

COUNTY OF LOS ANGELES

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

ROBIN KAY, Ph.D.
Chief Deputy Director

RODERICK SHANER, M.D.
Medical Director



BOARD OF SUPERVISORS
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DEPARTMENT OF MENTAL HEALTH

<http://dmh.lacounty.gov>

550 SOUTH VERMONT AVENUE, LOS ANGELES, CALIFORNIA 90020

Reply To: (213) 738-4601
Fax: (213) 386-1297

September 15, 2009

ADOPTED

BOARD OF SUPERVISORS
COUNTY OF LOS ANGELES

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

22 SEPTEMBER 15, 2009

Sachi A. Hamai
SACHI A. HAMAI
EXECUTIVE OFFICER

Dear Supervisors:

**AUTHORIZATION TO AMEND LEGAL ENTITY AGREEMENT
WITH THE VILLAGE FAMILY SERVICES
(SUPERVISORIAL DISTRICT 3)
(3 VOTES)**

SUBJECT

Request approval to amend the Department of Mental Health's Legal Entity Agreement with The Village Family Services to increase the maximum contract amount by \$7,000 to \$2,021,231 for services rendered during Fiscal Year 2008-09.

IT IS RECOMMENDED THAT YOUR BOARD:

1. Approve and instruct the Director of Mental Health, or his designee, to prepare, sign and execute three copies of Amendment No. 5 (Amendment) (substantially similar to the Attachment) to the existing Department of Mental Health (DMH) Legal Entity (LE) Agreement No. MH120410 (Agreement) with The Village Family Services for Fiscal Year (FY) 2008-09. The Amendment will be effective upon Board approval and will increase the maximum contract amount (MCA) for The Village Family Services for FY 2008-09 by \$7,000, from \$2,014,231 to \$2,021,231. The increased amount will be funded by Sales Tax Realignment in the amount of \$7,000.
2. Delegate authority to the Director of Mental Health, or his designee, to prepare, sign, and execute future amendments to the Agreement with The Village Family Services to reflect any additional amounts owed as a result of the federal Certified Public Expenditure (CPE) regulations, provided that approval by County Counsel and the Chief Executive Officer (CEO), or their designees, is obtained prior to any such amendment and your Board has appropriated sufficient funds for all changes; and the Director of Mental Health notifies your Board, in writing, within 30 days after execution of each amendment.

"To Enrich Lives Through Effective And Caring Service"

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

The purpose of this request is for authority to amend the Agreement with The Village Family Services to increase the MCA by \$7,000 so that DMH may pay this provider for services in order to comply with State CPE requirements necessary to draw down federal funds. The increase to the MCA is beyond DMH's delegated authority.

Prior to February 2008, DMH paid its contractors for services provided to Short-Doyle/Medi-Cal (SD/MC) eligible clients based on approved claims from the State. All claims submitted by DMH to the State were accompanied by a DMH certification on a standard State form representing the claims were medically necessary services to Medi-Cal beneficiaries. That certification did not require DMH to certify that it had paid any County funds; rather, the certification stated that the County had sufficient funds to pay the local match. Accordingly, if a contractor exceeded the MCA, DMH would stop processing payments until the cost settlement process determined the final payment due to the provider and, if necessary at that time, would execute an amendment to the contract under delegated authority or request Board approval of an amendment if the amount exceeded delegated authority.

Subsequent to February 2008, the State has required DMH to incur the actual expense prior to the State submitting claims for Federal Financial Participation (FFP) reimbursement. In order to accommodate this change, the State and DMH negotiated a bifurcated process to satisfy the CPE for Medi-Cal claiming purposes.

Under the bifurcated process, DMH signs a second certification after payments to contractors have been made. This second certification requires DMH to verify that all claims contained in the State approval file have been paid. Consequently, DMH no longer has the option of waiting until cost settlement to pay the providers. If any claims in a file are not paid, DMH cannot make the required certification.

Accordingly, DMH must pay The Village Family Services \$7,000 for claims for services provided so that DMH may then certify approximately \$202 million of total payments and obtain \$101 million in reimbursement of federal funds for claims submitted from July 1, 2008 to May 8, 2009. All other providers have been paid for services rendered during that time.

A Board-approved contract amendment is necessary because the \$7,000 represents an increase to the MCA beyond DMH's 20 percent delegated authority. The last Board-approved MCA for The Village Family Services of \$1,317,700 for FY 2008-09 was increased to \$2,014,231 through Amendment No. 3, as a result of the previously Board-approved Katie A. Corrective Action Plan, which granted the Director of Mental Health a

delegated authority to amend DMH contracts selected to provide the Foster Family Agency, Wraparound, and Treatment Foster Care mental health services.

Implementation of Strategic Plan Goals

The recommended actions are consistent with County Strategic Plan Goal 4, Health and Mental Health.

FISCAL IMPACT/FINANCING

There is no impact on net County cost.

The Amendment in the amount of \$7,000 is fully funded by Sales Tax Realignment. Sufficient appropriation is available in DMH's 2009-10 Adopted Budget for the Amendment.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

The Village Family Services is located at 6736 Laurel Canyon Boulevard, Suite 200, North Hollywood, California 91606, in Supervisorial District 3, Mental Health Service Area 2. The Village Family Services is a community-based nonprofit organization focused on the prevention and treatment of child abuse and family violence. Established in 1997, The Village Family Services addresses the significant lack of culturally sensitive and appropriate, high-quality services for Latino children and families victimized by violence, abuse and neglect. They serve primarily Latino, monolingual Spanish-speaking children and families living in the greater San Fernando Valley area. The foster care program serves children and teens living in Los Angeles, San Bernardino, Riverside and Ventura counties.

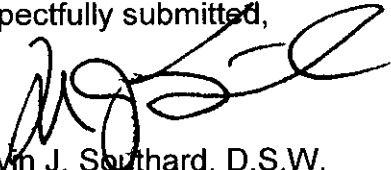
The Amendment format has been approved as to form by County Counsel. The CEO has reviewed the proposed actions.

The Honorable Board of Supervisors
September 15, 2009
Page 4

IMPACT ON CURRENT SERVICES

This action will have no impact on current services.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'MJS', written over the typed name below.

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

MJS:RK:KN:SK:yl

Attachment

c: Chief Executive Officer
Acting County Counsel
Executive Officer, Board of Supervisors
Chairperson, Mental Health Commission

CONTRACT NO. MH120410

AMENDMENT NO. 5

THIS AMENDMENT is made and entered into this ___ day of ____, 2009, by and between the COUNTY OF LOS ANGELES (hereafter "County") and The Village Family Services (hereafter "Contractor").

WHEREAS, County and Contractor have entered into a written Agreement, dated December 2, 2008, identified as County Agreement No. MH120410, and any subsequent amendments (hereafter collectively "Agreement"); and

WHEREAS, for Fiscal Year (FY) 2008-09 only, County and Contractor intend to amend the Agreement as described hereunder; and

WHEREAS, for FY 2008-09 only, County and Contractor intend to amend the Agreement to increase the Maximum Contract Amount (MCA), including adjusting the MCAs specified for each County, State and/or Federal payer/fund source, in order to make payments to Contractor for claimed services when necessary to facilitate the State's implementation of the Federal Certified Public Expenditure (CPE) rules; and

WHEREAS, for FY 2008-09 only, County and Contractor intend to amend the Agreement to increase non-Early and Periodic Screening, Diagnosis, and Treatment (non-EPSTD) - Federal Financial Participation (FFP) Funds in the amount of \$3,962, and increase non-EPSTD County General Funds (CGF) match in the amount of \$3,962; and

WHEREAS, for FY 2008-09 only, County and Contractor intend to amend the Agreement to decrease EPSTD FFP Funds in the amount of \$3,874, increase EPSTD CGF match in the amount of \$7,866; and

WHEREAS, for FY 2008-09 only, County and Contractor intend to amend the Agreement to decrease Healthy Families CGF match in the amount of \$4,916; and

WHEREAS, for FY 2008-09 only, the MCA will increase by \$7,000 with a revised MCA of \$2,021,231.

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

1. The Financial Summary - 3 for Fiscal Year 2008-09 only, shall be deleted in its entirety and replaced with the Financial Summary - 5 (Attachment I) for Fiscal Year 2008-09 only, attached hereto and incorporated herein by reference. All references in the Agreement to the Financial Summary - 3 for Fiscal Year 2008-09 shall be deemed amended to state "Financial Summary - 5 for Fiscal Year 2008-09."
2. Contractor shall provide services in accordance with Contractor's Fiscal Year 2007-08 Negotiation Package for this Agreement and any addenda thereto approved in writing by director.
3. 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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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 or his designee, 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.

COUNTY OF LOS ANGELES

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

The Village Family Services
CONTRACTOR

By _____

Name Irma Seilicovich

Title Chief Operating Officer
(AFFIX CORPORATE SEAL HERE)

APPROVED AS TO FORM:
OFFICE OF THE COUNTY COUNSEL

APPROVED AS TO CONTRACT
ADMINISTRATION:

DEPARTMENT OF MENTAL HEALTH

By _____
Chief, Contracts Development
and Administration Division

Contractor Name: The Village Family Services
 Legal Entity Number: 01224
 Agreement Period: July 1, 2008 through June 30, 2010
 Fiscal Year: 2008-09

DMH Legal Entity Agreement
 Attachment III
 The Financial Summary - 5
 Amendment No. 5

L I N E #	COLUMNS DESCRIPTION	Sum of 2 + 3 + 4 + 5 + 6 = 1				
		1 MAXIMUM CONTRACT ALLOCATION TOTALS	2 LOCAL MHP NON MEDI-CAL	3 DCFS STOP SGF 70% County Local 30%	4 MAA and NON-EPSDT MEDI-CAL PROGRAMS FFP 50% County Local 50%	5 EPSDT MEDI-CAL PROGRAM FFP 50% SGF - EPSDT 43.19% County Local 6.81%
				Categorical Restricted CGF	Local Match share for claiming Certified Public Expenditure Categorically Restricted Local Funds* (see footnote)	
1	A. Contractual Limitation By Responsible Financial Party:					
2	CGF*	\$ 106,881		-	3,962	79,404
3	CGF - Psychiatric Emergency Services (PES) (NCC)	-				
4	CGF - Transitional Residential Program (NCC)	-				
5	SAMHSA, CFDA #93.958	-				
6	SAMHSA - Child Mental Health Initiative, CFDA #93.104	-				
7	SAMHSA - Targeted Capacity Expansion, CFDA #93.243	-				
8	PATH, CFDA #93.150	-				
9	CalWORKs - Flex Fund	-				
10	CalWORKs - Mental Health Services (MHS)	-				
11	CalWORKs - Community Outreach Services (COS)	-				
12	CalWORKs - Families Project - Client Support Services	-				
13	CalWORKs - Families Project - MHS & Targeted Case Management	-				
14	CalWORKs - Families Project - COS	-				
15	DPSS - GROW	-				
16	DCFS AB 2994	-				
17	DCFS Family Preservation	-				
18	DCFS Star View Life Support PHF	-				
19	DCFS Independent Living	-				
20	DCFS STOP	-				
21	DCFS Medical Hubs	-				
22	DCFS - Basic MH Services - Enhanced Specialized Foster Care	-				
23	DCFS - Intensive In-Home - Enhanced Specialized Foster Care	-				
24	DCFS - Multidisciplinary Assessment Team (MAT) - Enh Spec Foster Care	20,323	16,875			3,448
25	DCFS - Wraparound	55,502				55,502
26	Probation - Substance Abuse/Co-Occurring Disorder Services	-				
27	Probation - Neurobehavioral Demonstration Pilot Project	-				
28	Probation - Title IV E Waiver	-				
29	Schiff-Cardenas - M.H. Screening, Assessment, and Treatment (MHSAT)	-				
30	Schiff-Cardenas - Multi-Systemic Therapy Program (MST)	-				
31	ADPA Housing	-				
32	DHS-OAPP HIV/AIDS	-				
33	DHS Dual Diagnosis	-				
34	DHS Social Model Recovery	-				
35	DHS LAMP	-				
36	HIV AIDS	-				
37	IDEA (AB 3632 - SEP), CFDA #84.027	-				
38	AB3632 - SEP (SB 1807); SB 90	-				
39	State Managed Care Allocation	-				
40	Mental Health Services Act (MHSA) - FSP					
41	A. Child					
42	One Time Cost	-				
43	Client Supportive Services (Flex Funds)	-				
44	Mental Health Services	-				
45	B. Transitional Age Youth					
46	One Time Cost	-				
47	Client Supportive Services (Flex Funds)	-				
48	Mental Health Services	-				
49	C. Adult					
50	One Time Cost	-				
51	Client Supportive Services (Flex Funds)	-				
52	Mental Health Services	-				
53	D. Older Adult					
54	One Time Cost	-				
55	Client Supportive Services (Flex Funds)	-				
56	Mental Health Services	-				

Contractor Name: The Village Family Services
 Legal Entity Number: 01224
 Agreement Period: July 1, 2008 through June 30, 2010
 Fiscal Year: 2008-09

DMH Legal Entity Agreement
 Attachment III
 The Financial Summary - 5
 Amendment No. 5

L I N E #	COLUMNS DESCRIPTION	Sum of 2 + 3 + 4 + 5 + 6 = 1				
		1 MAXIMUM CONTRACT ALLOCATION TOTALS	2 LOCAL MHP NON MEDI-CAL	3 DCFS STOP SGF 70% County Local 30%	4 MAA and NON-EPSDT MEDI-CAL PROGRAMS FFP 50% County Local 50%	5 EPSDT MEDI-CAL PROGRAM FFP 50% SGF - EPSDT 43.19% County Local 6.81%
				Categorical Restricted CGF	Local Match share for claiming Certified Public Expenditure Categorically Restricted Local Funds* (see footnote)	
57	Mental Health Services Act (MHSA) - Non FSP					
58	A. Child					
59	Integrated MH/COD Services	-				
60	Family Crisis Services - Respite Care	-				
61	One Time Cost	-				
62	B. Transitional Age Youth					
63	Drop-In Centers	-				
64	Probation Camps	-				
65	One Time Cost	-				
66	C. Adult					
67	IMD Step Down	-				
68	Safe Haven	-				
69	One Time Cost	-				
70	D. Older Adult					
71	Older Adult Service Extenders	-				
72	Older Adult Training	-				
73	One Time Cost	-				
74	E. Cross-Cutting					
75	Urgent Care	-				
76	Enriched Residential Services	-				
77	One Time Cost	-				
78	Mental Health Services Act (MHSA) - Family Supportive Services (FSS)					
79	Mental Health Services Act (MHSA) - Wellness Centers					
80	One Time Cost	-				
81	Wellness Centers	-				
82	Wellness Centers - Client Run	-				
83	Mental Health Services Act (MHSA) - Field Capable Clinical Services					
84	A. Child					
85	One Time Cost	-				
86	Client Supportive Services (Flex Funds)	-				
87	Mental Health Services	-				
88	B. Transitional Age Youth					
89	One Time Cost	-				
90	Client Supportive Services (Flex Funds)	-				
91	Mental Health Services	-				
92	C. Adult					
93	One Time Cost	-				
94	Client Supportive Services (Flex Funds)	-				
95	Mental Health Services	-				
96	D. Older Adult					
97	One Time Cost	-				
98	Client Supportive Services (Flex Funds)	-				
99	Mental Health Services	-				
100	Mental Health Services Act (MHSA) - Jail Linkage Services					
101	Mental Health Services Act (MHSA) - Outreach and Engagement					
102	Medi-Cal, Healthy Families, or MAA FFP	1,010,951			3,962	954,189
103	SGF - EPSDT	827,574				827,574
104						
105	Maximum Contract Amount (A)	\$ 2,021,231	16,875		\$ 7,748	1,920,116
106					0.51	0.50
107	B. Third Party:					
108	Medicare	-				
109	Patient Fees	-				
110	Insurance	-				
111	Other	-				
112		-				
113	Total Third Party (B)	-	-	-	-	-
114						
115	GROSS PROGRAM BUDGET (A+B)	\$ 2,021,231	16,875	-	7,748	1,920,116

Footnote

* These Local Funds are restricted in compliance with specific statutory, regulatory, and contractual requirements and obligations that are conditions for Medi-Cal reimbursement of Short-Doyle Medi-Cal claims. California Code of Regulations Title 9, Division 1, Chapter 11, Subchapter 4, Article 1, paragraph 1840.112 MHP Claims Certification and Program Integrity and Federal Code of Regulations, Title 42, Section 438.608.

Revised: 9/30/08

Contractor Name: The Village Family Services
 Legal Entity No.: 01224
 Agreement Period: July 1, 2008 through June 30, 2010
 Fiscal Year: 2008-09

DMH Legal Entity Agreement
 The Rate Summary
 Amendment No. 5

MENTAL HEALTH SERVICES	Mode of Service	Service Function Code (SFC) Range	Provisional Rates Negotiated NR	Provisional Rates Cost Reimb. CR	Provider Numbers
A. 24-HOUR SERVICES:					
Hospital Inpatient	05	10 - 18			
Hospital Administrative Day	05	19			
Psychiatric Health Facility (PHF)	05	20 - 29			
SNF Intensive	05	30 - 34			
IMD/STP Basic (No Patch)	Beds 1-59	05 35			
	Beds 60 & over	05 35			
Patch for IMD	05	36 - 39			
Mentally Ill Offenders	Regular	05 36 - 39			
	Indigent	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 Rehabilitation: Half Day	10	91 - 94			
Day Rehabilitation: Full Day	10	95 - 99			
C. OUTPATIENT SERVICES:					
Targeted Case Management Services (TCMS), formerly Case Management Brokerage	15	01 - 09		\$1.75	7564
Mental Health Services	15	10 - 19/ 30 - 59		\$2.28	7564
Therapeutic Behavioral Services (TBS)	15	58			
Medication Support	15	60 - 69		\$4.22	7564
Crisis Intervention	15	70 - 79			
D. OUTREACH SERVICES:					
Mental Health Promotion	45	10 - 19			
Community Client Services	45	20 - 29			
E. SUPPORT SERVICES:					
Life Support/Board & Care	60	40 - 49			
Case Management Support	60	60 - 69			
Client Supportive Services (Cost Reimbursement)	60	64			
		70 - 79			
F. Medi-Cal Administrative Activities (MAA):					
MAA	55	01 - 35			

DMH Amendment Summary

LEGAL ENTITY NAME: The Village Family Services

Contract No.: MH120410

Legal Entity No.: 01224

Amendment No. 5

LIST OF FUNDING SOURCES, PLANS, AND/OR SERVICES

(Please check all applicable funding sources, plans, and/or services for Amendment only.)

1	CGF	x	45	MHSA – FSP - TAY – Client Supportive Services (Flex Funds)	
2	CGF – Psychiatric Emergency Services (PES) (NCC)		46	MHSA – FSP - TAY – Mental Health Services	
3	CGF – Homeless Services (NCC)		47	MHSA – FSP - Adult – One Time Cost	
4	CGF – Transitional Residential Program (NCC)		48	MHSA – FSP - Adult – Client Supportive Services (Flex Funds)	
5	SAMHSA, CFDA #93.958		49	MHSA – FSP - Adult – Mental Health Services	
6	SAMHSA – Child Mental Health Initiative, CFDA #93.104		50	MHSA – FSP - Older Adult – One Time Cost	
7	SAMHSA – Targeted Capacity Expansion, CFDA #93.243		51	MHSA – FSP - Older Adult – Client Supportive Services (Flex Funds)	
8	PATH, CFDA #93.150		52	MHSA – FSP - Older Adult – Mental Health Services	
9	CalWORKs – Flex Fund		53	MHSA – Non FSP - Child – Integrated MH/COD Services	
10	CalWORKs – Mental Health Services (MHS)		54	MHSA – Non FSP - Child – Family Crisis Services – Respite Care	
11	CalWORKs – Community Outreach Services (COS)		55	MHSA – Non FSP - Child – One Time Cost	
12	CalWORKs – Families Project – Client Support Services		56	MHSA – Non FSP - TAY – Drop-In Centers	
13	CalWORKs – Families Project – MHS & Targeted Case Management		57	MHSA – Non FSP - TAY – Probation Camps	
14	CalWORKs – Families Project - COS		58	MHSA – Non FSP - TAY – One Time Cost	
15	DPSS – GROW		59	MHSA – Non FSP - Adult - IMD Step Down	
16	DCFS – AB 2994		60	MHSA – Non FSP - Adult – Safe Haven	
17	DCFS – Family Preservation		61	MHSA – Non FSP - Adult – One Time Cost	
18	DCFS – Star View Life Support PHF		62	MHSA – Non FSP – Older Adult – Service Extenders	
19	DCFS – Independent Living		63	MHSA – Non FSP - Older Adult – Training	
20	DCFS – STOP		64	MHSA – Non FSP - Older Adult – One Time Cost	
21	DCFS – Medical Hubs		65	MHSA – Non FSP - Cross-Cutting – Urgent Care	
22	DCFS – Basic MH Services – Enhanced Specialized Foster Care		66	MHSA – Non FSP - Cross-Cutting – Enriched Residential Services	
23	DCFS – Intensive In-Home – Enhanced Specialized Foster Care		67	MHSA – Non FSP - Cross-Cutting – One Time Cost	
24	DCFS – Intensive In-Home – Enhanced Specialized Foster Care – One Time Cost		68	MHSA – Family Supportive Services (FSS)	
25	DCFS – Multidisciplinary Assessment Team (MAT) – Enhanced Specialized Foster Care		69	MHSA – Wellness Centers – One Time Cost	
26	DCFS – Wraparound		70	MHSA – Wellness Centers	
27	Probation – Substance Abuse/Co-Occurring Disorder Services		71	MHSA – Wellness Centers - Client Run	
28	Probation – Neurobehavioral Demonstration Pilot Project		72	MHSA – FCCS – Child - One Time Cost	
29	Probation – Title IV E Waiver		73	MHSA – FCCS – Child - Client Supportive Services (Flex Funds)	
30	Schiff-Cardenas – M.H. Screening, Assessment, and Treatment (MHSAT)		74	MHSA – FCCS – Child - Mental Health Services	
31	Schiff-Cardenas – Multi-Systemic Therapy Program (MST)		75	MHSA – FCCS – TAY - One Time Cost	

DMH Amendment Summary

LEGAL ENTITY NAME: The Village Family Services

Contract No.: MH120410 Legal Entity No.: 01224 Amendment No. 5

32	ADPA Housing
33	DHS-OAPP HIV/AIDS
34	DHS Dual Diagnosis
35	DHS Social Model Recovery
36	DHS LAMP
37	HIV AIDS
38	IDEA (AB 3632 – SEP), CFDA #84.027
39	AB3632 – SEP (SB 1807); SB90
40	State Managed Care Allocation
41	MHSA – FSP – Child – One Time Cost
42	MHSA – FSP – Child – Client Supportive Services (Flex Funds)
43	MHSA – FSP - Child – Mental Health Services
44	MHSA – FSP - TAY – One Time Cost

76	MHSA – FCCS – TAY - Client Supportive Services (Flex Funds)	
77	MHSA – FCCS – TAY - Mental Health Services	
78	MHSA – FCCS – Adult - One Time Cost	
79	MHSA – FCCS – Adult - Client Supportive Services (Flex Funds)	
80	MHSA – FCCS – Adult - Mental Health Services	
81	MHSA – FCCS – Older Adult - One Time Cost	
82	MHSA – FCCS – Older Adult - Client Supportive Services (Flex Funds)	
83	MHSA – FCCS – Older Adult - Mental Health Services	
84	MHSA – Jail Linkage Services	
85	MHSA – Outreach and Engagement	
86	Medi-Cal, Healthy Families, or MAA FFP	x
87	SGF - EPSDT	

FUNDING SOURCE(S)	
(Select from Funding Sources listed above for Amendment.)	
Non-EPSDT-FFP	
Non-EPSDT-CGF	
EPSDT-FFP	
EPSDT-CGF	
Healthy Families-CGF	

AMOUNT	FISCAL YEAR	MCA
Increase/Decrease		
+\$3,962	2008-09	
+\$3,962	2008-09	
-\$3,874	2008-09	
+7,866	2008-09	
-\$4,916	2008-09	
		\$,2021,231

(See Financial Summary(ies) for funding details to MCA.)

AMENDMENT ACTION(S): **BOARD ADOPTED DATE:** _____ **EFFECTIVE DATE:** FY 2008-09

Amendment action is to increase the Maximum Contract Amount by \$7,000 to \$2,021,231 for services rendered during FY 2008-09 in order to facilitate the State's implementation of the Federal Certified Public Expenditure rules.

New Headquarters' (HQ) Address: _____ HQ Sup. District: _____

Service Area(s): _____

ADD OR DELETE SERVICE SITE(S):

Name	Address	Sup. Dist.	Svc. Area(s)	Prov. No.

Deputy Director: Carlotta Childs-Seagle

Lead Manager: Eva Carrera