

COUNTY OF LOS ANGELES

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

SUSAN KERR
Chief Deputy Director

RODERICK SHANER, M.D.
Medical Director



BOARD OF SUPERVISORS

GLORIA MOLINA
YVONNE B. BURKE
ZEV YAROSLAVSKY
DON KNABE
MICHAEL D. ANTONOVICH

DEPARTMENT OF MENTAL HEALTH

<http://dmh.lacounty.info>

550 SOUTH VERMONT AVENUE, LOS ANGELES, CALIFORNIA 90020

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

April 28, 2005

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

57

MAY 10 2005

Violet Varona-Lukens
VIOLET VARONA-LUKENS
EXECUTIVE OFFICER

Dear Supervisors:

**APPROVAL OF AMENDMENT TO EXISTING DEPARTMENT OF MENTAL HEALTH
LEGAL ENTITY AGREEMENT WITH
ST. FRANCIS MEDICAL CENTER – CHILDREN’S COUNSELING CENTER
FOR FISCAL YEAR 2004-2005
(SUPERVISORIAL DISTRICT 2)
(3 VOTES)**

IT IS RECOMMENDED THAT YOUR BOARD:

1. Approve and instruct the Director of Mental Health or his designee to prepare, sign, and execute Amendment No. 2, substantially similar to the Attachment, to the existing Legal Entity (LE) Agreement No. DMH-01835 with St. Francis Medical Center – Children’s Counseling Center (St. Francis Medical Center) for the provision of Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Title XIX Medi-Cal services in Fiscal Year (FY) 2004-2005. This Amendment increases the Maximum Contract Amount (MCA) for FY 2004-2005 by \$832,500, from \$964,032 to \$1,796,532, fully funded with \$41,600 in budgeted Realignment revenue for the EPSDT growth match, \$416,200 in Federal Financial Participation (FFP) Medi-Cal revenue, and \$374,700 in EPSDT-State General Funds (SGF). Department of Mental Health (DMH) will utilize \$832,500 of existing appropriation included in its FY 2004-2005 Adopted Budget to fund the increase in St. Francis Medical Center’s MCA for FY 2004-2005.
2. Delegate authority to the Director of Mental Health or his designee to prepare, sign, and execute future amendments to the LE Agreement with St. Francis Medical Center and establish as a new MCA the aggregate of the original Agreement and all amendments through and including this Amendment, provided

“To Enrich Lives Through Effective And Caring Service”

that: 1) the County's total payments to contractor under the Agreement for each fiscal year shall not exceed an increase of 20 percent from the applicable revised MCA; 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 (CAO) or his designee is obtained prior to any such Amendment; 5) County and contractor may, by written Amendment, reduce programs or services and revise the applicable MCA; 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.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTIONS

Amendment No. 2, which increases St. Francis Medical Center's MCA by \$832,500 for FY 2004-2005 only, exceeds the 20 percent MCA delegated authority language previously approved by your Board on June 29, 2004 for this contractor. A subsequent Board action will be sought to renew this LE Agreement as of July 1, 2005, with two (2) automatic one-year renewal periods.

Your Board's approval of this Amendment increase will enable DMH to better align the actual demand for mandated EPSDT services with the contractor's capacity to provide and be reimbursed timely for those services. Since the first phase of the redirection and expansion of the EPSDT program in June 2003, St. Francis Medical Center has experienced a significant increase in demand for EPSDT-funded services from the Compton/Lynwood communities in Service Area 6. The expansion of St. Francis Medical Center's service capacity complies with DMH's guiding principles for EPSDT expansion by enhancing the availability of mental health services in communities that have few resources.

Implementation of Strategic Plan Goals

The recommended Board actions are consistent with the County's Organizational Goal No. 4, "Fiscal Responsibility," and Programmatic Goal No. 5, "Children and Families' Well-Being," within the Countywide Strategic Plan. Your Board's approval of this Amendment will enable DMH to make FY 2004-2005 payments to St. Francis Medical Center in compliance with DMH's LE Agreement and will also strengthen the mental health services delivery system and improve service accessibility within Service Area 6.

FISCAL IMPACT/FINANCING

There is no increase in net County cost.

Amendment No. 2 to the existing LE Agreement with St. Francis Medical Center in the amount of \$832,500 for FY 2004-2005 will be funded by \$41,600 in budgeted Realignment revenue for the EPSDT growth match, \$416,200 in FFP Medi-Cal revenue, and \$374,700 in EPSDT-SGF included in DMH's FY 2004-2005 Adopted Budget. St. Francis Medical Center's revised MCA will total \$1,796,532 for FY 2004-2005.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

Board approval is required for Amendment No. 2 to increase St. Francis Medical Center's MCA for FY 2004-2005 by \$832,500, from \$964,032 to \$1,796,532, to enable DMH to better align the actual demand for mandated EPSDT services with the contractor's capacity to provide and be reimbursed timely for those services. This Amendment increase exceeds the 20 percent MCA authority delegated to the Director of Mental Health or his designee by your Board on June 29, 2004.

Since the implementation of the Medicaid's EPSDT program in FY 1994-1995, DMH has been required to significantly increase the availability of mental health services to Medi-Cal eligible beneficiaries under 21 years of age and has, thus been able to achieve a comprehensive system of care to Medicaid recipients. The EPSDT program provides medically necessary services to Medi-Cal eligible beneficiaries under 21 years of age to correct or ameliorate a physical or mental disability or condition.

Since the first phase of the redirection and expansion of the EPSDT program in June 2003, St. Francis Medical Center has experienced a significant increase in demand for EPSDT-funded services from the Compton/Lynwood communities in Service Area 6. The expansion of St. Francis Medical Center's service capacity complies with DMH's guiding principles for EPSDT expansion by enhancing the availability of mental health services in communities that have few resources.

St. Francis Medical Center is located at 3630 E. Imperial Highway, Lynwood, CA 90262, in Supervisorial District 2. St. Francis Medical Center provides culturally and linguistically appropriate services to children and families in settings that meet their specific needs and continually strives to create programs to address unmet needs and high demands in this service area. This agency is one of the few in Service Area 6 with the capacity to meet the increasing demand for bilingual Spanish-speaking services, in that more than 90 percent of the staff are Spanish-speaking. It is also one of two (2) contractors serving the Compton/Lynwood communities. Without the requested expansion, approximately 400 children, adolescents, and their families who have been identified as in need of service will be adversely impacted.

The attached Amendment has been approved as to form by County Counsel. CAO and DMH's Fiscal and Program Administrations have reviewed the proposed actions.

CONTRACTING PROCESS

Upon Board approval, DMH will execute Amendment No. 2 to the existing LE Agreement No. DMH-01835 with St. Francis Medical Center, increasing its FY 2004-2005 MCA by \$832,500, in order to allow for increased EPSDT service capacity for the underserved Compton/Lynwood communities.

IMPACT ON CURRENT SERVICES

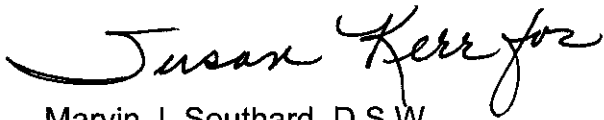
Your Board's approval of this Amendment will enable DMH to continue to augment current levels of EPSDT program entitlement services in critically-needed areas throughout Los Angeles County. Without Board approval, access to EPSDT Title XIX Medi-Cal services will be restricted, and the residents of the Compton/Lynwood communities will continue to be seriously underserved.

The Honorable Board of Supervisors
April 28, 2005
Page 5

CONCLUSION

The Department of Mental Health will need one (1) copy of the adopted Board's action. It is requested that the Executive Officer of the Board of Supervisors notifies 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:SK:MY:LW

Attachment

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

EF:KT:St. Francis Amend. #2 Board Letter

CONTRACT NO. DMH-01835

AMENDMENT NO. 2

THIS AMENDMENT is made and entered into this _____ day of _____, 2005, by and between the COUNTY OF LOS ANGELES (hereafter "County") and St. Francis Medical Center – Children's Counseling Center (hereafter "Contractor").

WHEREAS, County and Contractor have entered into a written Agreement, dated June 29, 2004, identified as County Agreement No. DMH-01835, and any subsequent amendments (hereafter collectively "Agreement"); and

WHEREAS, for Fiscal Year 2004-2005, County and Contractor intend to amend Agreement only as described hereunder; and

WHEREAS, the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Program is a Federal entitlement for children and youth who are Medicaid beneficiaries and provides specialty mental health services that maintain severely emotionally disturbed (SED) children and youth in the community and/or least restrictive setting. The State Department of Mental Health allocates State General Fund (SGF) to the County of Los Angeles – Department of Mental Health to provide local match dollars to Federal Financial Participation (FFP) Medi-Cal dollars used to fund full-scope Medi-Cal beneficiaries under 21 years of age; and

WHEREAS, for Fiscal Year 2004-2005 only, County and Contractor intend to amend Agreement to increase EPSDT-CGF Growth Match funds in the amount of

\$41,600, EPSDT-FFP Medi-Cal funds in the amount of \$416,200, and EPSDT-SGF funds in the amount of \$374,700 for a combined total increase of \$832,500, to the Maximum Contract Amount (MCA) for the delivery of countywide, community-based children's mental health care services; and

WHEREAS, for Fiscal Year 2004-2005 only, the MCA will be increased with a revised MCA of \$1,796,532; and

WHEREAS, for Fiscal Year 2004-2005, County and Contractor intend to amend Agreement to replace contract language in regards to the Preamble; and

WHEREAS, for Fiscal Year 2004-2005, County and Contractor intend to amend Agreement to add contract language in regards to Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion – Lower Tier Covered Transactions (45 C.F.R. Part 76).

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

1. Paragraph 4 (FINANCIAL PROVISIONS), Subparagraphs B (Reimbursement For Initial Period) shall be deleted in its entirety and the following substituted therefor:

"B. Reimbursement For Initial Period: The Maximum Contract Amount for the Initial Period of this Agreement as described in Paragraph 1 (TERM) shall not exceed ONE MILLION SEVEN HUNDRED NINETY-SIX THOUSAND FIVE HUNDRED THIRTY-TWO DOLLARS (\$1,796,532)

and shall consist of County, State, and/or Federal funds as shown 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 more than this Maximum Contract Amount for Contractor's performance hereunder during the Initial Period. Furthermore, Contractor shall inform County when up to 75 percent (75%) of the Maximum Contract Amount has been incurred. Contractor shall send such notice to those persons and addresses which are set forth in Paragraph 58 (NOTICES)."

2. Financial Summary for Fiscal Year 2004-2005 shall be deleted in its entirety and replaced with Financial Summary - 2 for Fiscal Year 2004-2005, attached hereto and incorporated herein by reference. All references in Agreement to Financial Summary Fiscal Year 2004-2005 shall be deemed amended to state "Financial Summary - 2 for Fiscal Year 2004-2005."
3. The PREAMBLE shall be deleted in its entirety and the following substituted therefor:

"PREAMBLE

For over a decade, the County has collaborated with its community partners to enhance the capacity of the health and human services system to improve the

lives of children and families. These efforts require, as a fundamental expectation, that the County's contracting partners share the County and community's commitment to provide health and human services that support achievement of the County's vision, goals, values, and adopted outcomes. Key to these efforts is the integration of service delivery systems and the adoption of the Customer Service and Satisfaction Standards.

The County of Los Angeles' Vision is to improve the quality of life in the County by providing responsive, efficient, and high quality public services that promote the self-sufficiency, well-being and prosperity of individuals, families, business and communities. This philosophy of teamwork and collaboration is anchored in the shared values of:

- Responsiveness
- Professionalism
- Accountability
- Compassion
- Integrity
- Commitment
- A Can-Do Attitude
- Respect for Diversity

These shared values are encompassed in the County Mission to enrich lives through effective and caring service and the County Strategic Plan's eight goals: 1) Service Excellence; 2) Workforce Excellence; 3) Organizational Effectiveness; 4) Fiscal Responsibility; 5) Children and Families' Well-Being; 6) Community Services; 7) Health and Mental Health; and 8) Public Safety. Improving the well-being of children and families requires coordination, collaboration, and integration of services across functional and jurisdictional

boundaries, by and between County departments/agencies, and community and contracting partners.

The basic conditions that represent the well-being we seek for all children and families in Los Angeles County are delineated in the following five outcomes, adopted by the Board of Supervisors in January 1993.

- Good Health;
- Economic Well-Being;
- Safety and Survival;
- Emotional and Social Well-Being; and
- Education and Workforce Readiness.

Recognizing no single strategy - in isolation - can achieve the County's outcomes of well-being for children and families, consensus has emerged among County and community leaders that making substantial improvements in integrating the County's health and human services system is necessary to significantly move toward achieving these outcomes. The County has also established the following values and goals for guiding this effort to integrate the health and human services delivery system:

- ✓ Families are treated with respect in every encounter they have with the health, educational, and social services systems.
- ✓ Families can easily access a broad range of services to address their needs, build on their strengths, and achieve their goals.
- ✓ There is no "wrong door": wherever a family enters the system

is the right place.

- ✓ Families receive services tailored to their unique situations and needs.
- ✓ Service providers and advocates involve families in the process of determining service plans, and proactively provide families with coordinated and comprehensive information, services, and resources.
- ✓ The County service system is flexible, able to respond to service demands for both the Countywide population and specific population groups.
- ✓ The County service system acts to strengthen communities, recognizing that just as individuals live in families, families live in communities.
- ✓ In supporting families and communities, County agencies work seamlessly with public and private service providers, community-based organizations, and other community partners.
- ✓ County agencies and their partners work together seamlessly to demonstrate substantial progress towards making the system more strength-based, family-focused, culturally-competent, accessible, user-friendly, responsive, cohesive, efficient, professional, and accountable.

- ✓ County agencies and their partners focus on administrative and operational enhancements to optimize the sharing of information, resources, and best practices while also protecting the privacy rights of families.
- ✓ County agencies and their partners pursue multi-disciplinary service delivery, a single service plan, staff development opportunities, infrastructure enhancements, customer service and satisfaction evaluation, and revenue maximization.
- ✓ County agencies and their partners create incentives to reinforce the direction toward service integration and a seamless service delivery system.
- ✓ The County human service system embraces a commitment to the disciplined pursuit of results accountability across systems. Specifically, any strategy designed to improve the County human services system for children and families should ultimately be judged by whether it helps achieve the County's five outcomes for children and families: good health, economic well-being, safety and survival, emotional and social well-being, and education and workforce readiness.

The County, its clients, contracting partners, and the community will continue to work together to develop ways to make County services more

accessible, customer friendly, better integrated, and outcome-focused. Several departments have identified shared themes in their strategic plans for achieving these goals including: making an effort to become more consumer/client-focused; valuing community partnerships and collaborations; emphasizing values and integrity; and using a strengths-based and multi-disciplinary team approach. County departments are also working to provide the Board of Supervisors and the community with a better understanding of how resources are being utilized, how well services are being provided, and what are the results of the services: is anyone better off?

The County of Los Angeles health and human service departments and their partners are working together to achieve the following ***Customer Service And Satisfaction Standards*** in support of improving outcomes for children and families.

Personal Service Delivery

The service delivery team – staff and volunteers – will treat customers and each other with courtesy, dignity, and respect.

- Introduce themselves by name
- Listen carefully and patiently to customers
- Be responsive to cultural and linguistic needs
- Explain procedures clearly
- Build on the strengths of families and communities

/

Service Access

Service providers will work proactively to facilitate customer access to services.

- Provide services as promptly as possible
- Provide clear directions and service information
- Outreach to the community and promote available services
- Involve families in service plan development
- Follow-up to ensure appropriate delivery of services

Service Environment

Service providers will deliver services in a clean, safe, and welcoming environment, which supports the effective delivery of services.

- Ensure a safe environment
- Ensure a professional atmosphere
- Display vision, mission, and values statements
- Provide a clean and comfortable waiting area
- Ensure privacy
- Post complaint and appeals procedures

The basis for all County health and human services contracts is the provision of the highest level of quality services that support improved outcomes for children and families. The County and its contracting partners must work

together and share a commitment to achieve a common vision, goals, outcomes, and standards for providing services.”

4. Paragraph 59 (CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION – LOWER TIER COVERED TRANSACTIONS (45 C.F.R. PART 76) shall be added to the Agreement (if applicable):

“59. CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION – LOWER TIER COVERED TRANSACTIONS (45 C.F.R. Part 76): Contractor hereby acknowledges that the County is prohibited from contracting with and making sub-awards to parties that are suspended, debarred, ineligible, or excluded or whose principals are suspended, debarred, ineligible, or excluded from securing federally funded contracts. By executing this Agreement, Contractor certifies that neither it nor any of its owners, officers, partners, directors or other principals is currently suspended, debarred, ineligible, or excluded from securing federally funded contracts. Further, by executing this Agreement, Contractor certifies that, to its knowledge, none of its subcontractors, at any tier, or any owner, officer, partner, director or other principal of any subcontractor is currently suspended, debarred, ineligible, or excluded from securing federally funded contracts. Contractor shall immediately notify County in writing, during the term of this Agreement, should it or any of its

subcontractors or any principals of either be suspended, debarred, ineligible, or excluded from securing federally funded contracts. Failure of Contractor to comply with this provision shall constitute a material breach of this Agreement upon which the County may immediately terminate or suspend this Agreement."

5. Contractor shall provide services in accordance with the Contractor's Fiscal Year 2002-2003 Negotiation Package for this Agreement and any addenda thereto approved in writing by Director.
6. Except as provided in this Amendment, all other terms and conditions of the Agreement shall remain in full force and effect.

/

/

/

/

/

/

/

/

/

/

/

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

St. Francis Medical Center -
Children's Counseling Center

CONTRACTOR

By _____

Name _____

Title _____
(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

Zip and H drive: EPSDT Redir. Amend FY 04-05

Legal Entity Number: 00784

Agreement Period: July 1, 2004 to June 30, 2005

Fiscal Year: 2004-2005

Categories	Maximum Funding Source Totals	
A. Allocations:		CR or NR
County General Fund (CGF)		
1. EPSDT Baseline CGF Match	\$ -	
2. SB 90 (AB 3632) Baseline CGF Match	\$ -	
3. EPSDT Growth CGF Match	\$ 42,100	
4. Healthy Families CGF Match	\$ 3,500	
5. Non EPSDT - FFP CGF Match	\$ -	
6. STOP CGF Match	\$ -	
<u>Sub-Total Categorical CGF</u>	\$ 45,600	
7. Other CGF	\$ -	
<u>TOTAL CGF (1 through 7)</u>	\$ 45,600	
DCFS- Family Preservation	\$ 38,370	NR
	\$ -	
	\$ -	
<u>TOTAL ALLOCATIONS (A)</u>	\$ 83,970	
B. Pass Through:		
FFP:		
1. Healthy Families FFP	\$ 6,500	
2. Non EPSDT - FFP	\$ 19,662	
a. Medi-Cal Administrative Activities (MAA) FFP	\$ -	
3. EPSDT - FFP	\$ 864,200	
<u>TOTAL FFP</u>	\$ 890,362	
EPSDT - State General Fund (SGF)	\$ 822,200	
SB 90/IDEA (AB 3632)	\$ -	
<u>TOTAL PASS THROUGH (B)</u>	\$ 1,712,562	
Maximum Contract Amount/Net Program Budget (A+B):		\$ 1,796,532
C. Third Party:		
Medicare	\$ -	
Patient Fees	\$ -	
Insurance	\$ -	
Other	\$ -	
<u>TOTAL THIRD PARTY (C)</u>	\$ -	
Gross Program Budget (A+B+C):		\$ 1,796,532

Footnotes Section:

This EPSDT amendment adds \$832,500 (\$41,600 in EPSDT-CGF Growth Match, \$416,200 in EPSDT-FFP Medi-Cal, and \$374,700 in EPSDT-SGF) to the Maximum Contract Amount (MCA) for FY 2004-2005. The revised MCA is \$1,796,532 for FY 2004-2005.

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	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			
Day Rehabilitative : Full Day		10	95-99			
C. OUTPATIENT SERVICES						
Targeted Case Management Services (TCMS), formerly Case Management Brokerage		15	01 - 09	\$1.83		7346, 7499
Mental Health Services		15	10 - 19 /30-59	\$2.36		7346, 7499
Therapeutic Behavioral Services (TBS)		15	58			
Medication Support		15	60 - 69	\$4.16		7346, 7499
Crisis Intervention		15	70 - 79		\$2.45	7346, 7499
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			
Flexible Funding (Cost Reimbursement)		60	64			
F. Medi-Cal Administrative Activities (MAA)						
MAA		55	01-35			

DMH Summary of Amendment Changes

LEGAL ENTITY NAME: St. Francis Medical Center - Children's Counseling Center

Contract No.: DMH-01835

Legal Entity No.: 00784

Amendment No.: 2

LISTING OF FUNDING SOURCES

	Realignment/CGF				
		12	DCFS AB 3632 Family Preservation	24	PATH/McKinney
1	EPSDT Baseline CGF Match	13	DHS/ADPA (Sidekick)	25	AB 2994
2	SB 90 (AB 3632) Baseline CGF Match	14	DCFS Star View	26	AB 2034: Services
3	EPSDT Growth CGF Match	15	DPSS CalWORKs		AB 2034: Client Supportive Services
4	Healthy Families CGF Match	16	DPSS GROW	27	SAMHSA/AB 3015
5	Non EPSDT-FFP CGF Match	17	DHS Lamp		SAMHSA: Flex Funds
6	STOP CGF Match	18	DHS Social Model	28	State HIV/AIDS
7	Other CGF	19	DCFS STOP (SGF)	29	SB 90 (AB 3632)
8	DHS/ADPA AB 2034	20	DCFS Hillview/Transitional Living	30	Healthy Families FFP
9	DHS/ADPA Dual Diagnosis	21	Probation Schiff-Cardenas	31	Non EPSDT-FFP
10	DCFS Family Preservation	22	DHS/ADPA Dual Diagnosis (BHS)	32	EPSDT-FFP
11	DCFS AB 1733 Child Abuse	23	DCFS THP	33	EPSDT-SGF

FUNDING SOURCE(S):

(Select from Funding Sources listed above.)

AMOUNT
Increase/Decrease

FISCAL YEAR

MCA

3	EPSDT Growth CGF Match	\$ 41,600	2004-2005	
32	EPSDT-FFP	\$ 416,200	2004-2005	
33	EPSDT-SGF	\$ 374,700	2004-2005	\$ 1,796,532

AMENDMENT ACTION(S):

BOARD ADOPTED DATE: _____

EFFECTIVE DATE: _____

For FY 2004-2005, this EPSDT Amendment adds \$832,500 (\$41,600 in EPSDT-CGF Growth Match, \$416,200 in EPSDT-FFP Medi-Cal, and \$374,700 in EPSDT-SGF) to the Maximum Contract Amount (MCA). The revised MCA is \$1,796,532 for FY 2004-2005.

New Headquarters Address: N/A

Sup. Dist.: 2
Svc. Area: 6

ADD OR DELETE SERVICE SITE(S): N/A

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