

AMENDMENT II TO AGREEMENT

THIS AMENDMENT, hereinafter referred to as "Amendment II", is made and entered into this 20th day of June, 2017, by and between the **COUNTY OF FRESNO**, a Political Subdivision of the State of California, hereinafter referred to as "COUNTY", and **CENTRAL STAR BEHAVIORAL HEALTH, INC.**, a for-profit organization, whose address is 1501 Hughes Way, Suite 150, Long Beach, CA 90810, hereinafter referred to as "**CONTRACTOR**" (collectively as the "parties").

WHEREAS, the parties entered into that certain Agreement, identified as COUNTY Agreement No. 14-704, effective January 1, 2015, and COUNTY Amendment No. 14-704-1, effective May 24, 2016, (collectively referred to herein as "Agreement No. 14-704") whereby CONTRACTOR agreed to provide inpatient psychiatric services to youth, twelve (12) years of age to eighteen (18) years of age, who may be admitted on a voluntary or involuntary basis and may include Medi-Cal beneficiaries, Medicare and Medicare/Medi-Cal beneficiaries, indigent/uninsured consumers, and juvenile inmates who are referred by COUNTY'S Department of Behavioral Health (DBH), a contract provider with DBH, hospital emergency room, or other County departments and agencies; and

WHEREAS, the parties desire to amend COUNTY Agreement No. 14-704 and No. 14-704-1, regarding changes as stated below and restate the Agreement in its entirety.

NOW, THEREFORE, for good and valuable consideration, the receipt and adequacy of which is hereby acknowledged, the parties agree to amend the Agreement as follows:

1. That the text of Agreement No. 14-704 at Page Four (4), beginning with Line Fourteen (14), with the number "4." and ending on Page Ten (10), Line Twelve (12) with the word "(SED)" be deleted and the following inserted in its place:

"4. COMPENSATION

COUNTY agrees to pay CONTRACTOR and CONTRACTOR agrees to receive compensation in accordance with the budget set forth in Revised Exhibit B-1, attached hereto and by this reference incorporated herein and made part of this Agreement. For the period of April 1, 2015 through June 30, 2016, the COUNTY shall pay CONTRACTOR for operational costs for up to twelve (12) beds per day to assist in the program development/capacity of the PHF. The COUNTY and

1 CONTRACTOR agree that the CONTRACTOR will actively solicit and contract with other
2 entities/agencies for bed placement at the PHF at no cost to the COUNTY. CONTRACTOR will
3 provide the COUNTY, in writing, a list of secured contracts with hospitals, other agencies, and
4 counties utilizing the PHF. The COUNTY shall pay the CONTRACTOR for up to twelve (12) beds
5 per day for FY 2014-15 (April 1, 2015 through June 30, 2015) and FY 2015-16 (July 1, 2015 through
6 June 30, 2016), less any beds purchased and/or utilized and charged to other outside agencies.

7 A. Maximum Contract Amount

8 The maximum amount under this Agreement for the Ramp Up period (January 1,
9 2015 through March 31, 2015) shall not exceed Four Hundred Fifty-One Thousand, One Hundred
10 Eighty-Nine and No/100 Dollars (\$451,189.00) as identified in Revised Exhibit B-1.

11 1. The maximum amount for the initial operational term (April 1, 2015
12 through June 30, 2015) shall not exceed Nine Hundred Twenty-One Thousand, Six Hundred Forty-
13 Eight and No/100 Dollars (\$921,648.00). During the initial operating term, the facility will operate at
14 a twelve (12) bed capacity. COUNTY shall pay CONTRACTOR for operational costs for up to
15 twelve (12) beds per day, less any beds purchased and/or utilized and charged to other outside
16 agencies. The COUNTY shall pay CONTRACTOR Eight Hundred Forty-Four and No/100 Dollars
17 (\$844.00) for a daily bed rate.

18 For the initial operational term (April 1, 2015 through June 30, 2015), it is
19 understood by CONTRACTOR and COUNTY that CONTRACTOR estimates to generate Four
20 Hundred Thirty-Seven Thousand, Seven Hundred Eighty-Three and No/100 Dollars (\$437,783.00) in
21 Medi-Cal Federal Financial Participation to offset CONTRACTOR's program costs. It is further
22 understood that the amount of Mental Health Realignment, Private Insurance, and Uninsured payable
23 under this Agreement shall not exceed Four Hundred Eight-Three Thousand, Eight Hundred Sixty-
24 Five and No/100 Dollars (\$483,865.00) as set forth in the budget identified in Revised Exhibit B-1.

25 2. The maximum amount for the second operational term (July 1, 2015
26 through June 30, 2016) shall not exceed Three Million, Five Hundred Two Thousand, Eight Hundred
27 Forty and No/100 Dollars (\$3,502,840.00). During the second operational term, the facility will
28 operate at a twelve (12) bed capacity. The COUNTY shall pay the CONTRACTOR for twelve beds

1 per day, less any beds purchased and/or utilized and charged to other outside agencies. COUNTY
2 shall pay CONTRACTOR a daily bed rate of Seven Hundred Ninety-Seven and 55/100 Dollars
3 (\$797.55) for Fresno County clients.

4 For the second operational term (July 1, 2015 through June 30, 2016), it is
5 understood by CONTRACTOR and COUNTY that CONTRACTOR estimates to generate One
6 Million, Five Hundred Seventy-Six Thousand, Two Hundred Seventy-Eight and No/100 Dollars
7 (\$1,576,278.00) in Medi-Cal Federal Financial Participation to offset CONTRACTOR's program
8 costs. It is further understood that the amount of Mental Health Realignment, Private Insurance, and
9 Uninsured payable under this Agreement shall not exceed One Million, Nine Hundred Twenty-Six
10 Thousand, Five Hundred Sixty-Two and No/100 Dollars (\$1,926,562.00) as set forth in the budget
11 identified in Revised Exhibit B-1.

12 3, The maximum amount for the third operational term (July 1, 2016
13 through June 30, 2017) shall not exceed Four Million, One Hundred Sixty-One Thousand, Eight
14 Hundred Eighteen and No/100 Dollars (\$4,161,818.00). During the third operational term, the facility
15 will operate at a sixteen (16) bed capacity. The COUNTY shall pay the CONTRACTOR for twelve
16 (12) beds per day, less any beds purchased and/or utilized and charged to other outside agencies.
17 COUNTY shall pay CONTRACTOR a daily bed rate of Eight Hundred Forty-Four and No/Dollars
18 (\$844.00) for Fresno County clients. CONTRACTOR shall seek payment, if applicable, for any costs
19 above the maximum amount stated herein for FY 2016-17, from other outside agencies.

20 For the third operational term (July 1, 2016 through June 30, 2017), it is
21 understood by CONTRACTOR and COUNTY that CONTRACTOR estimates to generate One
22 Million, Eight Hundred Seventy-Two Thousand, Eight Hundred Eighteen and No/100 Dollars
23 (\$1,872,818.00) in Medi-Cal Federal Financial Participation to offset CONTRACTOR's program
24 costs. It is further understood that the amount of Mental Health Realignment, Private Insurance, and
25 Uninsured payable under this Agreement shall not exceed Two Million, Two Hundred Eighty-Nine
26 Thousand, and No/100 Dollars (\$2,289,000.00) as set forth in the budget identified in Revised Exhibit
27 B-1.

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1 4. The maximum amount for the fourth operational term (July 1, 2017
2 through June 30, 2018) shall not exceed Four Million, Two Hundred Eighty Thousand, Four Hundred
3 Eighty-Six and No/100 Dollars (\$4,280,486.00). During the fourth operational term, the facility will
4 operate at a sixteen (16) bed capacity. COUNTY shall pay CONTRACTOR for operational costs for
5 up to sixteen (16) beds per day, less any beds purchased and/or utilized and charged to other outside
6 agencies. The daily bed rate for Fresno County clients shall be Seven Hundred Thirty-Two and
7 96/100 Dollars (\$732.96), during this term.

8 For the fourth operational term (July 1, 2017 through June 30, 2018), it is
9 understood by CONTRACTOR and COUNTY that CONTRACTOR estimates to generate One
10 Million, Three Hundred Six Thousand, Seven Hundred Thirty-Five and No/100 Dollars
11 (\$1,306,735.00) in Medi-Cal Federal Financial Participation to offset CONTRACTOR's program
12 costs. It is further understood that the amount of Mental Health Realignment, private insurance,
13 uninsured, and other revenue payable under this Agreement shall not exceed Two Million, Nine
14 Hundred Seventy-Three Thousand, Seven Hundred Fifty-One and No/100 Dollars (\$2,973,751.00) as
15 set forth in the budget identified in Revised Exhibit B-1.

16 5. The maximum amount for the fifth operational term (July 1, 2018
17 through June 30, 2019) shall not exceed Four Million, Four Hundred Two Thousand, One Hundred
18 Thirty-Four and No/100 Dollars (\$4,402,134.00). During the fifth operational term, the facility will
19 operate at a sixteen (16) bed capacity. COUNTY shall pay CONTRACTOR for operational costs for
20 up to sixteen (16) beds per day, less any beds purchased and/or utilized and charged to other outside
21 agencies. The daily bed rate for Fresno County clients shall be Seven Hundred Fifty-Three and 79/100
22 Dollars (\$753.79), during this term.

23 For the fifth operational term (July 1, 2018 through June 30, 2019), it is
24 understood by CONTRACTOR and COUNTY that CONTRACTOR estimates to generate One
25 Million, Three Hundred Forty-Two Thousand, Six Hundred Fifty and No/100 Dollars (\$1,342,650.00)
26 in Medi-Cal Federal Financial Participation to offset CONTRACTOR's program costs. It is further
27 understood that the amount of Mental Health Realignment, private insurance, uninsured, and other
28 revenue payable under this Agreement shall not exceed Three Million, Fifty-Nine Thousand, Four

1 Hundred Eighty-Four and No/100 Dollars (\$3,059,484.00) as set forth in the budget identified in
2 Revised Exhibit B-1.

3 6. The maximum contract amount for the sixth operational term (July 1,
4 2019 through June 30, 2020) shall not exceed Four Million, Five Hundred Thirty-Nine Thousand,
5 Nine Hundred Eighty-One and No/100 Dollars (\$4,539,981.00). During the sixth operational term, the
6 facility will operate at a sixteen (16) bed capacity. COUNTY shall pay CONTRACTOR for
7 operational costs for up to sixteen (16) beds per day, less any beds purchased and/or utilized and
8 charged to other outside agencies. The daily bed rate for Fresno County clients shall be Seven
9 Hundred Seventy-Five and 27/100 Dollars (\$775.27), during this term.

10 For the sixth operational term (July 1, 2019 through June 30, 2020), it is
11 understood by CONTRACTOR and COUNTY that CONTRACTOR estimates to generate One
12 Million, Three Hundred Eighty-Four Thousand, Six Hundred Ninety-Four and No/100 Dollars
13 (\$1,384,694.00) in Medi-Cal Federal Financial Participation to offset CONTRACTOR's program
14 costs. It is further understood that the amount of Mental Health Realignment, private insurance,
15 uninsured, and other revenue payable under this Agreement shall not exceed Three Million, One
16 Hundred Fifty-Five Thousand, Two Hundred Eighty-Seven and No/100 Dollars (\$3,155,287.00) as set
17 forth in the budget identified in Revised Exhibit B-1.

18 7. In no event shall the total maximum compensation for actual services
19 performed under this Agreement be in excess of Twenty-Two Million, Two Hundred Sixty Thousand,
20 Ninety-Six and No/100 Dollars (\$22,260,096.00). It is understood that all expenses incidental to
21 CONTRACTOR's performance of services under this Agreement shall be borne by CONTRACTOR.

22 B. If CONTRACTOR fails to generate the Medi-Cal revenue amounts set forth in
23 Revised Exhibit B-1, the COUNTY shall not be obligated to pay the difference between the estimated
24 revenue and the actual revenue generated.

25 It is further understood by COUNTY and CONTRACTOR that any Medi-Cal
26 revenue and other reimbursement above the amounts stated herein will be used to directly offset the
27 COUNTY's contribution of funds identified in Revised Exhibit B-1. The offset of funds will also be
28 clearly identified in monthly invoices received from CONTRACTOR as further described in Section

1 Five (5) of this Agreement.

2 Travel shall be reimbursed based on actual expenditures and mileage
3 reimbursement shall be at CONTRACTOR's adopted rate per mile, not to exceed the Internal Revenue
4 Service published rate.

5 Payment shall be made upon certification or other proof satisfactory to
6 COUNTY's DBH that services have actually been performed by CONTRACTOR as specified in this
7 Agreement.

8 C. It is understood that all expenses incidental to CONTRACTOR's performance of
9 services under this Agreement shall be borne by CONTRACTOR. If CONTRACTOR fails to comply
10 with any provision of this Agreement, COUNTY shall be relieved of its obligation for further
11 compensation.

12 D. Payment shall be made by COUNTY to CONTRACTOR in arrears, for services
13 provided during the preceding month, within forty-five (45) days after the date of receipt and approval
14 by COUNTY of the monthly invoicing as described in Section Five (5) herein. Payment shall be made
15 after receipt and verification of actual expenditures incurred by CONTRACTOR in performance of
16 this Agreement and shall be documented to COUNTY on a monthly basis by the tenth (10th) of the
17 month following the month of said expenditures. The parties acknowledge that the CONTRACTOR
18 will be developing the PHF during the time period beginning at the execution of this Agreement
19 through March 31, 2015 and will be performing hiring, training, and credentialing of staff, configuring
20 the facility and office space, obtaining site certification from the County Mental Health Plan (Mental
21 Health Plan), and other administrative tasks associated with launching the PHF.

22 CONTRACTOR shall submit to the COUNTY by the tenth (10th) of each month
23 a detailed general ledger (GL) itemizing costs incurred in the previous month. Failure to submit GL
24 reports and supporting documentation shall be deemed sufficient cause for COUNTY to withhold
25 payments until there is compliance, as further described in Section Five (5) herein.

26 E. For the Ramp Up period (January 1, 2015 through March 31, 2015), payments
27 shall be made by COUNTY to CONTRACTOR in equal installments. COUNTY will pay to
28 CONTRACTOR on the twentieth (20th) of each month for the services to be provided the following

1 month in the arrears. CONTRACTOR shall submit to COUNTY by the tenth (10th) of the each month
2 a detailed general ledger (GL) itemizing cost incurred in the previous month. Each payment will be
3 reconciled to CONTRACTOR's GL, and any amounts identified as owed to COUNTY will be reduced
4 from COUNTY's next payment to CONTRACTOR. The first reconciliation shall be performed after
5 the third month of the facility's operation with subsequent reconciliation performed every month
6 thereafter. The parties agree that the CONTRACTOR shall have the PHF facility operational
7 commencing April 1, 2015. Failure to submit GL reports and supporting documentation shall be
8 deemed sufficient cause for COUNTY to withhold payments until there is compliance, as further
9 described in Section Five (5) herein.

10 F. For the operational period (April 1, 2015 through June 30, 2015), COUNTY
11 agrees to pay CONTRACTOR and CONTRACTOR agrees to receive compensation based upon actual
12 expenditures incurred by CONTRACTOR for monthly program costs, in accordance with the budget
13 identified in Revised Exhibit B-1.

14 For the operational period (July 1, 2017 through June 30, 2018) and every twelve
15 (12) month operational period following, COUNTY agrees to pay CONTRACTOR and
16 CONTRACTOR agrees to receive compensation based upon actual expenditures incurred by
17 CONTRACTOR for monthly program costs, in accordance with the budget identified in Revised
18 Exhibit B-1.

19 G. Except as provided below regarding State payment delays, payments by
20 COUNTY shall be in arrears, for services provided during the preceding month, within forty-five (45)
21 days after receipt, verification, and approval of CONTRACTOR's invoices by COUNTY's DBH. If
22 CONTRACTOR should fail to comply with any provisions of this Agreement, COUNTY shall be
23 relieved of its obligation for further compensation. All final claims and/or any final budget
24 modification request shall be submitted by CONTRACTOR within sixty (60) days following the final
25 month of service for which payment is claimed. No action shall be taken by COUNTY on claims
26 submitted beyond the sixty (60) day closeout period. Any compensation which is not expended by
27 CONTRACTOR pursuant to the terms and conditions of this Agreement shall automatically revert to
28 COUNTY.

1 The services provided by CONTRACTOR under Agreement are funded in whole or in
2 part by the State of California. In the even that funding for these services is delayed by the State
3 Controller, COUNTY may defer payment to CONTRACTOR. The amount of the deferred payment
4 shall not exceed the amount of funding delayed by the State Controller to COUNTY. The period of
5 time of the deferral by COUNTY shall not exceed the period of time of the State Controller's delay of
6 payment to COUNTY plus forty-five (45) days.

7 CONTRACTOR shall be held financially liable for any and all future
8 disallowances/audit exceptions due to CONTRACTOR's deficiency discovered through the State audit
9 process and COUNTY utilization review during the course of the agreement. At COUNTY's election,
10 the disallowed amount will be remitted within forty-five (45) days to COUNTY upon notification or
11 shall be withheld from subsequent payments to CONTRACTOR. CONTRACTOR shall not receive
12 reimbursement for any units of services rendered that are disallowed or denied by the COUNTY
13 Quality Improvement Committee utilization review process or through State Department of Health
14 Care Services (DHCS) cost report audit settlement process for Medi-Cal eligible clients.

15 H. It is understood by CONTRACTOR and COUNTY that this Agreement is
16 funded with mental health funds to service individuals with serious emotional disturbances (SED)."

17 2. That the text of Agreement No. 14-704 at Page Ten (10), beginning with Line Thirteen
18 (13), with the word number "5." and ending on Page Fourteen (14), Line Seventeen (17) with the word
19 "requirements" be deleted and the following inserted in its place:

20 "5. **INVOICING**

21 A. COUNTY's DBH shall invoice CONTRACTOR by the fifth (5th) day of
22 each month for the prior month's expenditures for security, janitorial, landscaping, building
23 maintenance and utilities for the PHF. CONTRACTOR shall provide payment for these expenditures
24 to County of Fresno, Department of Behavioral Health, Accounts Receivable, P.O. Box 712, Fresno,
25 CA 93717-0712, Attention: Business Office, within forty-five (45) days after the date of receipt by
26 CONTRACTOR of the monthly invoicing provided by COUNTY.

27 B. CONTRACTOR shall invoice COUNTY in arrears by the tenth (10th) day
28 of each month for the prior month's services rendered to DBHInvoices@co.fresno.ca.us. After

1 CONTRACTOR renders service to referred clients, CONTRACTOR will invoice COUNTY for
2 payment, certify the expenditure, and submit electronic claiming billing directly into COUNTY's
3 electronic information system for all clients, including those eligible for Medi-Cal as well as those that
4 are not eligible for Medi-Cal, including contracted cost per unit and actual cost per unit. COUNTY
5 must pay CONTRACTOR before submitting a claim to the State Department of Health Care Services
6 (DHCS) for Federal and State reimbursement for Medi-Cal eligible clients.

7 C. At the discretion of COUNTY's DBH Director, or designee, if an invoice
8 is incorrect or is otherwise not in proper form or substance, COUNTY's DBH Director, or designee
9 shall have the right to withhold payment as to only that portion of the invoice that is incorrect or
10 improper after five (5) days prior notice to CONTRACTOR. CONTRACTOR agrees to continue to
11 provide services for a period of ninety (90) days after notification of an incorrect or improper invoice.
12 If after the ninety (90) day period, the invoice(s) is still not corrected to COUNTY's DBH satisfaction,
13 COUNTY's DBH Director, or designee, may elect to terminate this Agreement, pursuant to the
14 termination provisions stated in Section Three (3) of this Agreement. In addition, for invoices
15 received ninety (90) days after the expiration of each term of this Agreement or termination of this
16 Agreement, at the discretion of COUNTY's DBH Director, or designee, COUNTY's DBH shall have
17 the right to deny payment of any additional invoices received.

18 D. Initial invoice for ramp up period (January 1, 2015 to March 31, 2015)
19 will not contain roster reporting. Monthly invoices during the operational period (after March 31,
20 2015) shall include a client roster identifying bed utilization unit/bed volume reported by payer group
21 for clients served (including clients from other agencies and third party payer of services) by month
22 and year-to-date. For the initial fifteen months of the operational contract (April 1, 2015 to June 30,
23 2016) the CONTRACTOR's client roster reporting will contain the twelve (12) bed funding
24 calculation as stated in Section Four (4) above.

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

1 deducted from the monthly invoice reimbursements. The invoices and general ledgers will serve as
2 tracking tools to determine if CONTRACTOR's program costs are in accordance with its budgeted
3 cost compared to actual cost per unit, as set forth in Revised Exhibit B-1. The actual cost per unit will
4 be based upon total costs and total units of service. It will also serve for the COUNTY to certify the
5 public funds expended for purposes of claiming federal reimbursement for the cost of Medi-Cal
6 services and activities. CONTRACTOR shall remit to COUNTY on a quarterly basis, a summary
7 report of total operational costs and volume of service units to report the actual costs per unit
8 compared to the negotiated rate, as identified in Revised Exhibit B-1, to report the interim cost per
9 unit. The quarterly reports will be used by COUNTY to ensure compliance with Federal and State
10 reimbursements certified public expenditures.

11 F. CONTRACTOR will remit annually within ninety (90) days from June
12 30, a schedule to provide the required information on published charges for all authorized services.
13 The published charge listing will serve as a source document to determine the CONTRACTOR's
14 usual and customary charge prevalent in the public mental health sector that is used to bill the general
15 public, insurers, or other non-Medi-Cal third party payers during the course of business operations.

16 G. CONTRACTOR shall submit monthly staffing report that identify all
17 direct service and support staff, applicable licensure/certification, and full-time hours worked to be
18 used as a tracking tool to determine if CONTRACTOR's program is staffed according to the services
19 provided under this Agreement.

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

23 I. CONTRACTOR is responsible for collection and managing data in a
24 manner to be determined by DHCS and the Mental Health Plan in accordance with applicable rules
25 and regulations. COUNTY electronic information system is a critical source of information for
26 purposes of monitoring service volume and obtaining reimbursement. CONTRACTOR must attend
27 COUNTY DBH's Business Office training on equipment reporting for assets, intangible and sensitive
28 minor assets, COUNTY's electronic information system, and related cost reporting.

1 J. CONTRACTOR 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. CONTRACTOR must submit a signed certified public expenditure
5 report with each respective monthly invoice. DHCS expects the claim for reimbursement to equal the
6 amount the COUNTY paid the CONTRACTOR for the service rendered less any funding sources not
7 eligible for Federal and State reimbursement.

8 K. CONTRACTOR must provide all necessary data to allow the COUNTY
9 to bill Medi-Cal, and any other third-part 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 L. If a client has other health coverage (OHC) such as private insurance, or
15 Federal Medicare, the CONTRACTOR 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. A copy
18 of explanation of benefits or CMS 1500 is required as documentation. CONTRACTOR must report
19 all revenue collection from OHC, third party, client-pay, or private-pay in each monthly invoice and in
20 the cost report that is required to be submitted. CONTRACTOR shall submit monthly invoices for
21 reimbursement that equal the amount due CONTRACTOR less any funding sources not eligible for
22 Federal and State reimbursement. CONTRACTOR must comply with all laws and regulations
23 governing the Federal Medicare program, including, but not limited to 1) the requirement of the
24 Medicare Act, 42 U.S.C. section 1395 et seq; and 2) the regulation and rules promulgated by the
25 Centers for Medicare and Medicaid Services as they relate to participation, coverage, and claiming
26 reimbursement. CONTRACTOR will be responsible for compliance as of the effective date of each
27 Federal, State, or local law or regulation specified.

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1 M. Data entry shall be the responsibility of the CONTRACTOR. The direct
2 specialty mental health services data must be reconciled by the CONTRACTOR to the monthly
3 invoices submitted for payment. COUNTY shall monitor the number the volume of services and cost
4 of services entered into the COUNTY's electronic information system. Any and all audit exceptions
5 resulting from the provision and billing of Medi-Cal services by CONTRACTOR shall be the sole
6 responsibility of the CONTRACTOR. CONTRACTOR will comply with all applicable policies,
7 procedures, directives, and guidelines regarding the use of COUNTY's electronic information system.

8 N. Medi-Cal Certification and Mental Health Plan Compliance

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

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

23 CONTRACTOR may provide direct specialty mental health services
24 using unlicensed staff as long as the individual is approved as a provider by the Mental Health Plan, is
25 supervised by licensed staff, works within his/her scope, and only delivers allowable specialty mental
26 health services. It is understood that each claim is subject to audit for compliance with Federal and
27 State regulations, and that COUNTY may be making payments in advance of said review. In the
28 event that a service is disapproved, COUNTY may, at its sole discretion, withhold compensation or set

1 off from other payments due the amount of said disapproved services. CONTRACTOR shall be
2 responsible for audit exceptions to ineligible dates of services or incorrect application of utilization
3 review requirements.”

4 3. That all references in Agreement No. 14-704 to “Exhibit A” shall be changed to read
5 “Revised Exhibit A,” attached hereto and incorporated herein by reference.

6 4. That all references in Agreement No. 14-704 to “Revised Exhibit B” shall be changed
7 to read “Revised Exhibit B-1,” attached hereto and incorporated herein by reference.

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

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

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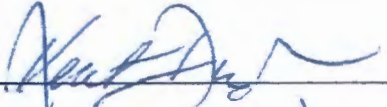
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1 IN WITNESS WHEREOF, the parties hereto have executed this Amendment II to COUNTY
2 Agreement No. 14-704 as of the day and year first hereinabove written.

3
4 **CONTRACTOR:**

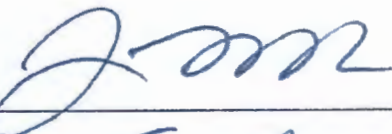
COUNTY OF FRESNO

5 **CENTRAL STAR BEHAVIORAL**
6 **HEALTH INC.**


7 By 
8 Print Name: Kent Dunlap
9 Title: President & CEO
10 Chairman of Board, or
11 President, or any Vice President

By 
Chairman, Board of Supervisors

Date: 10-20-17

12
13 By 
14 Print Name: Tara Morgan
15 Title: Secretary
16 Secretary (of Corporation), or
17 any Assistant Secretary, or
18 Chief Financial Officer, or
19 any Assistant Treasurer
20

BERNICE E. SEIDEL, Clerk
Board of Supervisors

By 
Deputy

21 **PLEASE SEE ADDITIONAL**
22 **SIGNATURE PAGE ATTACHED**

23 Mailing Address:
24 Central Star Behavioral Health, Inc.
25 1501 Hughes Way, Suite 150
Long Beach, CA 90810

26 Contact: Senior Vice President
27 Phone: (310) 221-6336 ext 125
28


1 APPROVED AS TO LEGAL FORM:
2 DANIEL C. CEDERBORG, COUNTY COUNSEL

3
4 By 

6 APPROVED AS TO ACCOUNTING FORM:
7 OSCAR J. GARCIA, C.P.A., AUDITOR-CONTROLLER/
8 TREASURER-TAX COLLECTOR

9
10 By 

11 REVIEWED AND RECOMMENDED FOR APPROVAL:

12
13 By 
14 Dawan Utecht, Director
15 Department of Behavioral Health

16
17 Fund/Subclass: 0001/10000
18 Account/Program: 7295/0
19 Organization: 56302112

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<u>Fiscal Year</u>	<u>Daily Bed Rate</u>	<u>Program Cost</u>
2014-15		\$451,189 (Ramp Up: January 1, 2015 – March 31, 2015)
2014-15	\$844.00	\$921,648 (Operational Period: April 1, 2015 – June 30, 2015)
2015-16	\$797.55	\$3,502,840
2016-17	\$844.00	\$4,161,818
2017-18	\$732.96	\$4,280,486
2018-19	\$753.79	\$4,402,134
2019-20	\$775.27	\$4,539,981

YOUTH ACUTE INPATIENT PSYCHIATRIC SERVICES
Psychiatric Health Facility (PHF)
Scope of Work

ORGANIZATION: Central Star Behavioral Health, Inc.

ADDRESS: 1501 Hughes Way, Suite 150, Long Beach, CA 90810

SITE ADDRESS: 4411 E. Kings Canyon Road, Fresno, CA, 93702

SERVICES: **Psychiatric Health Facility**

PROJECT DIRECTOR: Kent Dunlap, Senior Vice President
Phone Number: (310) 221-6336 ext. 125

CONTRACT PERIOD: January 1, 2015 - March 31, 2015 (ramp up period)
April 1, 2015 – June 30, 2015 with an option for five (5) twelve (12) month renewals (operational period)

CONTRACT AMOUNT: \$ 451,189 1/1/2015 through 3/31/2015 (ramp up period)
\$ 921,648 4/1/2015 through 6/30/2015 (initial operational period)
\$3,502,840 FY 2015-16
\$4,161,818 FY 2016-17
\$4,280,486 FY 2017-18
\$4,402,134 FY 2018-19
\$4,539,981 FY 2019-20

SCHEDULE OF SERVICES:

CONTRACTOR shall operate the youth Psychiatric Health Facility (PHF) 24 hours per day, seven (7) days per week. The PHF shall be located at 4411 E. Kings Canyon Road, Fresno, CA 93702, a COUNTY owned building, pursuant to a separate lease agreement between COUNTY and CONTRACTOR.

TARGET POPULATION:

The target population will include youth twelve (12) years of age up to 18 years of age, who may be admitted on a voluntary or involuntary basis. These clients will include Medi-Cal beneficiaries, Medicare and Medicare/Medi-Cal beneficiaries, and indigent/uninsured clients who are referred by the Department of Behavioral Health (DBH) and other County Departments, a contract provider with the DBH, a hospital emergency room (aka emergency department), Juvenile Hall, and other agencies.

PROJECT DESCRIPTION:

CONTRACTOR will implement a youth Psychiatric Health Facility (PHF) to serve 684 (57/month) clients for each 12 month period of this agreement. Services include intensive, acute care, trauma-informed residential treatment to youth twelve (12) years of age up to 18 years of age. CONTRACTOR will provide 12 beds for the initial fifteen (15) months of operation (April 1, 2015 through June 30, 2016). In Fiscal Year 2016-17, and each subsequent year, CONTRACTOR will provide for 16 beds at any given time. Fresno County Department of Behavioral Health will have a designated amount of dedicated beds as stated in Paragraph 4 of the Agreement. Program goal of the PHF is to provide acute psychiatric hospitalization, coordinated discharge planning and effective linkages to post-hospital outpatient mental health treatment programs and other supportive services for youth and their families.

CONTRACTOR shall be responsible to comply with the requirements of the Fresno County Mental Health Plan (FCMHP) and must complete and submit supporting documentation for all admissions regardless of payer source to the Fresno County Mental Health Plan (FCMHP). The FCMHP will perform a utilization review of all Medi-Cal beneficiaries to determine that the documentation demonstrates that medical necessity criteria, as defined by the California Department of Health Care Services. The 16 bed facility will be licensed by the State of California, Department of Health Care Services (DHCS), and meet all regulations required for operating a psychiatric health facility W&I Code 4080 Article 3; Health and Safety Code 1250.2 and meet Medi-Cal certification by the County.

CONTRACTOR shall be responsible to enter all Client Service Information, admission data and billing information into the County data system (AVATAR) and will be responsible for any and all audit exceptions pertaining to the delivery of services. The CONTRACTOR will also be responsible for the mandated reporting of patient information and admission/discharge data and other required reports to the Office of State Health Planning and Development (OSHDP), the California Department of Health Care Services, and meet the submission deadlines on June 30 and December 31 each calendar year.

CONTRACTOR'S RESPONSIBILITIES:

A. GOALS:

1. Management and alleviation of client's acute psychiatric symptoms to prevent clients from requiring inpatient services and use a less restrictive level of care.
2. Clinical program recovery/strength based with appropriate professional staffing on a 24 hour, 7 day a week basis.
3. Safe, secure and structured environment that promotes the clients wellness and recovery, including connections to family and community.
4. Comprehensive multi-disciplinary evaluation and client-centered care plan for each client.
5. Dietary services through the availability of nourishment or snacks in accordance with Title 22, Division 5, Chapter 9, Article 3, Section 77077. A dietician will be utilized for menu planning and assessment for dietary special needs, consistent with Title 22 requirements.
6. Admission procedures will be in place for voluntary and involuntary clients.
7. Treatment Planning – The Psychiatric Health Facility staff will provide the following services captured in written assessment and care plans:
 - a. Mental Status Examination
 - b. Medical Evaluation
 - c. Psycho-Social Assessment
 - d. Nursing Assessment
 - e. Multi-Disciplinary Milieu Treatment Program
 - f. Individualized Focused Treatment Planning
 - g. Aftercare Planning
8. Staffing
 - a. The staffing pattern and all staff working at the PHF shall meet all State licensing and regulatory requirements including medical staff standards, nursing staff standards, social work and rehabilitation staff requirements pursuant to Title 9, Division 1, Chapter 11,

Article 3, Section 1840.348 of the California Code of Regulations for Psychiatric Health Facilities All staff, which requires state licensure or certification, will be required to be licensed or certified in the State of California and be in good standing with the state licensing or certification board.

- b. All facility staff, who provide direct patient care or perform coding/billing functions, must meet the requirements of the FCMHP Compliance Program. This includes the screening for excluded persons and entities by accessing or querying the applicable licensing board(s), the National Practitioner Data Bank (NPDB), Office of Inspector General's List of Excluded Individuals/Entities (LEIE), Excluded Parties List System (EPLS) and Medi-Cal Suspended and Ineligible List prior to hire and monthly thereafter. In addition, all licensed/registered/waivered staff must complete a FCMHP Provider Application and be credentialed by the FCMHP's Credentialing Committee. All licensed staff shall have Department of Justice (DOJ), Federal Bureau of Investigation (FBI), and Sheriff fingerprinting (Lives can) executed.
 - c. Peer and/or Family Support staff will help to educate, support and advocate on behalf of children, youth and their families during the hospitalization and will assist with discharge planning and the transition to follow-up care.
9. Medical Records and Mandated Reporting:
- a. The CONTRACTOR shall be responsible to enter all Client Service Information, admission data and billing information into the County data system (AVATAR) and will be responsible for any and all audit exceptions pertaining to the delivery of services.
 - b. The CONTRACTOR will be responsible for "release of information" requests for the PHF and shall adhere to applicable federal and state regulations.
 - c. The CONTRACTOR will report information and admission/discharge data to the Office of Statewide Health Planning and Development and meet the submission deadlines of June 30 and December 31 each calendar year.
10. Organized Clinical Staff - clinical staff will be licensed mental health professionals as well as Rehabilitation Therapists with appropriate education, credentialing and experience to reach status as a Qualified Mental Health Professional (QMHP).
11. Pharmaceutical and Medication Services – controls traditional to PHF's for pharmaceutical and medication services will be reflected. CONTRACTOR will have policies, procedures and physician/nursing protocols in place regarding medication labeling, storage/security, orders, use of med carts, administration, polypharmacy, and monitoring response will observed.
12. Physical Health Care – CONTRACTOR will contract with a primary care physician and a registered dietician. CONTRACTOR will provide a full health history upon admission. CONTRACTOR will have a written agreement with one or more acute care hospitals to provide services for youth requiring additional needed services.
13. Schedule of Active Therapies - CONTRACTOR shall provide a daily schedule of therapeutic activities that will be provided as part of the clinical treatment program. The schedule shall include wellness education with motivational support, psycho-social and life skill building groups on varied topics, family therapy, creative expressive arts, recreational and fitness programs. The treatment team is expected to schedule clients participation activities tailored to each client's individual needs. There will also be daily meetings among the staff and youth for general education and guidance about unit activities and to collectively address milieu living issues.
14. Utilization Review, Billing and Cost Report:

- a. CONTRACTOR shall notify the Department of any admission of a County client within 24 hours or the next business day in a manner approved by the County. The notification method shall be mutually acceptable by both County and CONTRACTOR.
- b. CONTRACTOR shall be responsible to insure that documentation in the client's medical record meets medical necessity criteria for the hours of service submitted to County for reimbursement by federal intermediaries, third-party payers and other responsible parties.
- c. CONTRACTOR shall enter all mental health data and billing information into the County data system and will be responsible for any and all audit exceptions pertaining to the delivery of services. **For Medi-Cal billing denials by the State, CONTRACTOR will maintain an error rate no greater than five percent (5%).**
- d. CONTRACTOR shall submit a complete and accurate State of California Department of Health Care Services Short (DHCS)/Doyle Medi-Cal Cost Report for each fiscal year ending June 30th affected by the proposed agreement within 90 days following the end of each fiscal year.
- e. CONTRACTOR shall insure that cost reports are prepared in accordance with general accounting principles and the standards set forth by the DHCS and the County.

15. Patients Rights and Certification Review Hearings

- a. CONTRACTOR shall adopt and post in a conspicuous place a written policy on patient rights in accordance with section 70707 of Title 22 of the California Code of Regulations and section 5325.1 of the California Welfare and Institutions Code and Title 42 Code of Federal Regulations section 438.100.
- b. CONTRACTOR shall allow access to County clients by the Patients' Rights Advocate designated by the County.
- c. CONTRACTOR shall conduct Mental Health Certification Review Hearings in accordance with regulations in a location within the facility that allows for confidentiality and is compatible with and is least disruptive to the treatment being provided to the County patient.

16. Grievances and Incident Reports - CONTRACTOR shall log all grievances and the disposition of all grievances received from a client or a client's family in accordance with Fresno County Mental Health Plan policies and procedures as indicated within Exhibit H. CONTRACTOR shall provide a summary of the grievance log entries concerning County-sponsored clients to the Department of Behavioral Health Director or designee at monthly intervals, by the fifteenth (15th) day of the following month, in a format that is mutually agreed upon. CONTRACTOR shall post signs, provided by the County, informing clients of their right to file a grievance and appeal.

CONTRACTOR shall notify County of all incidents or unusual occurrences reportable to state licensing bodies that affect County clients within twenty-four (24) hours. The CONTRACTOR shall use the Incident Report form as indicated within Exhibit I for such reporting.

Within fifteen (15) days after each grievance or incident affecting County-sponsored clients, CONTRACTOR shall provide County with the complaint and CONTRACTOR'S disposition of, or corrective action taken to resolve the complaint or incident.

Within fifteen (15) days after CONTRACTOR submits a corrective action plan to a California State licensing and/or accrediting body concerning any sentinel event, as the term is defined by the licensing or accrediting agency, and within fifteen (15) days after CONTRACTOR receives a corrective action order from a California State licensing and/or accrediting body to address a sentinel event, CONTRACTOR shall provide a summary of such plans and orders to County.

B. OBJECTIVES

1. Safe and Secure Environment - to provide for clinical and medical assessment, diagnostic formulation, crisis intervention, medication management and clinical treatment for mental health clients with acute psychiatric disorder. All client care staff will be trained and certified by a nationally recognized assault crisis training that is principally focused on crisis prevention and de-escalation.
2. Provide the appropriate type and level of staffing to provide for a clinical effective program design.
3. Provide an intensive treatment program which has individualized client care plans.
4. Stabilize consumers as soon as possible in order to assist them in their recovery from mental illness.
5. Effectively partner with other programs in the Crisis Intervention Redesign in accepting County consumers for admission for acute inpatient psychiatric services and also to work collaboratively in discharge planning to insure appropriate ongoing outpatient specialty mental health treatment services are provided.
6. Identify County consumers with frequent admissions during the fiscal year and to develop strategies with other County and community agencies to reduce readmissions.
7. Effectively interact with community agencies, other mental health programs and providers, natural support systems and families to assist consumers to be discharged to the more appropriate level of care.
8. Integrate mental health and substance abuse services through comprehensive continuous integrated systems of care for the life span of those served and to work as partners with a shared vision: to create a coordinated and comprehensive system of service delivery. The CONTRACTOR shall perform the following:
 - a. Demonstrate familiarity with the County Comprehensive Continuation Integrated System of Care (CCISC) consensus document and with the process of CCISC implementation, both in terms of county level activities, as well as the continuous quality improvement process that each program organizes in order to make progress toward co-occurring disorder capability.
 - b. Conduct an on going agency self survey using the COMPASSTM (Co-Morbidity Program Audit and Self-Survey for behavioral health services), using the recommended focus group process to engage staff of all levels in the conversation.
 - c. Identify a Change Agent to represent the program, and support that Change Agent to participate actively in the County change agent team. The role of the change agent is to provide training and supervision in accordance with the principles of the Comprehensive Continuous Integrated Systems of Care model in order to establish and enhance dual diagnosis competency in program staff and to provide consultation to facilitate development and implementation of quality improvement action planning to establish and enhance dual diagnosis capability in the program as a whole.
 - d. Develop a formal written Continuous Quality Improvement (CQI) action plan to identify measurable objectives toward the achievement of Co-Occurring Disorders (COD) capability that will be addressed by the program during the contract period. These objectives should be ACHIEVABLE and REALISTIC for the program, based on the self assessment and the program priorities, but need to include attention to making progress on the following issues, at minimum (as outlined in the Charter):

1. Welcoming policies, practices, and procedures related to the engagement of individuals with co-occurring issues and disorders;
2. Removal or reduction of access barriers to admission based on co-occurring diagnosis or medication;
3. Improvement in routine integrated screening, and identification in the data system of how many clients served have co-occurring issues;
4. Developing the goal of basic co-occurring competency for all treatment staff, regardless of licensure or certification, and
5. Documentation of coordination of care with collaborative mental health and/or substance abuse providers for each client.

C. Regarding cultural and linguistic competence requirements:

1. CONTRACTOR shall provide services as stated in section 29 of the Agreement.

D. Regarding direct admissions to the PHF from COUNTY DBH programs or its contracted providers, the CONTRACTOR agrees to the following:

1. To allow direct admits from COUNTY DBH programs or its contracted providers when PHF beds are available.
2. Said direct admits shall not require medical clearance. However, in the event a referred client is known to possess a contagious medical condition, said patient shall be medically cleared by a local hospital prior to admission to the PHF operated by CONTRACTOR.

E Regarding the provision of court testimony related to PHF patients, CONTRACTOR agrees to the following:

1. CONTRACTOR'S appropriate staff shall provide court testimony relevant to PHF clients when required.

COUNTY RESPONSIBILITIES:

COUNTY shall:

1. Perform a utilization review (through its FCMHP) of all Medi-Cal beneficiaries to determine that the documentation demonstrates that medical necessity criteria as defined by the California Department of Health Care Services (DHCS) was met for each period of the admission, except for the episode of discharge.
2. Provide oversight (through the County Department of Behavioral Health (DBH), Children's Mental Health Division Manager or designee) of the CONTRACTOR'S PHF program. In addition to contract monitoring of program(s), oversight includes, but not limited to, coordination with the State Department of Health Care Services in regard to program administration and outcomes.
3. Assist the CONTRACTOR in making linkages with the total mental health system. This will be accomplished through regularly scheduled meetings as well as formal and informal consultation.
4. Participate in evaluating the progress of the overall program and the efficiency of collaboration with the CONTRACTOR staff and will be available to the contractor for ongoing consultation.
5. Receive and analyze statistical outcome data from CONTRACTOR throughout the term of contract on a monthly basis. DBH will notify the CONTRACTOR when additional participation is required. The

performance outcome measurement process will not be limited to survey instruments but will also include, as appropriate, client and staff interviews, chart reviews, and other methods of obtaining required information.

6. Recognize that cultural competence is a goal toward which professionals, agencies, and systems should strive. Becoming culturally competent is a developmental process and incorporates at all levels the importance of culture, the assessment of cross-cultural relations, vigilance towards the dynamics that result from cultural differences, the expansion of cultural knowledge, and the adaptation of services to meet culturally-unique needs. Offering those services in a manner that fails to achieve its intended result due to cultural and linguistic barriers is not cost effective. To assist the CONTRACTOR'S efforts towards cultural and linguistic competency, DBH shall provide the following at no cost to CONTRACTOR:
 - A. Technical assistance to CONTRACTOR regarding cultural competency requirements and sexual orientation training.
 - B. Mandatory cultural competency training including sexual orientation and sensitivity training for CONTRACTOR personnel, at minimum once per year. County will provide mandatory training regarding the special needs of this diverse population and will be included in the cultural competence training(s). Sexual orientation and sensitivity to gender differences is a basic cultural competence principle and shall be included in the cultural competency training. Literature suggests that the mental health needs of lesbian, gay, bisexual, transgender (LGBT) individuals may be at increased risk for mental disorders and mental health problems due to exposure to societal stressors such as stigmatization, prejudice and anti-gay violence. Social support may be critical for this population. Access to care may be limited due to concerns about providers' sensitivity to differences in sexual orientation.
 - C. Technical assistance for CONTRACTOR in translating behavioral health and substance abuse services information into DBH's threshold languages (Spanish, Laotian, Cambodian and Hmong). Translation services and costs associated will be the responsibility of the CONTRACTOR.

Child-Adolescent Psychiatric Health Facility (16 Bed)

Central Star Behavioral Health, Inc.

Start Up Budget - proposed start date through proposed end date (FY 2014-15 - Jan-Mar 2015)

Budget Categories -				Total Proposed Budget		
Line Item Description (Must be itemized)			FTE %	Admin.	Direct	Total
PERSONNEL SALARIES:						
0001	RN-DON		1.00	\$0	\$16,640	\$16,640
0002	RN		3.20	\$0	\$10,677	\$10,677
0003	LVN		2.80	\$0	\$5,096	\$5,096
0004	Rehab Therapist		1.40	\$0	\$2,548	\$2,548
0005	Rehab Aide		3.00	\$0	\$3,500	\$3,500
0006	Youth Counselor		16.80	\$0	\$20,952	\$20,952
0007	Admissions Coordinator		1.00	\$0	\$2,427	\$2,427
0008	Family Advocate		1.00	\$0	\$1,400	\$1,400
0009	Social Workers		2.80	\$0	\$7,159	\$7,159
0010	Program Director		1.00	\$0	\$10,400	\$10,400
0011	Cook		2.10	\$0	\$2,452	\$2,452
0012	Administrator		0.75	\$22,246	\$0	\$22,246
0013	HR Manager		0.50	\$7,353	\$0	\$7,353
0014	QA Medical Records		0.50	\$1,083	\$0	\$1,083
0015	Training Coordinator		0.50	\$1,065	\$0	\$1,065
0016	Billing Clerk		1.00	\$953	\$0	\$953
0017	Maintenance Tech		1.00	\$1,333	\$0	\$1,333
0018	Housekeeper		1.50	\$1,249	\$0	\$1,249
		SALARY TOTAL	41.85	\$35,282	\$83,249	\$118,532
PAYROLL TAXES:						
0030	FICA/MEDICARE			\$2,699	\$6,369	\$9,068
0031	SUI			\$190	\$449	\$639
0032	FUTA			\$332	\$783	\$1,115
		PAYROLL TAX TOTAL		\$3,221	\$7,601	\$10,822
EMPLOYEE BENEFITS:						
0040	Retirement			\$29	\$0	\$29
0041	Workers Compensation			\$1,750	\$4,129	\$5,879
0042	Health Insurance (medical, vision, life, dental, 401k)			\$1,130	\$0	\$1,130
		EMPLOYEE BENEFITS TOTAL		\$2,909	\$4,129	\$7,038
	SALARY & BENEFITS GRAND TOTAL					\$136,392
FACILITIES/EQUIPMENT EXPENSES:						
1010	Offsite Lease - Admin/Business Office					\$1,500
1011	Leased Equipment					\$1,180
1012	Telecommunications					\$17,155
1013	Utilities					\$6,895
1014	Maintenance					\$1,943
		FACILITY/EQUIPMENT TOTAL				\$28,673
OPERATING EXPENSES:						
1060	Purchased Services					\$1,400
1061	Office Supplies					\$2,000
1062	Housekeeping Supplies					\$800

Child-Adolescent Psychiatric Health Facility (16 Bed)

Child-Adolescent Psychiatric Health Facility (16 Bed)

Central Star Behavioral Health, Inc.

Start Up Budget - proposed start date through proposed end date (FY 2014-15 - Jan-Mar 2015)

DIRECT SERVICE REVENUE:			Vol/Units of Svc	Rate	\$ Amt.
3000		Mental Health Services			\$0.00
		<i>(Assessment, Plan of Care, Individual/Family/Group Therapy, Rehab)</i>			
3100		Case Management, Linkage/Brokerage			\$0
3200		Crisis Intervention			\$0
3300		Medication Support			\$0
3301		Crisis Stabilization - Urgent Care			\$0
3302		Psychiatric Health Facility			\$0
		DIRECT SERVICE REVENUE TOTAL	0		\$0
			Medi-cal Revenue		#REF!
			Cost Per Unit		#DIV/0!
FUNDING STREAMS REIMBURSEMENT					
4000		Realignment Funding		\$451,189.00	\$451,189
4100		Other			
4200		Other			
4300		Other			
		REVENUE TOTAL			\$451,189

Child-Adolescent Psychiatric Health Facility (16 Bed) operated at a 12 bed capacity

Central Star Behavioral Health, Inc.

Operational Budget (April 1, 2015 through June 30, 2015)

Budget Categories -				Total Proposed Budget		
Line Item Description (Must be itemized)			FTE %	Admin.	Direct	Total
PERSONNEL SALARIES:						
0001	RN-DON		1.00	\$0	\$24,960	\$24,960
0002	RN		3.20	\$0	\$64,064	\$64,064
0003	LVN		2.80	\$0	\$30,576	\$30,576
0004	Rehab Therapist		1.40	\$0	\$15,288	\$15,288
0005	Rehab Aide		3.00	\$0	\$20,998	\$20,998
0006	Youth Counselor		16.80	\$0	\$125,711	\$125,711
0007	Admissions Coordinator		1.00	\$0	\$14,560	\$14,560
0008	Family Advocate		1.00	\$0	\$8,398	\$8,398
0009	Social Workers		2.80	\$0	\$42,952	\$42,952
0010	Program Director		1.00	\$0	\$15,600	\$15,600
0011	Cook		2.10	\$0	\$14,709	\$14,709
0012	Administrator		0.75	\$22,246	\$0	\$22,246
0013	HR Manager		0.50	\$7,353	\$0	\$7,353
0014	QA Medical Records		0.50	\$6,500	\$0	\$6,500
0015	Training Coordinator		0.50	\$6,391	\$0	\$6,391
0016	Billing Clerk		1.00	\$5,720	\$0	\$5,720
0017	Maintenance Tech		1.00	\$7,998	\$0	\$7,998
0018	Housekeeper		1.50	\$7,496	\$0	\$7,496
		SALARY TOTAL	41.85	\$63,703	\$377,816	\$441,518
PAYROLL TAXES:						
0030	FICA/MEDICARE			\$4,873	\$28,903	\$33,776
0031	SUI			\$344	\$2,040	\$2,384
0032	FUTA			\$599	\$3,551	\$4,150
		PAYROLL TAX TOTAL		\$5,816	\$34,494	\$40,310
EMPLOYEE BENEFITS:						
0040	Retirement			\$2,797	\$16,586	\$19,383
0041	Workers Compensation			\$3,160	\$18,740	\$21,900
0042	Health Insurance (medical, vision, life, dental, 401k)			\$7,294	\$43,260	\$50,554
		EMPLOYEE BENEFITS TOTAL		\$13,250	\$78,586	\$91,837
	SALARY & BENEFITS GRAND TOTAL					\$573,665
FACILITIES/EQUIPMENT EXPENSES:						
1010	Offsite Lease - Admin/Business Office					\$1,500
1011	Leased Equipment					\$1,770
1012	Telecommunications					\$8,250
1013	Utilities					\$17,750
1014	Maintenance					\$1,500
1015	Security-Access Control System & Cameras					\$0
		FACILITY/EQUIPMENT TOTAL				\$30,770
OPERATING EXPENSES:						
1060	Purchased Services					\$19,751
1061	Office Supplies					\$500

[illegible]

Child-Adolescent Psychiatric Health Facility (16 Bed) operated at a 12 bed capacity

Central Star Behavioral Health, Inc.

Operational Budget (April 1, 2015 through June 30, 2015)

DIRECT SERVICE REVENUE:			Vol/Units of Svc	Rate	\$ Amt.
3000		Mental Health Services			\$0.00
		<i>(Assessment, Plan of Care, Individual/Family/Group Therapy, Rehab)</i>			
3100		Case Management, Linkage/Brokerage			\$0
3200		Crisis Intervention			\$0
3300		Medication Support			\$0
3301		Crisis Stabilization - Urgent Care			\$0
3302		Psychiatric Health Facility	12 beds	1,092	\$844.00
		DIRECT SERVICE REVENUE TOTAL	1,092		\$921,648
				Medi-cal Revenue	\$875,566
				Cost Per Unit	\$844.00
FUNDING STREAMS REIMBURSEMENT		Population Served Percentage			
4000		Private Insurance	3%		\$27,649
4100		Uninsured	2%		\$18,433
4200		Medi-Cal FFP	95%		\$437,783
4300		2011 Realignment			\$437,783
		REVENUE TOTAL			\$921,648

Child-Adolescent Psychiatric Health Facility (12 Bed)						
Central Star Behavioral Health, Inc.						
July 1, 2015 through June 30, 2016						
Budget Categories -				Total Proposed Budget		
Line Item Description (Must be itemized)			FTE %	Admin.	Direct	Total
PERSONNEL SALARIES:						
0001	RN-DON		1.00	\$0	\$101,464	\$101,464
0002	RN		3.20	\$0	\$260,425	\$260,425
0003	LVN		2.80	\$0	\$124,294	\$124,294
0004	Rehab Therapist		1.40	\$0	\$62,147	\$62,147
0005	Rehab Aide		1.40	\$0	\$39,833	\$39,833
0006	Youth Counselor		15.40	\$0	\$468,439	\$468,439
0008	Family Advocate		1.00	\$0	\$34,138	\$34,138
0009	Social Workers		2.80	\$0	\$174,603	\$174,603
0010	Program Director		1.00	\$0	\$63,415	\$63,415
0011	Cook		2.10	\$0	\$59,794	\$59,794
0012	Administrator		0.75	\$111,946	\$0	\$111,946
0013	UR/QA/Medical Records		1.00	\$58,203	\$0	\$58,203
0014	HR/Training/Admin Asst		1.00	\$66,470	\$0	\$66,470
0015	Billing Clerk		1.00	\$23,252	\$0	\$23,252
0016	Maintenance Tech		0.50	\$16,255	\$0	\$16,255
0017	Housekeeper		1.90	\$38,597	\$0	\$38,597
		SALARY TOTAL	38.25	\$314,723	\$1,388,552	\$1,703,275
PAYROLL TAXES:						
0030	FICA/MEDICARE			\$24,076	\$106,225	\$130,301
0031	SUI			\$1,699	\$7,497	\$9,196
0032	FUTA			\$2,958	\$13,053	\$16,011
		PAYROLL TAX TOTAL		\$28,734	\$126,775	\$155,509
EMPLOYEE BENEFITS:						
0040	Retirement			\$11,141	\$49,156	\$60,297
0041	Workers Compensation			\$15,610	\$68,873	\$84,483
0042	Health Insurance (medical, vision, life, dental, 401k)			\$36,036	\$158,989	\$195,025
		EMPLOYEE BENEFITS TOTAL		\$62,787	\$277,018	\$339,805
	SALARY & BENEFITS GRAND TOTAL					\$2,198,589
FACILITIES/EQUIPMENT EXPENSES:						
1010	Offsite Lease - Admin/Business Office					\$6,000
1011	Leased Equipment					\$14,443
1012	Telecommunications					\$39,229
1013	Utilities					\$84,383
1014	Maintenance					\$23,782
		FACILITY/EQUIPMENT TOTAL				\$167,837
OPERATING EXPENSES:						
1060	Purchased Services					\$38,878
1061	Office Supplies					\$18,729
1062	Housekeeping Supplies					\$6,365
1063	Education & Training					\$3,180
1064	Licenses					\$2,808

TOTAL PROGRAM EXPENSES	\$3,502,838
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Child-Adolescent Psychiatric Health Facility (12 Bed)

Central Star Behavioral Health, Inc.

July 1, 2015 through June 30, 2016

DIRECT SERVICE REVENUE:			Vol/Units of Svc	Rate	\$ Amt.
3000		Mental Health Services			\$0.00
		<i>(Assessment, Plan of Care, Individual/Family/Group Therapy, Rehab)</i>			
3100		Case Management, Linkage/Brokerage			\$0
3200		Crisis Intervention			\$0
3300		Medication Support			\$0
3301		Crisis Stabilization - Urgent Care			\$0
3302		Psychiatric Health Facility	12 beds	4,392	\$797.55
					\$3,502,840
		DIRECT SERVICE REVENUE TOTAL	4,392		\$3,502,840
				Medi-cal Revenue	\$3,152,556
				Cost Per Unit	\$797.55
FUNDING STREAMS REIMBURSEMENT		Population Served Percentage			
4000		Private Insurance	8%		\$280,227
4100		Uninsured	2%		\$70,057
4200		Medi-Cal FFP	90%		\$1,576,278
4300		2011 Realignment	90.0%		\$1,576,278
		REVENUE TOTAL			\$3,502,840

Child-Adolescent Psychiatric Health Facility (16 Bed)

Central Star Behavioral Health, Inc.

July 1, 2016 through June 30, 2017

Budget Categories -				Total Proposed Budget		
Line Item Description (Must be itemized)			FTE %	Admin.	Direct	Total
PERSONNEL SALARIES:						
0001	RN-DON		1.00	\$0	\$106,053	\$106,053
0002	RN		3.20	\$0	\$272,202	\$272,202
0003	LVN		2.80	\$0	\$129,915	\$129,915
0004	Rehab Therapist		1.40	\$0	\$64,957	\$64,957
0005	Rehab Aide		3.00	\$0	\$89,217	\$89,217
0006	Youth Counselor		16.80	\$0	\$534,134	\$534,134
0007	Admissions Coordinator		1.00	\$0	\$61,864	\$61,864
0008	Family Advocate		1.00	\$0	\$35,682	\$35,682
0009	Social Workers		2.80	\$0	\$182,499	\$182,499
0010	Program Director		1.00	\$0	\$66,283	\$66,283
0011	Cook		2.10	\$0	\$62,498	\$62,498
0012	Administrator		1.00	\$156,012	\$0	\$156,012
0013	UR/QA/Medical Records		1.00	\$60,835	\$0	\$60,835
0014	HR/Training/Admin Asst		1.00	\$69,476	\$0	\$69,476
0015	Billing Clerk		1.00	\$24,304	\$0	\$24,304
0016	Maintenance Tech		0.50	\$16,991	\$0	\$16,991
0017	Housekeeper		1.50	\$31,849	\$0	\$31,849
		SALARY TOTAL	42.10	\$359,466	\$1,605,304	\$1,964,769
PAYROLL TAXES:						
0030	FICA/MEDICARE			\$27,499	\$122,806	\$150,305
0031	SUI			\$1,941	\$8,667	\$10,608
0032	FUTA			\$3,379	\$15,090	\$18,469
		PAYROLL TAX TOTAL		\$32,819	\$146,563	\$179,381
EMPLOYEE BENEFITS:						
0040	Retirement			\$12,725	\$56,828	\$69,553
0041	Workers Compensation			\$17,830	\$79,623	\$97,453
0042	Health Insurance (medical, vision, life, dental, 401k)			\$41,159	\$183,807	\$224,966
		EMPLOYEE BENEFITS TOTAL		\$71,713	\$320,258	\$391,972
	SALARY & BENEFITS GRAND TOTAL					\$2,536,122
FACILITIES/EQUIPMENT EXPENSES:						
1010	Offsite Lease - Admin/Business Office					\$18,727
1011	Leased Equipment					\$14,737
1012	Telecommunications					\$40,013
1013	Utilities					\$86,072
1014	Maintenance					\$24,260
1015	Security-Access Control System & Cameras					\$0
		FACILITY/EQUIPMENT TOTAL				\$183,808
OPERATING EXPENSES:						
1060	Purchased Services					\$40,340
1061	Office Supplies					\$21,793
1062	Housekeeping Supplies					\$6,487

TOTAL PROGRAM EXPENSES	\$4,161,818
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Child-Adolescent Psychiatric Health Facility (16 Bed)

Central Star Behavioral Health, Inc.

July 1, 2016 through June 30, 2017

DIRECT SERVICE REVENUE:			Vol/Units of Svc	Rate	\$ Amt.
3000		Mental Health Services			\$0.00
		<i>(Assessment, Plan of Care, Individual/Family/Group Therapy, Rehab)</i>			
3100		Case Management, Linkage/Brokerage			\$0
3200		Crisis Intervention			\$0
3300		Medication Support			\$0
3301		Crisis Stabilization - Urgent Care			\$0
3302		Psychiatric Health Facility	16 beds	4,931	\$844.00
		DIRECT SERVICE REVENUE TOTAL	4,931		\$4,161,818
				Medi-cal Revenue	\$3,745,636
				Cost Per Unit	\$844.00
FUNDING STREAMS REIMBURSEMENT		Population Served Percentage			
4000		Private Insurance	8%		\$332,945
4100		Uninsured	2%		\$83,237
4200		Medi-Cal FFP	90%		\$1,872,818
4300		2011 Realignment	90.0%		\$1,872,818
		REVENUE TOTAL			\$4,161,818

Child-Adolescent Psychiatric Health Facility (16 Bed)

Central Star Behavioral Health, Inc.

July 1, 2017 through June 30, 2018

Budget Categories -				Total Proposed Budget			
Line Item Description (Must be itemized)				FTE %	Admin.	Direct	Total
PERSONNEL SALARIES:							
0001	RN-DON		1.00	\$49,920	\$33,280	\$83,200	
0002	RN		2.50	\$0	\$165,867	\$165,867	
0003	LVN		6.80	\$0	\$322,065	\$322,065	
0004	Rehab Therapist		1.00	\$0	\$52,136	\$52,136	
0005	Recreation Therapist		0.50	\$0	\$26,895	\$26,895	
0006	Rehab Aide		1.60	\$0	\$54,559	\$54,559	
0007	Youth Counselor		13.80	\$0	\$411,963	\$411,963	
0008	Unit Clerk		1.00	\$0	\$29,238	\$29,238	
0009	Family Advocate		1.00	\$0	\$33,486	\$33,486	
0010	Social Workers		4.00	\$0	\$247,927	\$247,927	
0011	Program Director		1.00	\$0	\$94,378	\$94,378	
0012	Cook		2.00	\$0	\$55,096	\$55,096	
0013	Administrator		0.60	\$74,346	\$0	\$74,346	
0014	UR/QA/Medical Records		0.50	\$31,360	\$0	\$31,360	
0015	HR/Training/Admin Asst		0.50	\$55,335	\$0	\$55,335	
0017	Housekeeper		1.20	\$23,707	\$0	\$23,707	
		SALARY TOTAL	39.00	\$234,667	\$1,526,889	\$1,761,557	
PAYROLL TAXES:							
0030	FICA/MEDICARE			\$17,952	\$116,807	\$134,759	
0031	SUI			\$1,078	\$13,783	\$14,861	
0032	FUTA			\$1,568	\$20,048	\$21,616	
		PAYROLL TAX TOTAL		\$20,598	\$150,638	\$171,236	
EMPLOYEE BENEFITS:							
0040	Retirement			\$5,163	\$33,592	\$38,754	
0041	Workers Compensation			\$7,040	\$45,807	\$52,847	
0042	Health Insurance (medical, vision, life, dental, 401k)			\$31,680	\$206,130	\$237,810	
		EMPLOYEE BENEFITS TOTAL		\$43,883	\$285,528	\$329,411	
	SALARY & BENEFITS GRAND TOTAL					\$2,262,203	
FACILITIES/EQUIPMENT EXPENSES:							
1011	Leased Equipment					\$22,535	
1012	Telecommunications					\$40,469	
1013	Utilities					\$87,798	
1014	Maintenance					\$24,260	
1015						\$0	
		FACILITY/EQUIPMENT TOTAL				\$175,061	
OPERATING EXPENSES:							
1060	Purchased Services					\$36,301	
1061	Office Supplies					\$16,200	
1062	Housekeeping Supplies					\$6,487	
1063	Education & Training					\$6,379	
1064	Licenses					\$5,838	

TOTAL PROGRAM EXPENSES	\$4,280,486
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Child-Adolescent Psychiatric Health Facility (16 Bed)						
Central Star Behavioral Health, Inc.						
July 1, 2017 through June 30, 2018						
DIRECT SERVICE REVENUE:				Vol/Units of Svc	Rate	\$ Amt.
3000		Mental Health Services				\$0.00
		(Assessment, Plan of Care, Individual/Family/Group Therapy, Rehab)				
3100		Case Management, Linkage/Brokerage				\$0
3200		Crisis Intervention				\$0
3300		Medication Support				\$0
3301		Crisis Stabilization - Urgent Care				\$0
3302		Psychiatric Health Facility	16 beds	5,840	\$732.96	\$4,280,486
		DIRECT SERVICE REVENUE TOTAL		5,840		\$4,280,486
				Medi-cal Revenue		\$1,306,735
				Cost Per Unit		\$732.96
FUNDING STREAMS REIMBURSEMENT			Population Served Percentage			
4000		Out-of-County	22%		\$844.00	\$941,707
4100		Private Insurance	15%		\$929.00	\$642,073
4101		Uninsured	2%			\$83,237
4102		Medi-Cal FFP	30.5%			\$1,306,735
4103		Realignment	30.5%			\$1,306,735
		REVENUE TOTAL				\$4,280,486

Child-Adolescent Psychiatric Health Facility (16 Bed)

Central Star Behavioral Health, Inc.

July 1, 2018 through June 30, 2019

Budget Categories -				Total Proposed Budget			
Line Item Description (Must be itemized)				FTE %	Admin.	Direct	Total
PERSONNEL SALARIES:							
0001	RN-DON		1.00	\$51,418	\$34,278	\$85,696	
0002	RN		2.50	\$0	\$170,843	\$170,843	
0003	LVN		6.80	\$0	\$331,727	\$331,727	
0004	Rehab Therapist		1.00	\$0	\$53,700	\$53,700	
0005	Recreation Therapist		0.50	\$0	\$27,702	\$27,702	
0006	Rehab Aide		1.60	\$0	\$56,196	\$56,196	
0007	Youth Counselor		13.80	\$0	\$424,322	\$424,322	
0008	Unit Clerk		1.00	\$0	\$30,115	\$30,115	
0009	Family Advocate		1.00	\$0	\$34,491	\$34,491	
0010	Social Workers		4.00	\$0	\$255,365	\$255,365	
0011	Program Director		1.00	\$0	\$97,209	\$97,209	
0012	Cook		2.00	\$0	\$56,749	\$56,749	
0013	Administrator		0.60	\$76,576	\$0	\$76,576	
0014	UR/QA/Medical Records		0.50	\$32,301	\$0	\$32,301	
0015	HR/Training/Admin Asst		0.50	\$56,995	\$0	\$56,995	
0017	Housekeeper		1.20	\$24,418	\$0	\$24,418	
		SALARY TOTAL	39.00	\$241,709	\$1,572,697	\$1,814,406	
PAYROLL TAXES:							
0030	FICA/MEDICARE			\$18,491	\$120,311	\$138,802	
0031	SUI			\$1,078	\$13,783	\$14,861	
0032	FUTA			\$1,568	\$20,048	\$21,616	
		PAYROLL TAX TOTAL		\$21,138	\$154,142	\$175,280	
EMPLOYEE BENEFITS:							
0040	Retirement			\$5,318	\$34,599	\$39,917	
0041	Workers Compensation			\$7,251	\$47,181	\$54,432	
0042	Health Insurance (medical, vision, life, dental, 401k)			\$32,631	\$212,314	\$244,945	
		EMPLOYEE BENEFITS TOTAL		\$45,200	\$294,094	\$339,294	
	SALARY & BENEFITS GRAND TOTAL					\$2,328,979	
FACILITIES/EQUIPMENT EXPENSES:							
1011	Leased Equipment					\$22,986	
1012	Telecommunications					\$41,683	
1013	Utilities					\$90,432	
1014	Maintenance					\$24,988	
1015						\$0	
		FACILITY/EQUIPMENT TOTAL				\$180,089	
OPERATING EXPENSES:							
1060	Purchased Services					\$37,027	
1061	Office Supplies					\$16,524	
1062	Housekeeping Supplies					\$6,617	
1063	Education & Training					\$6,507	
1064	Licenses					\$5,955	

TOTAL PROGRAM EXPENSES	\$4,402,134
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Child-Adolescent Psychiatric Health Facility (16 Bed)						
Central Star Behavioral Health, Inc.						
July 1, 2018 through June 30, 2019						
DIRECT SERVICE REVENUE:				Vol/Units of Svc	Rate	\$ Amt.
3000		Mental Health Services				\$0.00
		(Assessment, Plan of Care, Individual/Family/Group Therapy, Rehab)				
3100		Case Management, Linkage/Brokerage				\$0
3200		Crisis Intervention				\$0
3300		Medication Support				\$0
3301		Crisis Stabilization - Urgent Care				\$0
3302		Psychiatric Health Facility	16 beds	5,840	\$753.79	\$4,402,134
		DIRECT SERVICE REVENUE TOTAL		5,840		\$4,402,134
				Medi-cal Revenue		\$1,342,650
				Cost Per Unit		\$753.79
FUNDING STREAMS REIMBURSEMENT			Population Served Percentage			
4000		Out-of-County	22%		\$869.32	\$968,469
4100		Private Insurance	15%		\$956.87	\$660,321
4101		Uninsured	2%			\$88,043
4102		Medi-Cal FFP	30.5%			\$1,342,650
4103		Realignment	30.5%			\$1,342,650
		REVENUE TOTAL				\$4,402,134

Child-Adolescent Psychiatric Health Facility (16 Bed)

Central Star Behavioral Health, Inc.

July 1, 2019 through June 30, 2020

Budget Categories -				Total Proposed Budget			
Line Item Description (Must be itemized)				FTE %	Admin.	Direct	Total
PERSONNEL SALARIES:							
0001	RN-DON		1.00	\$52,960	\$35,307	\$88,267	
0002	RN		2.50	\$0	\$175,968	\$175,968	
0003	LVN		6.80	\$0	\$341,679	\$341,679	
0004	Rehab Therapist		1.00	\$0	\$55,311	\$55,311	
0005	Recreation Therapist		0.50	\$0	\$28,533	\$28,533	
0006	Rehab Aide		1.60	\$0	\$57,882	\$57,882	
0007	Youth Counselor		13.80	\$0	\$437,052	\$437,052	
0008	Unit Clerk		1.00	\$0	\$31,019	\$31,019	
0009	Family Advocate		1.00	\$0	\$35,525	\$35,525	
0010	Social Workers		4.00	\$0	\$263,026	\$263,026	
0011	Program Director		1.00	\$0	\$100,126	\$100,126	
0012	Cook		2.00	\$0	\$58,451	\$58,451	
0013	Administrator		0.60	\$78,874	\$0	\$78,874	
0014	UR/QA/Medical Records		0.50	\$33,270	\$0	\$33,270	
0015	HR/Training/Admin Asst		0.50	\$58,705	\$0	\$58,705	
0017	Housekeeper		1.20	\$25,151	\$0	\$25,151	
		SALARY TOTAL	39.00	\$248,960	\$1,619,878	\$1,868,838	
PAYROLL TAXES:							
0030	FICA/MEDICARE			\$19,045	\$123,921	\$142,966	
0031	SUI			\$1,078	\$13,783	\$14,861	
0032	FUTA			\$1,568	\$20,048	\$21,616	
		PAYROLL TAX TOTAL		\$21,692	\$157,752	\$179,444	
EMPLOYEE BENEFITS:							
0040	Retirement			\$5,477	\$35,637	\$41,114	
0041	Workers Compensation			\$7,469	\$48,596	\$56,065	
0042	Health Insurance (medical, vision, life, dental, 401k)			\$33,610	\$218,683	\$252,293	
		EMPLOYEE BENEFITS TOTAL		\$46,556	\$302,917	\$349,473	
	SALARY & BENEFITS GRAND TOTAL					\$2,397,754	
FACILITIES/EQUIPMENT EXPENSES:							
1011	Leased Equipment					\$23,445	
1012	Telecommunications					\$42,934	
1013	Utilities					\$93,145	
1014	Maintenance					\$25,737	
1015						\$0	
		FACILITY/EQUIPMENT TOTAL				\$185,261	
OPERATING EXPENSES:							
1060	Purchased Services					\$37,768	
1061	Office Supplies					\$16,854	
1062	Housekeeping Supplies					\$6,749	
1063	Education & Training					\$6,637	
1064	Licenses					\$6,074	

TOTAL PROGRAM EXPENSES	\$4,539,981
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Child-Adolescent Psychiatric Health Facility (16 Bed)						
Central Star Behavioral Health, Inc.						
July 1, 2019 through June 30, 2020						
DIRECT SERVICE REVENUE:				Vol/Units of Svc	Rate	\$ Amt.
3000		Mental Health Services				\$0.00
		(Assessment, Plan of Care, Individual/Family/Group Therapy, Rehab)				
3100		Case Management, Linkage/Brokerage				\$0
3200		Crisis Intervention				\$0
3300		Medication Support				\$0
3301		Crisis Stabilization - Urgent Care				\$0
3302		Psychiatric Health Facility	16 beds	5,856	\$775.27	\$4,539,981
		DIRECT SERVICE REVENUE TOTAL		5,856		\$4,539,981
				Medi-cal Revenue		\$1,384,694
				Cost Per Unit		\$775.27
FUNDING STREAMS REIMBURSEMENT			Population Served Percentage			
4000		Out-of-County	22%		\$895.40	\$998,796
4100		Private Insurance	15%		\$985.58	\$680,997
4101		Uninsured	2%			\$90,800
4102		Medi-Cal FFP	30.5%			\$1,384,694
4103		Realignment	30.5%			\$1,384,694
		REVENUE TOTAL				\$4,539,981