THIS AMENDMENT, entered into between the State of Florida, Department of Children and Families, hereinafter referred to as the "Department" and Broward Behavioral Health Coalition, Inc., hereinafter referred to as the "Provider," amends Contract # JH343.

Amendment #0001 adjusted funding to account for funds not utilized by the Subcontractors while managed by DCF and to reflect changes in the Annual Operating Budget. Funding for FY12-13 was increased by \$1,380,030.07.

Amendment #0002 implemented S. B. 1518 for advances in payment methodology and schedule, and funding level for FY13-14 Annual Operating Budget. Funding for FY13-14 increased by \$259,496.00.

Amendment #0003 added a special provision incorporating those provisions required by 45 CFR s.164.504(e) including HIPAA language.

Amendment #0004 added \$1,260,175.00 to the current fiscal year FY13-14 of the JH343 contract including a transfer of funding between contract #KH225 with Budget Amendment B-0146.

Amendment #0005 added language to comply with the National Voter Registration Act.

Amendment #0006 reduced \$2,086.00 from the current fiscal year FY13-14.

Amendment #0007 moved the operational cost funds (Section A) to the services and supports provider activity (Section B.)

Amendment #0008 restated the contract to update Standard Contract and Attachments.

Amendment #0009 added \$2,018,954.00 to the current fiscal year FY14-15.

Amendment #0010 reduced \$38,693.00 from the current fiscal year FY14-15.

Amendment #0011 added \$44,118.00 to the current fiscal year FY14-15 and implemented Budget Amendment B-0126 between contract# KH225 and JH343.

Amendment #0012 reduced \$99,619.00 from the current fiscal year FY14-15.

Amendment #0013 restated the contract to update Standard Contract and Attachments.

1. The purpose of Amendment #0014 is to update language to include CSU database requirements, remove Most Favored Party Status requirement, and add EOG/OPB reporting requirements.

2. Page 9, Legacy Standard Contract, Signature Block, second sentence, is hereby amended to read:

IN WITNESS THEREOF, the parties hereto have caused this <u>66</u> page Contract to be executed by their undersigned officials as duly authorized.

- 3. Page 20, Attachment I, Section B.1.a.(5) Function 5. Data Collection, Reporting and Analysis, is hereby amended to add:
 - (o) No later than August 1, 2015, the Managing Entity shall require public receiving facilities within its Network Service Providers, pursuant to s.394.9082(10), F.S., to collect and submit the crisis stabilization service utilization data specified therein on a daily basis using a file transfer protocol process or a web portal developed by the Managing Entity.
- 4. Page 35, Attachment I, Special Provisions, is hereby amended to add:
 - 10. Most Favored Party Status

This Contract is exempt from the requirements of Legacy Standard Contract, Section 33.k.

- 5. Pages 54-56, Exhibit F, Region-Specific-Provisions, are hereby deleted in their entirety and Pages 54-57, Revised Exhibit F, Region-Specific-Provisions, are inserted in lieu thereof, and attached hereto.
- **6.** Page 57, Attachment II, Certification Regarding Lobbying, is hereby renumbered Page 58.
- 7. Pages 58-60, Attachment III, Finance and Compliance Audit Attachment, are hereby renumbered Pages 59-61.
- 8. Pages 61-65, Attachment IV, Provider's Access To and Use of Protected Health Information, are hereby renumbered Pages 62-66.

This amendment shall begin on <u>July 23, 2015</u> or the date on which the amendment as been signed by both parties, whichever is later.

All provisions in the contract and any attachments thereto in conflict with this amendment shall be and are hereby changed to conform with this amendment.

All provisions not in conflict with this amendment are still in effect and are to be performed at the level specified in the contract.

This amendment and all its attachments are hereby made a part of the contract.

FEDERAL ID #: 453675836

IN WITNESS THEREOF, the parties hereto have caused this $\underline{7}$ page amendment to be executed by their officials thereunto duly authorized.

PROVIDER: BROWARD BEHAVIORAL HEALTH COALITION, INC.	FLORIDA DEPARTMENT OF CHILDREN AND FAMILIES
SIGNED Jois Wyler	SIGNED AME
NAME: Lois Wexler	NAME: Dennis Miles
TITLE: Chairperson of the Board	TITLE: Regional Managing Director
DATE: $\frac{8/25/2015}{}$	DATE: 8-28-5

Region-Specific Provisions

- A. Pursuant to the terms of Attachment I, Section B.3.b., the Managing Entity shall subcontract for the legislatively appropriated program-specific funds listed in Table A with each specified Network Service Provider. Each subcontract shall require the Network Service Provider to use these funds only for the legislatively specified service and to report the unique numbers of persons served or services provided with these funds as distinct reporting elements within the subcontract report requirements.
- **B.** The Managing Entity shall provide the Department with a copy of the executed subcontract document for each program-specific fund no later than 30 days after this exhibit is incorporated into the Managing Entity's contract. The subcontract document shall include:
 - 1. A description of the service purchased with the specific appropriation;
 - 2. The payment methodology and rate applied to the service;
 - 3. Output and outcome performance measures applied to the service; and
 - 4. The reporting requirements implemented to ensure regular and ad hoc status updates to the Department.
- C. At a minimum, the managing entity shall ensure each Network Service Provider:
 - 1. Reports the following performance metrics in the format specified by the Department:
 - a. Number of clients served.
 - b. Number of adults served.
 - c. Number of children served,
 - d. Number of clients admitted in a residential treatment center,
 - e. Type of services provided to the clients, and
 - f. Number of clients discharged; and
 - 2. Beginning with Fiscal Year 2015-16, provide reports directly to the Executive Office of the Governor Office of Policy and Budget (EOG/OPB) documenting the return on investment for any specific appropriation identified with the acronym "EOG/OPB" in Table A.
 - a. An initial report identifying the positive return the state will receive by providing the funding shall be submitted to EOG/OPB July 31, 2015.
 - b. The initial report shall include actual returns by fiscal year if the provider previously received state funding, and projected positive returns based on the Fiscal Year 2015-16 funding.
 - c. Quarterly update reports shall be submitted to EOG/OPB within 30 days after the end of each fiscal year quarter thereafter.
 - d. All reports shall be submitted to MaryBeth.Vickers@laspbs.state.fl.us and a copy submitted to the Managing Entity subcontract file.

Table A – Program-Specific Fund Summary			
Year	Specific Appropriation	Provider	Amount
FY14-15	372	Pregnant and Post-Partum Women Funding Allocated to the following providers:	\$1,043,188.00
		 Broward Addiction and Recovery Center (BARC) House of Hope Susan B. Anthony Center, Inc. The Starting Place, Inc. 	
FY15-16 through FY17-18	PPG Solicitation LHZ03	Hanley Center Foundation, Inc.	\$147,256.00
FY15-16	377J	Pregnant Women, Mothers, and Affected Families Funding Allocated to the following providers: 1. Broward Addiction and Recovery Center (BARC) 2. House of Hope 3. Susan B. Anthony Center, Inc. 4. Banyan Community Health Center, Inc.	\$1,043,188.00 Amounts for providers will be specified in a report submitted with the Final Fiscal Year Invoice
		Family Intensive Treatment (FIT) funding, allocated in accordance with Section F.2. of this Exhibit. EOG/OPB	\$600,000.00

D. Fiscal Year 2014-15 Appropriations

Pursuant to the FY14-15 General Appropriations Act, Ch. 2014-51, Laws of Fla., the Managing Entity shall implement the following:

1. Specific Appropriation 372 - Pregnant and Post-Partum Women Funding

From the funds in Specific Appropriation 372, the recurring sum of \$1,043,188.00 from the General Revenue fund is provided for the expansion of substance abuse services for pregnant women and their affected families. These services shall include the expansion of residential treatment, outpatient treatment with housing support, outreach, detoxification, child care and post-partum case management supporting both the mother and child consistent with recommendations from the Statewide Task Force on Prescription Drug Abuse and Newborns. Priority for services shall be given to counties with greatest need and available treatment capacity.

E. Prevention Partnership Grants

Pursuant to the Notice of Award for the PPG procurement RFA #LHZ03, the Managing Entity shall execute 3 year subcontracts with Network Service Providers for the annual amounts detailed in Table A for the implementation of the PPG program.

1. The Managing Entity shall negotiate PPG services within the scope of work detailed in the Network Service Provider's application.

- 2. The Subcontract shall incorporate the specifications and elements detailed in the RFA, including but not limited to objectives, measures, and reporting.
- 3. The Subcontract shall incorporate funding as detailed in the Table A for reasonable, allowable, and necessary expenditures required to perform PPG services.
- 4. The Subcontract shall require the Network Service Provider to enter all prevention data into the Department's Performance Based Prevention System (PBPS).

F. Fiscal Year 2015-16 Appropriations

Pursuant to the FY15-16 General Appropriations Act, Ch. 2015, Laws of Fla., the Managing Entity shall implement the following:

1. Specific Appropriation 377J – Pregnant Women, Mothers, and Affected Families Funding

From the funds in Specific Appropriation 377J, the recurring sum of \$1,043,188.00 from the General Revenue fund is provided for the expansion of substance abuse services for pregnant women and their affected families. These services shall include the expansion of residential treatment, outpatient treatment with housing support, outreach, detoxification, child care and post-partum case management supporting both the mother and child consistent with recommendations from the Statewide Task Force on Prescription Drug Abuse and Newborns. Priority for services shall be given to counties with greatest need and available treatment capacity.

The Managing Entity shall subcontract with the Network Service Providers for this funding as listed in Table A. With the submission of the Final Fiscal Year Invoice, the Managing Entity will submit a report that details for each provider the sub contractual amount, actual amount paid, and total units purchased. This report shall also contain the total of any anticipated carry forward funds of Specific Appropriation 377J — Pregnant and Post-Partum Women Funding. These anticipated carry forward funds will also be included on Incorporated Document 27: Managing Entity Carry Forward Expenditure Report.

2. Specific Appropriation 377J – Family Intensive Treatment Funding

From the funds in Specific Appropriation 377J, \$600,000.00 from the General Revenue Fund is provided to expand the Family Intensive Treatment (FIT) team model to Broward County, through a competitive bid process that targets specific communities based on indicated child welfare need.

- a. The Family Intensive Treatment (FIT) team model is designed to provide intensive team-based, family-focused, comprehensive services to families in the child welfare system with parental substance abuse. Treatment shall be available and provided in accordance with the indicated level of care required and providers shall meet program specifications. Funds shall be targeted to select communities with high rates of child abuse cases.
- b. Notwithstanding the subcontract submission deadline in Exhibit F, Section B; the Managing Entity shall initiate a competitive bid process to deliver the FIT model by Augusts 31, 2015. The Managing Entity shall submit a copy of the executed subcontract document resulting from the competitive bid process within 5 business days after execution of the subcontract.
- c. The Managing Entity shall subcontract with Network Service Providers on or before October 15, 2015, to provide FIT model services for the full amount of funding specified in Table A and shall not reduce payment to these providers for any operational costs, including behavioral health fees, of the Managing Entity associated with the

administration of the subcontracts.

e. To ensure the implementation and administration of the FIT team model complies with the Department's programmatic standards, the Managing Entity shall require Network Service Providers providing FIT model services adhere to the staffing, service delivery and reporting requirements of Incorporated Document 32: FIT Model Guidelines and Requirements, which is hereby incorporated by reference.

G. Provision: Southeast Region Specific Performance Metrics

The Managing Entity will assist in developing performance metrics as determined by the Department's Regional Leadership to support Southeast Region Priorities. These metrics / outcomes will be reported by the ME to the Department's Regional Staff as requested.

H. Provision: Collaboration with Southeast Region Assignments

The Managing Entity will work in collaboration with the Southeast Region SAMH staff in completing, according to given deadlines, any assignments given to the Southeast Region which involve the ME and/or its subcontractors and for which the ME would have or have access to the needed information.

I. Provision: Communications

1. Reports

- a. The Managing Entity will submit all required reports (including Monthly Performance Report) directly (via email or postal service) to the Contract Manager.
- **b.** All communications from the Managing Entity to the Department must include the Contract Manager and the Regional SAMH Director.
- c. All Public Meetings as well as Board/Board Committee Meetings must be noticed directly to the Contract Manager and the Regional SAMH Director.

2. Partnership Meetings

The Managing Entity and the Southeast Region SAMH Office will meet at a minimum of every two months regarding programmatic issues and updates in the SAMH System of Care for the Region.

3. Client, Stakeholder and/or Provider Issues, Incidents, Complaints

When a client, stakeholder and /or Provider issue rises to the level where further investigation / intervention appears warranted, the Managing Entity will:

- a. Share currently available information about the issue with the SER SAMH designated staff;
- b. Coordinate with the SER staff how the ME will proceed;
- c. Review findings of the process and outcome(s) with the SER SAMH staff.