group, marital, and family therapy and counseling sessions; and performs related work as required
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- 0010 • 3.10 Personal Coordinator Service/Case Manager I @ \$3,461/mon. x 12 months x 0.10 FTE = \$39,866. This position is responsible for managing an assigned caseload of clients having long- term mental illness and for assessing client needs, developing, implementing and reviewing service plans, and working with other community resources in meeting/achieving client service needs. Also helps in developing and coordinating activities, programs and resources which directly support consumers and family/caregivers in achieving wellness and recovery oriented goals.
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OASDI cost is estimated @ 6.2% x total salary = \$12,567 annually.
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SUI cost is estimated @ 1st \$7,000 x 6.8% x 3.18 FTE = \$1,680 annually.
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Retirement cost is estimated @ 3% x total salary = \$6,081 annually.
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Workers Compensation cost is estimated @ 2.5% x total salary = \$5067 annually.

Living Well Center - FSP
The Fresno Center
FY 2022-2023
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

• Health Insurance

0042 Health Insurance (medical, vision, life, and dental) cost are estimated @ \$500/staff x 3.18 FTE x 12 months = \$19,080 annually.

\$250,111

Facilities/Equipment Expenses – Line Items 1010-1014

• Rent/Office Lease

1010 Office Lease cost are estimated @ 6,700 sq. ft. @ \$1.24/sq.ft... x 12 months x 17%= \$16,948

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• Building Maintenance

1013 Building Maintenance includes janitorial services, pest control, material, AC services, and other maintenance cost are estimated @ \$1,750/month x 12 months x 17%= \$3,570

\$24,598

Operating Expenses - Line Items 1060-1077

• Telephone

1060 Telephone (include local, long distance, cell phone, and internet services) cost is estimated @ \$700/month x 12 months x 17%= \$1,428 annually.

• Postage

1062 Postage & Delivery cost are estimated @ \$30/month x 12 months x 17%= \$61 annually.

• Printing/Reproduction

1063 In-house printing, business cards, flyers and brochures, etc. cost are estimated @ \$325/month x 12 months x 17% = \$663 annually.

• Legal Notices/Advertising

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• Office Supplies

1066 General office supplies cost is estimated @ \$12,000 annually x 17%= \$2,040 annually.

• Program Supplies - Therapeutic

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• Staff Mileage/Vehicle Maintenance;

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Living Well Center - FSP
The Fresno Center
FY 2022-2023
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

- 1076 • IT Support & Upgrades
IT Support services cost is estimated @ \$14,000 annually x 17% = \$2,380

\$11,653

Financial Services Expenses – Line Items 1080-1085

- 1081 • External Audit
External Audit perform by Price Paige & Company cost is estimated \$18,000 annually x 17%=\$3,060.

- 1082 • Liability Insurance
General liability insurance cost is estimated \$6,000 annually x 17% = \$1,020.

- 1083 • Administration Overhead
Administration Overhead includes salaries and benefits for the Executive Director, Chief Development Officer, Human Resource Generalist, Program Assistants, Office Manager, Bookkeeper, and the Secretary/Receptionist to support program staff cost is estimated @ \$47,451 annually.

- 1084 • Payroll Services
Outside payroll services cost is estimated \$2,400 annually x 17% = \$408.

- 1085 • Professional Liability Insurance
Professional Liability Insurance cost is estimated @ \$5,000 annually x 17%= \$850.

\$52,789

Special Expenses – Line Items 1090-1092

- 1090 • Stipend
To train 2 graduate students in mental health work force @ 500 per semester for 2 semesters x 2 @ \$2,000 annually x 17%=\$340.

- 1091 • Nurse
Nurse consultant with medication supports and education, and to assist psychiatrist in the administration of medication and treatment of patients as needed. Estimated annually at \$3,000

- 1092 • Pain Specialist
Pain specialist to support psychiatrist and staff on chronic pain symptom managements and medication consultation of pain medications. Estimated annually \$3,000

- 1093 • Alternative Healer
Traditional alternative Healer to support consumers with spiritual wellness and recovering practices and methods. Estimated annually at \$3,000

\$9,340

Living Well Center - FSP
The Fresno Center
FY 2022-2023
BUDGET NARRATIVE - EXPENSES

PROGRAM EXPENSES

Non Medi-Cal Client Support Expenses – Line Items 2000 - 2002.8

- Client Housing Support Expenditures (SFC 70)
For cost of providing housing supports. including housing subsidies for permanent, transitional and temporary housing; master leases; motel and other housing vouchers and shelters; rental security deposits; first and last month rental payments; and eviction prevention and other fiscal housing supports. Estimated @ \$5,000 annually.
2000
- Clothing, Food & Hygiene (SFC 72)
2002.1 To provide supports to clients, which may include food vouchers and other items necessary for daily living (such as, clothing, hygiene, etc.). Estimated @ \$1,800 annually
- Client Flexible Support Expenditures Support (SFC 72)
To provide supports to clients and their caregivers, may include cash payments, vouchers, goods, services, and other family support services. Also maybe use for personal/community integration to assist clients in achieving their treatment goals and in supporting their integration into the larger community. Items may include, but are not limited to socialization and recreational activities. This funding may also be used for medical, dental and optical care, prescriptions, and laboratory tests when the client does not have insurance to pay for such care. Estimated @ \$2,000 annually
2002.2
- Educational Support (SFC 72)
2002.3 To provide educational support to clients, which may include transportation to and from school, school materials, tuitions, and other school resources and/or activities expenses. Estimated at \$2,500.
- Household Items (SFC 72)
2002.6 To provide supports for clients with household items need. Estimated at \$1,500
- Utility Vouchers (SFC 72)
2002.7 To provide supports to clients with helping utilities problems. Estimated @\$2,500 annually.

\$15,300

TOTAL PROGRAM EXPENSE: \$363,791

ELECTRONIC HEALTH RECORD SOFTWARE CHARGES

CONTRACTOR(S) understand that COUNTY utilizes NetSmart's Avatar for its Electronic Health Records Management. CONTRACTOR(S) agree to reimburse COUNTY for all user license fees for accessing NetSmart's Avatar, as set forth below.

Description	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23
General Users					
Avatar Named User Hosting (per active user per month; every Avatar "active" log on ID is a named user)	\$37.00	\$37.00	\$37.00	\$37.00	\$37.00
Avatar Named User Maintenance* (per active user per month)	\$14.00	\$14.42	\$14.85	\$15.30	\$15.76
Cloud Hosting- Perceptive Disaster Recovery (per active user per month)	\$4.66	\$4.66	\$4.66	\$4.66	\$4.66
eRx Users					
Full Suite Prescriber (per active user per month; applicable to an active Prescriber user)	\$104.00	\$104.00	\$104.00	\$104.00	\$104.00
ePrescribing Controlled Substances Tokens (per active user per month; applicable to an active Prescriber user of Controlled Substances)	\$8.00	\$8.00	\$8.00	\$8.00	\$8.00
Non-Prescribing User (per active user per month; applicable to an active Non-Prescriber user)	\$13.00	\$13.00	\$13.00	\$13.00	\$13.00
Reaching Recovery Users					
Reaching Recovery (per adult client/person served per year; applicable to adult treatment programs except contracted triage/CI, CSU or PHF)	\$10.00	\$10.00	\$10.00	\$10.00	\$10.00
ProviderConnect Users					
Individual Subscription¹ (per user per month; applicable to provider-user whose claims are reviewed and posted by Managed Care)	\$41.25	\$41.25	\$41.25	\$41.25	\$41.25

Should CONTRACTOR(S) choose not to utilize NetSmart's Avatar for its Electronic Health Records management, CONTRACTOR(S) will be responsible for obtaining its own system for Electronic Health Records management.

¹Annual Maintenance increases by 3% each FY on July 1st and may be subject to change pending the COUNTY's agreement terms with NetSmart.

FRESNO COUNTY MENTAL HEALTH COMPLIANCE PROGRAM

CONTRACTOR CODE OF CONDUCT AND ETHICS

Fresno County is firmly committed to full compliance with all applicable laws, regulations, rules and guidelines that apply to the provision and payment of mental health services. Mental health contractors and the manner in which they conduct themselves are a vital part of this commitment.

Fresno County has established this Contractor Code of Conduct and Ethics with which contractor and its employees and subcontractors shall comply. CONTRACTOR(S) shall require its employees and subcontractors to attend a compliance training that will be provided by Fresno County. After completion of this training, CONTRACTOR(S), CONTRACTOR(S)' employees and subcontractors must sign the Contractor Acknowledgment and Agreement form and return this form to the Compliance Officer or designee.

Contractor and its employees and subcontractor shall:

1. Comply with all applicable laws, regulations, rules or guidelines when providing and billing for mental health services.
2. Conduct themselves honestly, fairly, courteously and with a high degree of integrity in their professional dealing related to their contract with the COUNTY and avoid any conduct that could reasonably be expected to reflect adversely upon the integrity of the COUNTY.
3. Treat COUNTY employees, consumers, and other mental health contractors fairly and with respect.
4. NOT engage in any activity in violation of the COUNTY's Compliance Program, nor engage in any other conduct which violates any applicable law, regulation, rule or guideline
5. Take precautions to ensure that claims are prepared and submitted accurately, timely and are consistent with all applicable laws, regulations, rules or guidelines.
6. Ensure that no false, fraudulent, inaccurate or fictitious claims for payment or reimbursement of any kind are submitted.

7. Bill only for eligible services actually rendered and fully documented. Use billing codes that accurately describe the services provided.
8. Act promptly to investigate and correct problems if errors in claims or billing are discovered.
9. Promptly report to the Compliance Officer any suspected violation(s) of this Code of Conduct and Ethics by COUNTY employees or other mental health contractors, or report any activity that they believe may violate the standards of the Compliance Program, or any other applicable law, regulation, rule or guideline. Fresno County prohibits retaliation against any person making a report. Any person engaging in any form of retaliation will be subject to disciplinary or other appropriate action by the COUNTY. CONTRACTOR(S) may report anonymously.
10. Consult with the Compliance Officer if you have any questions or are uncertain of any Compliance Program standard or any other applicable law, regulation, rule or guideline.
11. Immediately notify the Compliance Officer if they become or may become an Ineligible person and therefore excluded from participation in the Federal Health Care Programs.

Fresno County Mental Health Compliance Program

Contractor Acknowledgment and Agreement

I hereby acknowledge that I have received, read and understand the Contractor Code of Conduct and Ethics. I hereby acknowledge that I have received training and information on the Fresno County Mental Health Compliance Program and understand the contents thereof. I further agree to abide by the Contractor Code of Conduct and Ethics, and all Compliance Program requirements as they apply to my responsibilities as a mental health contractor for Fresno County.

I understand and accept my responsibilities under this Agreement. I further understand that any violation of the Contractor Code of Conduct and Ethics or the Compliance Program is a violation of County policy and may also be a violation of applicable laws, regulations, rules or guidelines. I further understand that violation of the Contractor Code of Conduct and Ethics or the Compliance Program may result in termination of my agreement with Fresno County. I further understand that Fresno County will report me to the appropriate Federal or State agency.

For Individual Providers

Name (print): _____

Discipline: ☐ Psychiatrist ☐ Psychologist ☐ LCSW ☐ LMFT

Signature: _____ Date: ____/____/____

For Group or Organizational Providers

Group/Org. Name (print): _____

Employee Name (print): _____

Discipline: ☐ Psychiatrist ☐ Psychologist ☐ LCSW ☐ LMFT

☐ Other: _____

Job Title (if different from Discipline): _____

Signature: _____ Date: ____/____/____

DOCUMENTATION STANDARDS FOR CLIENT RECORDS

The documentation standards are described below under key topics related to client care. All standards must be addressed in the client record; however, there is no requirement that the record have a specific document or section addressing these topics. All medical records shall be maintained for a minimum of 10 years from the date of the end of the Agreement.

A. Assessments

1. The following areas will be included as appropriate as a part of a comprehensive client record.
 - Relevant physical health conditions reported by the client will be prominently identified and updated as appropriate.
 - Presenting problems and relevant conditions affecting the client's physical health and mental health status will be documented, for example: living situation, daily activities, and social support.
 - Documentation will describe client's strengths in achieving client plan goals.
 - Special status situations that present a risk to clients or others will be prominently documented and updated as appropriate.
 - Documentations will include medications that have been described by mental health plan physicians, dosage of each medication, dates of initial prescriptions and refills, and documentations of informed consent for medications.
 - Client self report of allergies and adverse reactions to medications, or lack of known allergies/sensitivities will be clearly documented.
 - A mental health history will be documented, including: previous treatment dates, providers, therapeutic interventions and responses, sources of clinical data, relevant family information and relevant results of relevant lab tests and consultations reports.
 - For children and adolescents, pre-natal and perinatal events and complete developmental history will be documented.
 - Documentations will include past and present use of tobacco, alcohol, and caffeine, as well as illicit, prescribed and over-the-counter drugs.
 - A relevant mental status examination will be documented.
 - A DSM-5 diagnosis, or a diagnosis from the most current ICD, will be documented, consistent with the presenting problems, history mental status evaluation and/or other assessment data.

2. Timeliness/Frequency Standard for Assessment

- An assessment will be completed at intake and updated as needed to document changes in the client's condition.
- Client conditions will be assessed at least annually and, in most cases, at more frequent intervals.

B. Client Plans

1. Client plans will:

- have specific observable and/or specific quantifiable goals
- identify the proposed type(s) of intervention
- have a proposed duration of intervention(s)
- be signed (or electronic equivalent) by:
 - the person providing the service(s), or
 - a person representing a team or program providing services, or
 - a person representing the MHP providing services
 - when the client plan is used to establish that the services are provided under the direction of an approved category of staff, and if the below staff are not the approved category,
 - a physician
 - a licensed/ "waivered" psychologist
 - a licensed/ "associate" social worker
 - a licensed/ registered/marriage and family therapist or
 - a registered nurse
- In addition,
 - Client plans will be consistent with the diagnosis, and the focus of intervention will be consistent with the client plan goals, and there will be documentation of the client's participation in and agreement with the plan. Examples of the documentation include, but are not limited to, reference to the client's participation and agreement in the body of the plan, client signature on the plan, or a description of the client's participation and agreement in progress notes.

- Client signature on the plan will be used as the means by which the CONTRACTOR(S) documents the participation of the client.
- When the client's signature is required on the client plan and the client refuses or is unavailable for signature, the client plan will include a written explanation of the refusal or unavailability.
- The CONTRACTOR(S) will give a copy of the client plan to the client on request.

2. Timeliness/Frequency of Client Plan:

- Will be updated at least annually.
- The CONTRACTOR(S) will establish standards for timeliness and frequency for the individual elements of the client plan described in item 1.

C. Progress Notes

1. Items that must be contained in the client record related to the client's progress in treatment include:

- The client record will provide timely documentation of relevant aspects of client care.
- Mental health staff/practitioners will use client records to document client encounters, including relevant clinical decisions and interventions.
- All entries in the client record will include the signature of the person providing the service (or electronic equivalent); the person's professional degree, licensure or job title; and the relevant identification number, if applicable.
- All entries will include the date services were provided.
- The record will be legible.
- The client record will document follow-up care, or as appropriate, a discharge summary.

2. Timeliness/Frequency of Progress Notes:

- Progress notes shall be documented at the frequency by type of service indicated below:
 - a. Every Service Contact
 - Mental Health Services
 - Medication Support Services
 - Crisis Intervention

STATE MENTAL HEALTH REQUIREMENTS

1. CONTROL REQUIREMENTS

The COUNTY and its subcontractors shall provide services in accordance with all applicable Federal and State statutes and regulations.

2. PROFESSIONAL LICENSURE

All (professional level) persons employed by the COUNTY Mental Health Program (directly or through contract) providing Short-Doyle/Medi-Cal services have met applicable professional licensure requirements pursuant to Business and Professions and Welfare and Institutions Codes.

3. CONFIDENTIALITY

CONTRACTOR(S) shall conform to and COUNTY shall monitor compliance with all State of California and Federal statutes and regulations regarding confidentiality, including but not limited to confidentiality of information requirements at 42, Code of Federal Regulations sections 2.1 *et seq*; California Welfare and Institutions Code, sections 14100.2, 11977, 11812, 5328; Division 10.5 and 10.6 of the California Health and Safety Code; Title 22, California Code of Regulations, section 51009; and Division 1, Part 2.6, Chapters 1-7 of the California Civil Code.

4. NON-DISCRIMINATION

A. Eligibility for Services

CONTRACTOR(S) shall prepare and make available to COUNTY and to the public all eligibility requirements to participate in the program plan set forth in the Agreement. No person shall, because of ethnic group identification, age, gender, color, disability, medical condition, national origin, race, ancestry, marital status, religion, religious creed, political belief or sexual preference be excluded from participation, be denied benefits of, or be subject to discrimination under any program or activity receiving Federal or State of California assistance.

B. Employment Opportunity

CONTRACTOR(S) shall comply with COUNTY policy, and the Equal Employment Opportunity Commission guidelines, which forbids discrimination against any person on the grounds of race, color, national origin, sex, religion, age, disability status, or sexual preference in employment practices. Such practices include

retirement, recruitment advertising, hiring, layoff, termination, upgrading, demotion, transfer, rates of pay or other forms of compensation, use of facilities, and other terms and conditions of employment.

C. Suspension of Compensation

If an allegation of discrimination occurs, COUNTY may withhold all further funds, until CONTRACTOR(S) can show clear and convincing evidence to the satisfaction of COUNTY that funds provided under this Agreement were not used in connection with the alleged discrimination.

D. Nepotism

Except by consent of COUNTY's Department of Behavioral Health Director, or designee, no person shall be employed by CONTRACTOR(S) who is related by blood or marriage to, or who is a member of the Board of Directors or an officer of CONTRACTOR(S).

5. PATIENTS' RIGHTS

CONTRACTOR(S) shall comply with applicable laws and regulations, including but not limited to, laws, regulations, and State policies relating to patients' rights

COMPLIANCE WITH STATE MEDI-CAL REQUIREMENTS

CONTRACTOR(S) shall be required to maintain organizational provider certification by the host county. A copy of this renewal certificate must be furnished to COUNTY within thirty (30) days of receipt of certificate from host county. The CONTRACTOR(S) must meet Medi-Cal organization provider standards as stated below. It is acknowledged that all references to Organizational Provider and/or Provider below shall refer to the CONTRACTOR(S).

Medi-Cal Organizational Provider Standards

1. The organizational provider possesses the necessary license to operate, if applicable, and any required certification.
2. The space owned, leased or operated by the provider and used for services or staff meets local fire codes.
3. The physical plant of any site owned, leased, or operated by the provider and used for services or staff is clean, sanitary and in good repair.
4. The organizational provider establishes and implements maintenance policies for any site owned, leased, or operated by the provider and used for services or staff to ensure the safety and well-being of beneficiaries and staff.
5. The organizational provider has a current administrative manual which includes: personnel policies and procedures, general operating procedures, service delivery policies, and procedures for reporting unusual occurrences relating to health and safety issues.
6. The organizational provider maintains client records in a manner that meets applicable state and federal standards.
7. The organization provider has staffing adequate to allow the COUNTY to claim federal financial participation for the services the Provider delivers to beneficiaries, as described in Division 1, Chapter 11, Subchapter 4 of Title 9, CCR, when applicable.
8. The organizational provider has as head of service a licensed mental health professional or other appropriate individual as described in Title 9, CCR, Sections 622 through 630.
9. For organizational providers that provide or store medications, the provider stores and dispenses medications in compliance with all pertinent state and federal standards. In particular:
 - A. All drugs obtained by prescription are labeled in compliance with federal and state laws. Prescription labels are altered only by persons legally authorized to do so.
 - B. Drugs intended for external use only or food stuffs are stored separately from drugs for internal use.
 - C. All drugs are stored at proper temperatures, room temperature drugs at 59-86 degrees F and refrigerated drugs at 36-46 degrees F.

- D. Drugs are stored in a locked area with access limited to those medical personnel authorized to prescribe, dispense or administer medication.
 - E. Drugs are not retained after the expiration date. IM multi-dose vials are dated and initialed when opened.
 - F. A drug log is maintained to ensure the provider disposes of expired, contaminated, deteriorated and abandoned drugs in a manner consistent with state and federal laws.
 - G. Policies and procedures are in place for dispensing, administering and storing medications.
10. The COUNTY may accept the host county's site certification and reserves the right to conduct an on-site certification review at least every three years. The COUNTY may also conduct additional certification reviews when:
- The provider makes major staffing changes.
 - The provider makes organizational and/or corporate structure changes (example: conversion from a non-profit status).
 - The provider adds day treatment or medication support services when medications shall be administered or dispensed from the provider site.
 - There are significant changes in the physical plant of the provider site (some physical plant changes could require a new fire clearance).
 - There is change of ownership or location.
 - There are complaints against the provider.
 - There are unusual events, accidents, or injuries requiring medical treatment for clients, staff or members of the community.

FRESNO COUNTY MENTAL HEALTH PLAN

Grievances

Fresno County Mental Health Plan (MHP) provides beneficiaries with a grievance and appeal process and an expedited appeal process to resolve grievances and disputes at the earliest and the lowest possible level.

Title 9 of the California Code of Regulations requires that the MHP and its fee-for-service providers give verbal and written information to Medi-Cal beneficiaries regarding the following:

- How to access specialty mental health services
- How to file a grievance about services
- How to file for a State Fair Hearing

The MHP has developed a Consumer Guide, a beneficiary rights poster, a grievance form, an appeal form, and Request for Change of Provider Form. All of these beneficiary materials must be posted in prominent locations where Medi-Cal beneficiaries receive outpatient specialty mental health services, including the waiting rooms of providers' offices of service.

Please note that all fee-for-service providers and contract agencies are required to give their clients copies of all current beneficiary information annually at the time their treatment plans are updated and at intake.

Beneficiaries have the right to use the grievance and/or appeal process without any penalty, change in mental health services, or any form of retaliation. All Medi-Cal beneficiaries can file an appeal or state hearing.

Grievances and appeals forms and self addressed envelopes must be available for beneficiaries to pick up at all provider sites without having to make a verbal or written request. Forms can be sent to the following address:

Fresno County Mental Health Plan
P.O. Box 45003
Fresno, CA 93718-9886
(800) 654-3937 (for more information)
(559) 488-3055 (TTY)

Provider Problem Resolution and Appeals Process

The MHP uses a simple, informal procedure in identifying and resolving provider concerns and problems regarding payment authorization issues, other complaints and concerns.

Informal provider problem resolution process – the provider may first speak to a Provider Relations Specialist (PRS) regarding his or her complaint or concern.

The PRS will attempt to settle the complaint or concern with the provider. If the attempt is unsuccessful and the provider chooses to forego the informal grievance process, the provider will be advised to file a written complaint to the MHP address (listed above).

Formal provider appeal process – the provider has the right to access the provider appeal process at any time before, during, or after the provider problem resolution process has begun, when the complaint concerns a denied or modified request for MHP payment authorization, or the process or payment of a provider's claim to the MHP.

Payment authorization issues – the provider may appeal a denied or modified request for payment authorization or a dispute with the MHP regarding the processing or payment of a provider's claim to the MHP. The written appeal must be submitted to the MHP within 90 calendar days of the date of the receipt of the non-approval of payment.

The MHP shall have 60 calendar days from its receipt of the appeal to inform the provider in writing of the decision, including a statement of the reasons for the decision that addresses each issue raised by the provider, and any action required by the provider to implement the decision.

If the appeal concerns a denial or modification of payment authorization request, the MHP utilizes a Managed Care staff who was not involved in the initial denial or modification decision to determine the appeal decision.

If the Managed Care staff reverses the appealed decision, the provider will be asked to submit a revised request for payment within 30 calendar days of receipt of the decision

Other complaints – if there are other issues or complaints, which are not related to payment authorization issues, providers are encouraged to send a letter of complaint to the MHP. The provider will receive a written response from the MHP within 60 calendar days of receipt of the complaint. The decision rendered by the MHP is final.

FRESNO COUNTY MENTAL HEALTH PLAN
INCIDENT REPORTING

PROTOCOL FOR COMPLETION OF INCIDENT REPORT

- The Incident Report must be completed for all incidents involving clients. The staff person who becomes aware of the incident completes the form, and the supervisor co-signs it.
- When more than one client is involved in an incident, a separate form must be completed for each client.

Where the forms should be sent – within 24 hours from the time of the incident or first knowledge of the incident:

- Incident Report should be sent to:

DBHIncidentreporting@fresnocountyca.gov **and** designated Contract Analyst

Fresno County Department of Behavioral Health-Incident Report

Send completed forms to dbhincidentreporting@co.fresno.ca.us and designated contract analyst within 24 hours of an incident or knowledge of an incident. **DO NOT COPY OR REPRODUCE/NOT** part of the medical record.

Client Information

Last Name: Click or tap here to enter text. First Name: Click or tap here to enter text. Middle Initial: Click or tap here to enter text.

Date of Birth: Click or tap here to enter text. Client ID#: Click or tap here to enter text. Gender: ☐ Male ☐ Female

County of Origin: Click or tap here to enter text.

Name of Reporting Party: Click or tap here to enter text.

Name of Facility: Click or tap here to enter text.

Facility Address: Click or tap here to enter text.

Facility Phone Number: Click or tap here to enter text.

Incident (check all that apply)

☐ Homicide/Homicide Attempt ☐ Attempted Suicide (resulting in serious injury) ☐ Death of Client ☐ Medical Emergency

☐ Injury (self-inflicted or by accident) ☐ Violence/Abuse/Attempts to Assault (toward others, client and/or property)

☐ Other- Specify (i.e. medication errors, client escaping from locked facility, fire, poisoning, epidemic outbreaks, other catastrophes/events that jeopardize the welfare and safety of clients, staff and /or members of the community): Click or tap here to enter text.

Date of Incident: Click or tap here to enter text. Time of Incident: Click or tap here to enter text. ☐ am ☐ pm

Location of Incident: Click or tap here to enter text.

Description of the Incident (Attach additional sheet if needed): Click or tap here to enter text.

Key People Directly Involved in Incident (witnesses, staff): Click or tap here to enter text.

Action Taken (check all that apply)

☐ Consulted with Physician ☐ Called 911/EMS ☐ First Aid/CPR Administered ☐ Law Enforcement Contacted

☐ Client removed from building ☐ Parent/Legal Guardian Contacted ☐ Other (Specify): Click or tap here to enter text.

Description of Action Taken: Click or tap here to enter text.

Outcome of Incident (If Known): Click or tap here to enter text.

Form Completed by: _____
Printed Name Signature Date

Reviewed by Supervisor/Program Manager: _____
Printed Name Signature Date

For Internal Use only:

☐ Report to Administration ☐ Report to Intensive Analysis Committee for additional review ☐ Request Additional Information

☐ No Action ☐ Unusual Occurrence ☐ Other: Click or tap here to enter text.

Vendor:				Contract#		Contact Person			Contact#			
Fixed Asset and Sensitive Item Tracking												
Item	Make/Brand	Model	Serial #	Fixed Asset	Sensitive Item	Date Requested (If Fixed Asset)	Date Approved (If Fixed Assset)	Purchase Date	Location	Condition	Fresno County Inventory Number	Cost
Copier	Canon	27CRT	9YHJY65R	x		3/27/2008	4/1/2008	4/10/2008	Heritage	New		\$6,500.00
DVD Player	Sony	DV2230	PXC4356A		x	n/a	n/a	4/1/2008	Heritage	New		\$450.00
Date Prepared:												
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Date Received: _____

FIXED ASSET AND SENSITIVE ITEM TRACKING

Field Number	Field Description	Instruction or Comments	Required or Conditional
Header	Vendor	Indicate the legal name of the agency contracted to provide services.	Required
Header	Program	Indicate the title of the project as described in the contract with the County.	Required
Header	Contract #	Indicate the assigned County contract number. If not known, County staff can provide.	Required
Header	Contact Person	Indicate the first and last name of the primary agency contact for the contract.	Required
Header	Contact #	Indicate the most appropriate telephone number of the primary agency contact for the contract.	Required
Header	Date Prepared	Indicate the most current date that the tracking form was completed by the vendor.	Required
a	Item	Identify the item by providing a commonly recognized description of the item	Required
b	Make/ Brand	Identify the company that manufactured the item	Required
c	Model	Identify the model number for the item if applicable.	Conditional
d	Serial #	Identify the serial number for the item if applicable.	Conditional
e	Fixed Asset	Mark the box with an "X" if the cost of the item is \$5,000 or more to indicate that the item is a fixed asset.	Conditional
f	Sensitive Item	Mark the box with an "X" if the item meets the criteria of a sensitive item as defined by the County.	Conditional
g	Date Requested	Indicate the date that the agency submitted a request to the County to purchase the item	Required
h	Date Approved	Indicate the date that the County approved the request to purchase the item	Required
i	Purchase Date	Indicate the date the agency purchased the item	Required
j	Location	Indicate the physical location of the item	Required
k	Condition	Indicate the general condition of the item (New, Good, Worn, Bad).	Required
l	Fresno County Inventory Number	Indicate the FR # provided by the County for the item	Conditional
m	Cost	Indicate the total purchase price of the item including sales tax and other costs, such as shipping.	Required

CULTURAL COMPETENCE FORM

Agency Name: _____

Program Category: _____

Identify the Agency's ability to apply language, gender, and culturally specific competencies to the services provided by checking all that apply and/or provide the name of Agency that you have an arrangement with to respond to these referrals.

A	B		C
Language, Gender, and/or Cultural Competence	Have staff 1	2	Name of Agency that you have an arrangement with to respond to these referrals
	Included in staffing work plan	Not included in staffing work plan. Explain below	
Spanish (Language)			
Vietnamese (Language)			
Other Language:			
LGBT Staff			
African American Staff			
Latino Staff			
Native American Staff			
Asian American Staff			
Pacific Islander Staff			
Others:			

NOTICE OF CHILD ABUSE REPORTING LAW

The undersigned hereby acknowledges that Penal Code section 11166 and the contractual obligations between County of Fresno (COUNTY) and CONTRACTOR(S) related to the provision of Cultural Specific Services, require that the undersigned report all known or suspected child abuse or neglect to one or more of the agencies set forth in Penal Code (PC) section (§) 11165.9.

For purposes of the undersigned's child abuse reporting requirements, "child abuse or neglect" includes physical injury inflicted by other than accidental means upon a child by another person, sexual abuse as defined in PC §11165.1, neglect as defined in PC §11165.2, willful cruelty or unjustifiable punishment as defined in PC §11165.3, and unlawful corporal punishment or injury as defined in PC §11165.4.

A child abuse report shall be made whenever the undersigned, in his or her professional capacity or within the scope of his or her employment, has knowledge of or observes a child whom the undersigned knows or reasonably suspects has been the victim of child abuse or neglect. (PC §11166.) The child abuse report shall be made to any police department or sheriff's department (not including a school district police or security department), or to any county welfare department, including Fresno County Department of Social Services' 24 Hour CARELINE. (See PC §11165.9.)

For purposes of child abuse reporting, a "reasonable suspicion" means that it is objectively reasonable for a person to entertain a suspicion, based upon facts that could cause a reasonable person in a like position, drawing, when appropriate, on his or her training and experience, to suspect child abuse or neglect. The pregnancy of a child does not, in and of itself, constitute a basis for reasonable suspicion of sexual abuse. (PC §11166(a)(1).)

Substantial penalties may be imposed for failure to comply with these child abuse reporting requirements.

Further information and a copy of the law may be obtained from the department head or designee.

I have read and understand the above statement and agree to comply with the child abuse reporting requirements.

SIGNATURE _____ DATE _____

DISCLOSURE OF OWNERSHIP AND CONTROL INTEREST STATEMENT

I. Identifying Information

Name of entity		D/B/A		
Address (number, street)		City	State	ZIP code
CLIA number	Taxpayer ID number (EIN)	Telephone number ()		

II. Answer the following questions by checking "Yes" or "No." If any of the questions are answered "Yes," list names and addresses of individuals or corporations under "Remarks" on page 2. Identify each item number to be continued.

- | | YES | NO |
|---|--------------------------|--------------------------|
| A. Are there any individuals or organizations having a direct or indirect ownership or control interest of five percent or more in the institution, organizations, or agency that have been convicted of a criminal offense related to the involvement of such persons or organizations in any of the programs established by Titles XVIII, XIX, or XX? | ☐ | ☐ |
| B. Are there any directors, officers, agents, or managing employees of the institution, agency, or organization who have ever been convicted of a criminal offense related to their involvement in such programs established by Titles XVIII, XIX, or XX? | ☐ | ☐ |
| C. Are there any individuals currently employed by the institution, agency, or organization in a managerial, accounting, auditing, or similar capacity who were employed by the institution's, organization's, or agency's fiscal intermediary or carrier within the previous 12 months? (Title XVIII providers only) | ☐ | ☐ |

III. A. List names, addresses for individuals, or the EIN for organizations having direct or indirect ownership or a controlling interest in the entity. (See instructions for definition of ownership and controlling interest.) List any additional names and addresses under "Remarks" on page 2. If more than one individual is reported and any of these persons are related to each other, this must be reported under "Remarks."

NAME	ADDRESS	EIN

- B. Type of entity: ☐ Sole proprietorship ☐ Partnership ☐ Corporation
 ☐ Unincorporated Associations ☐ Other (specify) _____
- C. If the disclosing entity is a corporation, list names, addresses of the directors, and EINs for corporations under "Remarks."
- D. Are any owners of the disclosing entity also owners of other Medicare/Medicaid facilities? (Example: sole proprietor, partnership, or members of Board of Directors) If yes, list names, addresses of individuals, and provider numbers. ☐ ☐

NAME	ADDRESS	PROVIDER NUMBER

YES NO

IV. A. Has there been a change in ownership or control within the last year? ☐ ☐
If yes, give date. _____

B. Do you anticipate any change of ownership or control within the year?..... ☐ ☐
If yes, when? _____

C. Do you anticipate filing for bankruptcy within the year?..... ☐ ☐
If yes, when? _____

V. Is the facility operated by a management company or leased in whole or part by another organization?..... ☐ ☐
If yes, give date of change in operations. _____

VI. Has there been a change in Administrator, Director of Nursing, or Medical Director within the last year?..... ☐ ☐

VII. A. Is this facility chain affiliated? ☐ ☐
(If yes, list name, address of corporation, and EIN.)

Name		EIN	
Address (number, name)	City	State	ZIP code

B. If the answer to question VII.A. is NO, was the facility ever affiliated with a chain?
(If yes, list name, address of corporation, and EIN.)

Name		EIN	
Address (number, name)	City	State	ZIP code

Whoever knowingly and willfully makes or causes to be made a false statement or representation of this statement, may be prosecuted under applicable federal or state laws. In addition, knowingly and willfully failing to fully and accurately disclose the information requested may result in denial of a request to participate or where the entity already participates, a termination of its agreement or contract with the agency, as appropriate.

Name of authorized representative (typed)	Title
Signature	Date

Remarks

**CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER
RESPONSIBILITY MATTERS--PRIMARY COVERED TRANSACTIONS**

INSTRUCTIONS FOR CERTIFICATION

1. By signing and submitting this proposal, the prospective primary participant is providing the certification set out below.
2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. The prospective participant shall submit an explanation of why it cannot provide the certification set out below. The certification or explanation will be considered in connection with the department or agency's determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
3. The certification in this clause is a material representation of fact upon which reliance was placed when the department or agency determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.
4. The prospective primary participant shall provide immediate written notice to the department or agency to which this proposal is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
5. The terms covered transaction, debarred, suspended, ineligible, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the department or agency to which this proposal is being submitted for assistance in obtaining a copy of those regulations.
6. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

CERTIFICATION

- (1) The prospective primary participant certifies to the best of its knowledge and belief, that it, its owners, officers, corporate managers and partners:
 - (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal department or agency;
 - (b) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

- (c) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.
- (2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Signature: _____

Date: _____

(Printed Name & Title)

(Name of Agency or Company)

SELF-DEALING TRANSACTION DISCLOSURE FORM

In order to conduct business with the County of Fresno (hereinafter referred to as "COUNTY"), members of a CONTRACTOR(S)' board of directors (hereinafter referred to as "County Contractor"), must disclose any self-dealing transactions that they are a party to while providing goods, performing services, or both for the COUNTY. A self-dealing transaction is defined below:

"A self-dealing transaction means a transaction to which the corporation is a party and in which one or more of its directors has a material financial interest"

The definition above will be utilized for purposes of completing this disclosure form.

INSTRUCTIONS

- (1) Enter board member's name, job title (if applicable), and date this disclosure is being made.
- (2) Enter the board member's company/agency name and address.
- (3) Describe in detail the nature of the self-dealing transaction that is being disclosed to the COUNTY. At a minimum, include a description of the following:
 - a. The name of the agency/company with which the corporation has the transaction; and
 - b. The nature of the material financial interest in the corporation's transaction that the board member has.
- (4) Describe in detail why the self-dealing transaction is appropriate based on applicable provisions of the Corporations Code.
- (5) Form must be signed by the board member that is involved in the self-dealing transaction described in Sections (3) and (4).

(1) Company Board Member Information:			
Name:		Date:	
Job Title:			
(2) Company/Agency Name and Address:			
(3) Disclosure (Please describe the nature of the self-dealing transaction you are a party to):			
(4) Explain why this self-dealing transaction is consistent with the requirements of Corporations Code 5233 (a):			
(5) Authorized Signature			
Signature:		Date:	