# COUNTY OF LOS ANGELES

MARVIN J. SOUTHARD, D.S.W. Director

CORA E. FULMORE, L.C.S.W. Interim Chief Deputy Director

RODERICK SHANER, M.D. Medical Director



Fax:

BOARD OF SUPERVISORS GLORIA MOLINA YVONNE BRATHWAITE BURKE ZEV YAROSLAVSKY DON KNABE MICHAEL D. ANTONOVICH

DEPARTMENT OF MENTAL HEALTH

550 SOUTH VERMONT AVENUE, LOS ANGELES, CALIFORNIA 90020

(213) 738-4601 (213) 386-1297 http://dmh.co.la.ca.us

April 17, 2003

The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, California 90012

**Dear-Supervisors:** 

APPROVAL OF AMENDMENT TO LEGAL ENTITY AGREEMENT WITH FH & HF TORRANCE I, LLC DBA SUNNYSIDE REHABILITATION AND NURSING CARE CENTER AND SUNNYSIDE RETIREMENT CENTER FOR FISCAL YEARS 2002-2003 AND 2003-2004 (SUPERVISORIAL DISTRICT 2) (3 VOTES)

# IT IS RECOMMENDED THAT YOUR BOARD:

- 1. Approve and instruct the Director of Mental Health to prepare, sign, and execute Amendment No. 1, substantially similar to the Attachment, to the existing Legal Entity Agreement with FH & HF Torrance I, LLC dba Sunnyside Rehabilitation and Nursing Care Center and Sunnyside Retirement Center (Sunnyside). Effective upon Board approval, this Amendment will delete life support/board and care services totaling \$253,383 from the Legal Entity Agreement for each Fiscal Year (FY) 2002-2003 and 2003-2004 and redirect these funds to the Department of Mental Health's (DMH) Interim Funding allocation pool to pay for life support/board and care services under the appropriate Interim Fund Community Care Residential Facility Agreement. The new Maximum Contract Amount (MCA) will be \$903,351 for each FY 2002-2003 and 2003-2004.
- Delegate authority to the Director of Mental Health to prepare, sign, and execute future amendments to the DMH Legal Entity Agreement with Sunnyside and establish as a new Maximum Contract Amount the aggregate of the original contract and all amendments through and including this Amendment, provided that:
   1) the County's total payments to Contractor under the Agreement for each fiscal

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The Honorable Board of Supervisors April 17, 2003 Page 2

> year shall not exceed a change of twenty percent from the applicable revised Maximum Contract Amount; 2) any increase shall be used to provide additional services or to reflect program and/or policy changes; 3) the Board of Supervisors has appropriated sufficient funds for all changes; 4) approval of County Counsel and the Chief Administrative Officer or his designee is obtained prior to any such Amendment; 5) the parties may by mutual written Amendment agree to reduce programs or services without reference to the twenty percent limitation; and 6) the Director of Mental Health shall notify the Board of Supervisors of Agreement changes in writing within 30 days after execution of each Amendment.

This new delegated authority language replaces previously approved delegated authority language and will be used in future Board Letters.

## PURPOSE/JUSTIFICATION OF RECOMMENDED ACTIONS

County Counsel advises that this "technical correction" of the contractual relationship between the parties and the related payment methodology is necessary in order to comply with existing payment regulations. While the parties have had in place at all relevant times a contract for the services in question, an audit review concluded that the payment methodology for certain services more appropriately belongs to a different contractual mode, the Interim Fund Community Care Residential Facility Agreement.

Accordingly, Board approval is requested to delete life support/board and care services from the existing Legal Entity Agreement with Sunnyside and redirect these services and funds to the appropriate Interim Fund Community Care Residential Facility Agreement with Sunnyside. The transfer of life support/board and care services and funds will allow DMH to appropriately reimburse the Contractor and its residents for board and care services and personal and incidental (P and I) expenses, respectively, and will ensure compliance with Federal, State, and County requirements and regulations, fiduciary responsibilities, and findings from the Social Security Administration - Interim Assistance Reimbursement Program Audit Report issued on December 23, 2002.

Under existing delegation authority, Board approval is required to delete language previously established in Board Letters that referenced necessary Board action for amendments requiring an MCA change in excess of 20%. DMH proposes, and County Counsel concurs, that delegated authority be clarified in the future regarding mutually agreed-upon reductions. This Board Letter will authorize the Director of Mental Health to prepare, sign, and execute future amendments to reduce the MCA upon the mutual agreement of DMH and Sunnyside, without reference to the 20% limit that applies to increases.

The Honorable Board of Supervisors April 17, 2003 Page 3

## Implementation of Strategic Plan Goals

The recommended Board actions are consistent with the County's Programmatic Goal of Health and Mental Health within the Countywide Strategic Plan. Board approval shall strengthen DMH's programmatic and fiscal accountability.

## FISCAL IMPACT/FINANCING

There is no impact on net County cost. Realignment funds in the amount of \$253,383 are included in DMH's FY 2002-2003 Adopted Budget. This amount currently allocated for life support/board and care services will be deleted from the Legal Entity Agreement and transferred to DMH's Interim Funding allocation pool to reimburse the Contractor and its residents for life support/board and care services as well as personal and incidental (P and I) expenses.

## FACTS AND PROVISIONS/LEGAL REQUIREMENTS

On July 2, 2002, your Board approved an Amendment for Sunnyside's program expansion for a residential treatment facility, which included life support/board and care services and a half-day day rehabilitation program. However, per the Social Security Administration-Interim Assistance Reimbursement Program Audit, DMH was not in compliance with various regulations by not meeting the 10 working days requirement of sending the excess of the Interim Assistance Reimbursement funds to the recipient. Therefore, in order to ensure compliance with Federal, State, and County requirements and regulations, and fiduciary responsibilities, DMH is deleting life support/board and care services from the existing Legal Entity Agreement and redirecting these services to the appropriate Interim Fund Community Care Residential Facility Agreement with Sunnyside. Board approval of this action will allow DMH to ensure compliance by changing the contract format and adhering to a uniform accounting and reimbursement method for life support/board and care services and adhering to a uniform accounting and reimbursement method.

The Amendment has been approved as to form by County Counsel. The proposed actions have been reviewed and approved by the Chief Administrative Office and DMH's Program and Financial Services administration.

## CONTRACTING PROCESS

Upon Board approval, DMH will amend the existing Legal Entity Agreement with Sunnyside to delete life support/board and care services. A new Community Care Residential Facility Agreement for life support/board and care services and P and I

The Honorable Board of Supervisors April 17, 2003 Page 4

expenses, which will be paid through DMH's Interim Funding allocation pool, will be executed under the authority delegated to the Director of Mental Health.

This Board Letter uses new delegated authority language to allow the Director of Mental Health, upon mutual agreement with Sunnyside, to reduce programs and services without reference to the 20% limitation.

## IMPACT ON CURRENT SERVICES

Board approval of this Amendment will allow the Contractor and residents to be paid for life support/board and care services and P and I expenses, respectively, in accordance with uniform guidelines. There is no negative impact on current services.

#### **CONCLUSION**

The Department of Mental Health will need one (1) copy of the adopted Board action. It is requested that the Executive Officer, Board of Supervisors, notify the Department of Mental Health's Contracts Development and Administration Division at (213) 738-4684, when this document is available.

Respectfully submitted,

Marvin J. Southard, D.S.W. Director of Mental Health

MJS:RK:KT:CTA

Attachment

c: Chief Administrative Officer County Counsel Chairperson, Mental Health Commission

## ATTACHMENT

CONTRACT NO. DMH-01207

#### AMENDMENT NO. 1

THIS AMENDMENT is made and entered into this \_\_\_\_\_\_ day of \_\_\_\_\_\_, 2003, by and between the COUNTY OF LOS ANGELES (hereafter "County") and <u>FH & HF Torrance I, LLC dba Sunnyside Rehabilitation and</u> <u>Nursing Care Center and Sunnyside Retirement Center</u> (hereafter "Contractor").

WHEREAS, County and Contractor have entered into a written Agreement, dated <u>October 1, 2002</u>, identified as County Agreement No. <u>DMH-01207</u>, and any subsequent amendments (hereafter collectively "Agreement"); and

WHEREAS, for Fiscal Years 2002-2003 and 2003-2004, County and Contractor intend to amend Agreement only as described hereunder; and

WHEREAS, for Fiscal Years 2002-2003 and 2003-2004, County and Contractor intend to amend Agreement to delete life support/board and care services for Provider Number <u>7484</u>. This action will ensure the Department of Mental Health's (DMH) compliance with Federal, State, and County requirements and regulations by changing the contract format and adhering to a uniform accounting and reimbursement method for life support/board and care services and personal and incidental (P and I) expenses that are paid with Interim Funds; and

WHEREAS, for Fiscal Years 2002-2003 and 2003-2004, County and Contractor intend to amend Agreement to reduce Realignment funds in the amount of \$903,351 from the Maximum Contract Amount. These funds will be deleted from the Legal Entity Agreement and transferred to DMH's Interim Funding allocation pool to reimburse the Contractor and its residents for life support/board and care services and P and I expenses, respectively; and

WHEREAS, for Fiscal Years 2002-2003 and 2003-2004, the revised Maximum Contract Amount will be \$903,351.

NOW, THEREFORE, County and Contractor agree that Agreement shall be amended only as follows:

- Paragraph 4 (FINANCIAL PROVISIONS), Subparagraph B (Reimbursement For Initial Period) and Subparagraph C (Reimbursement If Agreement Is Automatically Renewed) shall be deleted in their entirety and the following substituted therefor:
  - "B. <u>Reimbursement For Initial Period</u>: The Maximum Contract Amount for the Initial Period of this Agreement as described in Paragraph 1 (TERM) shall not exceed <u>NINE HUNDRED THREE THOUSAND THREE HUNDRED</u> <u>FIFTY-ONE</u> DOLLARS (\$903,351) and shall consist of County, State and/or Federal (excluding Medicare Partial Hospitalization services) funds as shown in the applicable Financial Exhibit column(s) which are identified on the Financial Summary. This Maximum Contract Amount includes Cash Flow Advance which is repayable through cash and/or appropriate SFC units and/or actual and allowable costs as authorized by other provisions of this Agreement. Notwithstanding any other provision of this Agreement, in no event shall County pay Contractor

- 2 -

more than this Maximum Contract Amount for Contractor's performance hereunder during the Initial Period.

- C. Reimbursement If Agreement Is Automatically Renewed:
  - (1)Reimbursement For First Automatic Renewal Period: The Maximum Contract Amount for the First Automatic Renewal Period of this Agreement as described in Paragraph 1 (TERM) shall not exceed NINE HUNDRED THREE THOUSAND THREE HUNDRED FIFTY-ONE DOLLARS (\$903,351) and shall consist of County, State, and/or Federal (excluding and Medicare Partial Hospitalization services) funds as shown in the applicable Financial Exhibit column(s) which are identified on the Financial Summary. This Maximum Contract Amount includes the Cash Flow Advance which is repayable through cash and/or appropriate SFC units and/or actual and allowable costs as authorized by other provisions of this Agreement. Notwithstanding any other provision of this Agreement, in no event shall County pay Contractor more than this Maximum Contract Amount for Contractor's performance hereunder during the First Automatic Renewal Period."
- Financial Summary for Fiscal Year 2002-2003 shall be deleted in its entirety and replaced with Financial Summary <u>-1</u> for Fiscal Year 2002-2003, attached hereto and incorporated herein by reference. All

- 3 -

references in Agreement to Financial Summary for Fiscal Year 2002-2003 shall be deemed amended to state "Financial Summary <u>-1</u> for Fiscal Year 2002-2003."

- 3. Financial Summary for Fiscal Year 2003-2004 shall be deleted in its entirety and replaced with Financial Summary <u>-1</u> for Fiscal Year 2003-2004, attached hereto and incorporated herein by reference. All references in Agreement to Financial Summary for Fiscal Year 2003-2004 shall be deemed amended to state "Financial Summary <u>-1</u> for Fiscal Year 2003-2004."
- Contractor shall provide services in accordance with Contractor's Fiscal Year <u>2002-2003</u> Negotiation Package for this Agreement and any addenda thereto approved in writing by Director.
- Except as provided in this Amendment, all other terms and conditions of the Agreement shall remain in full force and effect.

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- 4 -

IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be subscribed by County's Director of Mental Health, and Contractor has caused this Amendment to be subscribed in its behalf by its duly authorized officer, the day, month, and year first above written.

APPROVED AS TO FORM:

Ву

Principal Deputy County Counsel

COUNTY OF LOS ANGELES

LLOYD W. PELLMAN County Counsel

Ву \_\_\_\_\_

MARVIN J. SOUTHARD, D.S.W. Director of Mental Health

FH & HF Torrance I, LLC dba Sunnyside Rehabilitation and Nursing Care Center and Sunnyside Retirement Center CONTRACTOR

Ву \_\_\_\_\_

Name Michael Schwartz/Judy Marolda

Title Agent/Administrator
(AFFIX CORPORATE SEAL HERE)

APPROVED AS TO CONTRACT ADMINISTRATION:

DEPARTMENT OF MENTAL HEALTH

By

Chief, Contracts Development and Administration Division

Sunnyside  $\ Amendment 1 (04/16/03)$ 

Legal Entity No : 00993				Period	: July 1	, 2002 tl	hrough J	une 30,	2003				Pag	e 1 of 2
Categorie	С	RITICAL CARE												
Provider Numbe	r (s)	Sunnyside SNF	Sunnyside Residential Trtmt. Prog.											Sources o Funding Totals
Reimbursement N	lothod	7448 NR	7484 NR											
Financial Exhibits (		A	B											
	Eligible for FFP Match			_	<u> </u>	<u> </u>	<u>,</u>		<u> </u>	<u> </u>	1	<u> </u>		
A. Allocations:														
1. Realignment	Yes	\$ 300,672	\$ 464,063											\$ 764,73
2. Other	Yes													\$
3. Other	Yes													\$
4. Other	Yes													\$
5. Other	Yes													\$
B. Pass Through:														
1. FFP	Yes													\$ 138,616
2. EPSDTSGF														\$
3. SB90														\$
4. Other														\$
C. Third Party:														
1. Medicare														\$
2. Patient Fees														\$
														\$ 214,40
3. Insurance	No													φ 211,10

Fiscal Year: 2002-2003

Period : July 1, 2002 through June 30, 2003

Amendment No. 1

\$ 1,568,761

Contractor Name : Sunnyside Rehabilitation & Nursing Care Center DMH Legal Entity Agreement - Financial Summary -1

Gross Program Budget (A+B+C):

And Sunnyside Retirement Center

Legal Entity No: 00993

For PARTNERS/ISA only:

Footnotes Section: Amendment No. 1 deletes life support/board & care services totaling \$253,383 from the Agreement for Fiscal Years (FY) 2002-2003 and 2003-2004. The new MCA is \$903,351 for FYs 2002-2003 and 2003- 2004.

Contractor Name : Sunnyside Rehabilitation & Nursing Care Center And Sunnyside Retirement Center

## DMH Legal Entity Agreement (Rate Summary <u>-1</u>)

Amendment No. 1

Fiscal Year: 2002-2003 Period : July 1, 2002 through June 30, 2003

And Sunnyside Retirement Center Legal Entity No : 00993							Piscal Year: 2002-2003 Period : July 1, 2002 through June 30, 2003							Page 2 of 2		
MENTAL HEALTH SE	RVICES	Mode of Service	SFC RANGE	Rates	FE for Sunnyside SNF 7448	FE for Sunnyside Trtmt. Prog. 7484	FE for	FE for	FE for	FE for	FE for	FE for	FE for	FE for	FE for	
A. 24 - HOUR SERVICES :											<u>.</u>		<u>.</u>			
Hospital Inpatient		05	10 - 18													
Hospital Administrative Day		05	19												1	
Psychiatric Health Facility (PHF)		05	20 - 29													
SNF Intensive		05	30 -34	\$ 102.97	А											
IMD/STP Basic (No Patch)	Beds 1-59	05	35													
IND/STF Basic (NO Fatch)	Beds 60 & over	05	35													
Patch for IMD		05	36 - 39													
Mentally III Offenders	Indigent	05	36 - 39													
	Regular	05	36 - 39													
IMD - Like		05	36 - 39					ļ	ļ	ļ	ļ		ļ		<u> </u>	
IMD (W/Patch) Sub-Acute (60 days	;)	05	38													
Adult Crisis Residential		05	40 - 49												<u> </u>	
Residential Other		05	60 - 64													
Adult Residential		05	65 - 79													
Semi - Supervised Living		05	80 - 84													
Independent Living		05	85 - 89													
MH Rehab Centers		05	90 - 94													
B. DAY SERVICES :			1	F	-			-	T	1	1		1		1	
Vocational Services		10	30 - 39													
Socialization		10	40 - 49													
SNF Augmentation		10	60 - 69													
Day Treatment Intensive: Half Day		10	81-84													
Day Treatment Intensive: Full Day		10	85-89													
Day Rehabilitative : Half Day		10	91-94	\$ 65.00		В										
Day Rehabilitative : Full Day		10	95-99												L	
C. OUTPATIENT SERVICES :				1	1	1		1	1	1	1		1		1	
Case Management, Brokerage		15	01 - 09													
Mental Health Services		15	10 - 19 /30-59													
Therapeutic Behavioral Services (T	BS)	15	58													
Medication Support		15	60 - 69													
Crisis Intervention		15	70 - 79													
D. OUTREACH SERVICES :					-	-		1	1		1		1			
Mental Health Promotion		45	10 - 19													
Community Client Services		45	20 - 29												<u> </u>	
E. SUPPORT SERVICES :			1													
Life Support/Board & Care		60	40 - 49													
Case Management Support	0	60	60 - 69							<u> </u>	ļ		ļ		<u> </u>	
Flexible Funding (Cost Reimburser Identify the applicable FE column(		60	64													
F. HEALTHY FAMILIES :																
Alcohol/Drug Abuse Counseling an				\$ 30.00										l	L	

Abbreviations: SFC - Service Function Code; FE - Financial Exhibit

Categories	C	RITICAL CAR	E										
Provider Number	· (s)	Sunnyside SNF	Sunnyside Residential Trtmt. Prog.										Sources of Funding Totals
D. S. S. S. S. M.	. ()	7448	7484						-				
Reimbursement M		NR	NR B										
Financial Exhibits (F	Eligible for FFP Match	A	В	I		<u> </u>		<u> </u>		1		1	
A. Allocations:	FFP Match												
. Realignment	Yes	\$ 300,672	\$ 464,063		1	 [	[	1	1		1		\$ 764,73
2. Other	Yes	φ 000,012	φ 101,000										\$ 101,10
B. Other	Yes												\$
. Other	Yes												\$
. Other	Yes												\$
3. Pass Through:	•												
. FFP	Yes												\$ 138,61
. EPSDTSGF													\$
s. SB90													\$
. Other													\$
C. Third Party:													
. Medicare													\$
. Patient Fees													\$
. Insurance	No												\$ 214,40
. Medi-Cal	No												\$ 451,00

Gross Program Budget (A+B+C):

For PARTNERS/ISA only:

Footnotes Section: Amendment No. 1 deletes life support/board & care services totaling \$253,383 from the Agreement for Fiscal Years (FY) 2002-2003 and 2003-2004. The new MCA is \$903,351 for FYs 2002-2003 and 2003- 2004.

CTA:Sunnyside Fin Sum 03-04

# Contractor Name : Sunnyside Rehabilitation & Nursing Care CenterDMH Legal Entity Agreement - Financial Summary -1And Sunnyside Retirement CenterFiscal Year: 2003-2004Legal Entity No : 00993Period : July 1, 2003 through June 30, 2004

Amendment No. 1

Page 1 of 2

\$ 1,568,761

Contractor Name : Sunnyside Rehabilitation & Nursing Care Center And Sunnyside Retirement Center

Legal Entity No: 00993

#### DMH Legal Entity Agreement (Rate Summary -1) Fiscal Year: 2003-2004

Period : July 1, 2003 through June 30, 2004

Amendment No. 1

Page 2 of 2

FE for

FE for

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FE for

FE for

FE for

MENTAL HEALTH SERVICES		Mode			Sunnyside	Sunnyside	FE for				
	-	of	SFC	Rates	SNF	Trtmt. Prog.					
		Service	RANGE		7448	7484					
A. 24 - HOUR SERVICES :							-			-	
Hospital Inpatient		05	10 - 18								
Hospital Administrative Day		05	19								
Hospital Administrative Day Psychiatric Health Facility (PHF)		05	20 - 29								
Psychiatric Health Facility (PHF) SNF Intensive		05	30 -34	\$ 102.97	А						
IMD/STP Basic (No Patch) Beds 1-5		00	35								
	Beds 60 & over	05	35								
Patch for IMD		05	36 - 39								
Mentally III Offenders	Indigent	05	36 - 39								
· · · · · · · · · · · · · · · · · · ·	Regular	05	36 - 39								
IMD - Like		05	36 - 39								
IMD (W/Patch) Sub-Acute (60 days	)	05	38								
Adult Crisis Residential		05	40 - 49								
Residential Other		05	60 - 64								
Adult Residential		05	65 - 79								
Semi - Supervised Living		05	80 - 84								
Independent Living		05	85 - 89								
MH Rehab Centers		05	90 - 94								
B. DAY SERVICES :											
Vocational Services		10	30 - 39								
Socialization		10	40 - 49								
SNF Augmentation		10	60 - 69								
Day Treatment Intensive: Half Day		10	81-84								
Day Treatment Intensive: Full Day		10	85-89								
Day Rehabilitative : Half Day		10	91-94	\$ 65.00		В					

Day Rehabilitative : Full Day 10 95-99 C. OUTPATIENT SERVICES : Case Management, Brokerage 15 01 - 09 10 - 19 Mental Health Services 15 /30-59 15 58 Therapeutic Behavioral Services (TBS) Medication Support 15 60 - 69 15 70 - 79 Crisis Intervention D. OUTREACH SERVICES : Mental Health Promotion 45 10 - 19 Community Client Services 45 20 - 29 E. SUPPORT SERVICES : 40 - 49 Life Support/Board & Care 60 Case Management Support 60 60 - 69 Flexible Funding (Cost Reimbursement) 60 64 Identify the applicable FE column(s) F. HEALTHY FAMILIES : Alcohol/Drug Abuse Counseling and Ed. Srvcs. \$ 30.00 Abbreviations: SFC - Service Function Code; FE - Financial Exhibit

# **DMH Summary of Amendment Changes**

LEGAL	ENTITY NAME:	FH & HF Torrar Retirement Cen		I, LLC dba Sunnyside Rehabilitation	n and N	lursing Care	Center	and Sunnyside
Contrac	ct No.: <u>DMH-01207</u>	Leg	al E	Intity No.: 00993		Amendme	nt No.:	1
		L	IST	ING OF FUNDING SOURCES				
1	Realignment	1	1	DPSS - Grow	21	DHS-ADP	A-AB203	4
2	AB2034	1	2	LAUSD	22	DHS-ADP	A-Dual D	iagnosis
3	DPSS-CalWORKs	1	3	State-ASOC	23	DHS-ADP	A-Sideki	ck
4	CSOC	1	4	DCFS -STOP	24	DHS-LAM		
5	BEST	1	5	DCFS-Kidstep	25	DHS-Socia	al Model	
6	Tobacco Tax	1	6	DCFS-Family Pres.	26	FFP		
7	Path McKinney Grant	t 1	7	DCFS-AB1733	27	EPSDT-SO	GF	
8	HIV Aids Grant	1	8	DCFS-AB2994	28	SB90		
9	SAMHSA	1	9	DCFS-Starview	29			
10	Probation Schiff-Card	lenas 2	0	DCFS-Hillview Tran Indep Living	30			
	NG SOURCE(S):			AMOUNT	FISC	AL YEAR		MCA
	from Funding Sources	listed above)		Increase(Decrease)				000.054
(Select Realign	· ·	listed above)		(\$253,383)		02-03	\$	903,351
	· ·	listed above)				02-03 03-04	\$ \$	903,351 903,351
	· ·	listed above)		(\$253,383)				
	· ·	listed above)		(\$253,383)				
AMENE	DMENT ACTION(S)			(\$253,383) (\$253,383)		03-04		903,351
Amenda	DMENT ACTION(S)	support/board & d		(\$253,383) (\$253,383)		03-04	\$	903,351
Amenda \$253,38	DMENT ACTION(S) ment No. 1 deletes life	support/board &	FY	(\$253,383) (\$253,383) (\$253,383)		03-04	\$	903,351
Amenda \$253,38	DMENT ACTION(S) ment No. 1 deletes life	support/board &	FY	(\$253,383) (\$253,383)		03-04	\$	903,351
Amenda \$253,38	DMENT ACTION(S) ment No. 1 deletes life	support/board &	FY	(\$253,383) (\$253,383) (\$253,383)		03-04	\$	903,351
Amendi           \$253,38           2003-20	DMENT ACTION(S) ment No. 1 deletes life	support/board &	FY	(\$253,383) (\$253,383) (\$253,383)		EFF	\$ ECTIVE	903,351

#### ADD OR DELETE SERVICE SITE(S):

Name	Address	Sup.Dist.	Svc. Area	Prov. No.

CTA: Sunnyside Summary of Amend 1