

CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY**PARTICIPATION AGREEMENT AMENDMENT NO. 1****Inter-Member Transfers (a.k.a Presumptive Transfer) ("Program")**

This Agreement Amendment No. 1 ("Amendment No. 1") amends Agreement No. 4928-PT-2023-FC ("Agreement"), a contract executed by and between the California Mental Health Service Authority ("CalMHSA") and Fresno County ("Participant") on March 25, 2024. This Amendment shall be effective upon execution by both parties.

Modified Program Term: This Amendment No. 1 modifies the Program Term end date from June 30, 2025 to June 30, 2027.

Modified Exhibit A. Section II. Program Overview: This Amendment No. 1 modifies Exhibit A, Section II, Program Overview, to incorporate additional information pertaining to Assembly Bill ("AB") 1051.

AB 1051 promotes timely access to Specialty Mental Health Services ("SMHS") for foster youth placed in out-of-county residential settings. Effective July 1, 2024, the county of original jurisdiction retains responsibility for SMHS in Community Treatment Facilities ("CTFs"), Group Homes ("GHs"), Short-Term Residential Therapeutic Programs ("STRTPs"), and Children's Crisis Residential Programs ("CCRP") unless specific conditions warrant exception. To facilitate timely provider payment, AB 1051 allows the use of existing contracts or new agreements between counties.

CalMHSA has been contracted to act as a fiscal agent to enable fund transfers on behalf of counties to allow Foster Children who are placed outside of their county of original jurisdiction ("Sending County") to access SMHS in a timely manner. The defined process is "presumptive transfer," which means a prompt transfer of the responsibility for the provision of or arranging and payment for SMHS from the Sending County to the county in which the Foster Child resides ("Receiving County"), as provided for by Welfare and Institution Code § 14717.1.

The implementation of this statute requires the establishment and operation of a mechanism to facilitate the timely remittance of payments between counties. Subject to mutual agreement between the Sending County and the Receiving County, claims related to SMHS for Foster Children placed in out-of-county residential settings, including but not limited to STRTPs, CTFs, GHs, and CCRPs, may be processed through the CalMHSA Presumptive Transfer Portal. This arrangement is intended to facilitate timely payment to service providers while ensuring continuity of care. Such agreements shall be documented in writing and comply with all applicable state regulations and Department of Health Care Services ("DHCS") guidelines.

CalMHSA operates a fund pool financed by all participants to facilitate timely, efficient, and accountable fund transfers between counties' accounts ("Funding Pool"). Each participating member county has a separate financial ledger account and will receive periodic statements of year-to-date balance, payments to other counties, payments from other counties, administration costs and interest earned.


CalMHSA has developed the CalMHSA Presumptive Transfer Portal which allows counties to transact through issuing invoices and requesting payments for fund transfers for services rendered to Foster Children from another jurisdiction, in addition to reviewing and verifying requests for transfer to allow for timely payments ("Member Portal").

Portal Support: CalMHSA provides email support Monday through Friday, 8:00 a.m. to 5:00 p.m. PST. For any support questions please email: support@calmhsa-members.org. The Portal may occasionally become temporarily unavailable for maintenance purposes. CalMHSA will make best efforts to minimize any such unavailability.

All other terms or provisions in the Agreement, not amended by this Amendment No. 1, shall remain in full force and effect.

IN WITNESS WHEREOF, the parties hereby confirm acceptance of the terms of this Amendment No. 1 by causing their duly authorized officers or representatives to execute this Amendment No. 1 as set out below.

PARTICIPANT: FRESNO COUNTY


Signed:  Name (Printed): Ernest Buddy Mendes
Title: Chairman, Board of Supervisors Date: 5/6/25

CalMHSA

Signed: _____ Name (Printed): Dr. Amie Miller, Psy.D., LMFT
Title: Executive Director Date: _____

FOR ACCOUNTING USE ONLY:

Fund/Subclass: 0001/10000
Organization: 56302005
Account #: 7295

ATTEST:
BERNICE E. SEIDEL
Clerk of the Board of Supervisors
County of Fresno, State of California
By  Deputy