

STATE OF CALIFORNIA
STANDARD AGREEMENT AMENDMENT
 STD. 213A_DHCS (Rev. 09/14)

Check here if additional pages are added: 4 Page(s)

Agreement Number 14-90076	Amendment Number A01
Registration Number:	



1. This Agreement is entered into between the State Agency and Contractor named below:
- State Agency's Name Department of Health Care Services (Also known as DHCS, CDHS, DHS or the State)
- Contractor's Name County of Nevada (Also referred to as Contractor)
2. The term of this Agreement is: July 1, 2014
 through June 30, 2017
3. The maximum amount of this \$ 2,733,394
 Agreement after this amendment is: Two Million, Seven Hundred Thirty-Three Thousand, Three Hundred Ninety-Four
4. The parties mutually agree to this amendment as follows. All actions noted below are by this reference made a part of the Agreement and incorporated herein:

- I. **Amendment effective date:** July 1, 2014
- II. **Purpose of amendment:** This amendment 1) increases funding for Fiscal Year 2014-15 and 2) identifies the changes in Exhibit B Attachment I A1 – Funding Amounts. The contractor is performing more of the same services as outlined in the original contract.
- III. Certain changes made in this amendment are shown as: Text additions are displayed in **bold and underline**. Text deletions are displayed as strike through text (i.e., ~~Strike~~).
- IV. Paragraph 3 (maximum amount payable) on the face of the original STD 213 is increased by \$168,499 and is amended to read: ~~\$2,564,895 (Two Million, Five Hundred Sixty-Four Thousand, Eight Hundred Ninety-Five Dollars)~~ **\$2,733,394 (Two Million, Seven Hundred Thirty-Three Thousand, Three Hundred Ninety-Four Dollars)**.

(Continued on next page)

All other terms and conditions shall remain the same.

IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto.

CONTRACTOR		CALIFORNIA Department of General Services Use Only
Contractor's Name (If other than an individual, state whether a corporation, partnership, etc.) <u>County of Nevada</u>		
By (Authorized Signature) 	Date Signed (Do not type)	
Printed Name and Title of Person Signing <u>Edward C. Scofield, Chair Board of Supervisors</u>		
Address <u>Health & Human Services Agency, Contracts Unit 950 Maidu Ave, Nevada City, CA 95959</u>		
STATE OF CALIFORNIA		
Agency Name <u>Department of Health Care Services</u>		
By (Authorized Signature) 	Date Signed (Do not type)	
Printed Name and Title of Person Signing <u>Don Rodriguez, Chief, Contract Management Unit</u>		
Address <u>1501 Capitol Avenue, Suite 71.5195, MS 1403, P.O. Box 997413, Sacramento, CA 95899-7413</u>		

Exempt per: **DGS memo dated 07/10/96 and Welfare and Institutions Code 14087.4**

- V. Paragraph 4 (incorporated exhibits) on the face of the original STD 213 is amended to add the following revised exhibit.

Exhibit A A1 – Scope of Work (2 pages)

All references to Exhibit A – Scope of Work in any exhibit incorporated into this agreement shall hereinafter be deemed to read Exhibit A A1 – Scope of Work. Exhibit A is hereby replaced in its entirety by the attached revised exhibit.

- VI. Paragraph 4 (incorporated exhibits) on the face of the original STD 213 is amended to add the following revised exhibit:

Exhibit B Attachment I A1 – Funding Amounts (1 page)

All references to Exhibit B Attachment I, in any exhibit incorporated into this agreement shall hereinafter be deemed to read Exhibit B Attachment I A1, respectively. Exhibit B Attachment I is hereby replaced in its entirety by the attached revised exhibit.

- VII. All other terms and conditions shall remain the same.

Exhibit A A1
Scope of Work

1. Service Overview

Contractor agrees to provide to the California Department of Health Care Services (DHCS) the services described herein.

State and the Contractor enter into this contract by authority of Chapter 3 of Part 1, Division 10.5 of the Health and Safety Code (HSC) and with approval of Contractor's County Board of Supervisors (or designee) for the purpose of providing alcohol and drug services. State and the Contractor identified in the Standard Agreement are the only parties to this Contract. This Contract is not intended, nor shall it be construed, to confer rights on any third party.

State and the Contractor enter into this contract for the purpose of identifying and providing for covered Drug Medi-Cal (DMC) services for substance use treatment in the Contractor's service area pursuant to Sections 11848.5(a) and (b) of the Health and Safety Code (hereinafter referred to as HSC), Sections 14124.20, 14021.51 – 14021.53, and 14124.20 – 14124.25 of the Welfare and Institutions Code (hereinafter referred to as W&IC), and Title 22 of the California Code of Regulations (hereinafter referred to as Title 22), Sections 51341.1, 51490.1, and 51516.1.

State and the Contractor enter into this contract by authority of Title 45 of the Code of Federal Regulations Part 96 (45 CFR Part 96), Substance Abuse Prevention and Treatment Block Grants (SAPT Block Grant) for the purpose of planning, carrying out, and evaluating activities to prevent and treat substance abuse. Block Grant recipients must adhere to SAMHSA's National Outcome Measures (NOMs).

The objective is to make substance use treatment services available to Medi-Cal beneficiaries through utilization of federal and state funds available pursuant to Title XIX and Title XXI of the Social Security Act for reimbursable covered services rendered by certified DMC providers.

2. Service Location

The services shall be performed at applicable facilities in the County of Nevada.

3. Service Hours

The services shall be provided during the working hours and days as defined by the Contractor.

4. Project Representatives

A. The project representatives during the term of this Agreement will be:

Department of Health Care Services	Contractor's/Grantee's Name
Contract/Grant Manager: Mike Reeves Telephone: (916) 327-4886 <u>327-2621</u> Fax: (916) 323-0653 <u>322-1176</u> Email: Michael.reeves@dhcs.ca.gov	County Administrator Telephone: (530) 265-1437 Fax: (530) 271-0257 or 271-0256

B. Direct all inquiries to:

Department of Health Care Services	Contractor's/Grantee's Name
Department of Health Care Services SUD PTRSD - FMAB Attention: Irma Nieves <u>Scott Oros</u> Mail Station Code 2629 P.O. Box 997413 Sacramento, CA, 95899-7777 Telephone: (916) 323-2087 <u>327-2782</u> Fax: (916) 323-0653 <u>322-1176</u> Email: Irma.nieves@dhcs.ca.gov scott.oros@dhcs.ca.gov	Nevada County AOD Services Attention: County Administrator 500 Crown Point Circle, Suite 120 Grass Valley, CA 95945-9514 Telephone: (530) 265-1437 Fax: (530) 271-0257 or 271-0256

C. Either party may make changes to the information above by giving written notice to the other party. Said changes shall not require an amendment to this Agreement.

5. See Exhibit A, Attachment I, for a detailed description of the services to be performed.

Exhibit B, Attachment I A1 - Funding for Fiscal Year 2014-15 through FY 2016-17

County: Nevada

Contract Number: 14-90076

Version:	A01
Date:	7/1/2014

Fiscal Year 2014-15	2014-15 Funding Amount	
	Original	A01
State General Funds (7/1/14 to 6/30/15)	38,972	38,972
Drug Medi-Cal SGF	38,972	38,972
TOTAL	38,972	38,972
SMART Block Grant - FFY 2015 Award (10/1/14 to 6/30/16)		
- Discretionary	480,069	480,069
- Adolescent/Youth	13,181	13,181
- Prevention Set-Aside	129,638	129,638
- Friday Night Live/Club Live	6,000	6,000
- HIV Set Aside	8,148	8,148
- Perinatal	18,130	18,130
TOTAL	655,166	655,166
Drug Medi-Cal Federal Share (7/1/14 to 6/30/15)		
- Non Perinatal Federal Share	85,233	253,732
- Perinatal Federal Share	75,594	75,594
TOTAL	329,326	329,326
GRAND TOTAL	854,965	1,023,464
Original THREE-YEAR TOTAL	2,564,995	
A01 THREE-YEAR TOTAL	2,733,394	

Fiscal Year 2015-16	2015-16 Funding Amount	
	Original	A01
State General Funds (7/1/15 to 6/30/16)	38,972	38,972
Drug Medi-Cal SGF	38,972	38,972
TOTAL	38,972	38,972
SMART Block Grant - FFY 2016 Award (10/1/15 to 6/30/17)		
- Discretionary	480,069	480,069
- Adolescent/Youth	13,181	13,181
- Prevention Set-Aside	129,638	129,638
- Friday Night Live/Club Live	6,000	6,000
- HIV Set Aside	8,148	8,148
- Perinatal	18,130	18,130
TOTAL	655,166	655,166
Drug Medi-Cal Federal Share (7/1/15 to 6/30/16)		
- Non Perinatal Federal Share	85,233	253,732
- Perinatal Federal Share	75,594	75,594
TOTAL	160,827	160,827
GRAND TOTAL	854,965	854,965

Fiscal Year 2016-17	2016-17 Funding Amount	
	Original	A01
State General Funds (7/1/16 to 6/30/17)	38,972	38,972
Drug Medi-Cal SGF	38,972	38,972
TOTAL	38,972	38,972
SMART Block Grant - FFY 2017 Award (10/1/16 to 6/30/18)		
- Discretionary	480,069	480,069
- Adolescent/Youth	13,181	13,181
- Prevention Set-Aside	129,638	129,638
- Friday Night Live/Club Live	6,000	6,000
- HIV Set Aside	8,148	8,148
- Perinatal	18,130	18,130
TOTAL	655,166	655,166
Drug Medi-Cal Federal Share (7/1/16 to 6/30/17)		
- Non Perinatal Federal Share	85,233	253,732
- Perinatal Federal Share	75,594	75,594
TOTAL	160,827	160,827
GRAND TOTAL	854,965	854,965