

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 #0017, effective 6/30/16, restated and renewed contract JH343 through June 30, 2019.

Amendment #0018, effective 6/13/16, reduced \$23,459.00 from Fiscal Year 15-16 Schedule of Funds.

Amendment #0019, effective 6/27/16, added \$59,047.00 to Fiscal Year 15-16 Schedule of Funds.

Amendment #0020, effective 10/1/16, added \$199,611.00 to Fiscal Year 16-17 Schedule of Funds.

Amendment #0021, effective 12/14/16, added \$2,484,208.00 to Fiscal Year 16-17 Schedule of Funds.

Amendment #0022, effective 1/18/17, updated Exhibit B and added OCA's to track for-profit sub-recipient expenditures to Fiscal Year 16-17 Schedule of Funds.

Amendment #0023, effective 3/15/17, reduced \$33,110.00 from Fiscal Year 16-17 Schedule of Funds.

Amendment #0024, effective 5/19/17, added \$121,212.00 to Fiscal Year 16-17 Schedule of Funds.

Amendment #0025 updated Exhibits to Fiscal Year 17-18 version.

Amendment #0026 updated Exhibit F and Exhibit F2, Section F2-2, Table 8.

Amendment #0027, effective 7/26/17, added \$388,793.00 to Fiscal Year 17-18.

Amendment #0028, effective 8/10/17, added \$2,800,321.00 to Fiscal Year 17-18 Schedule of Funds.

Amendment #0029, effective 10/31/2017, added \$300,421.00 to Fiscal Year 17-18 Schedule of Funds.

The purpose of Amendment #0030 is to incorporate the Schedule of Funds (SOF) as of 10/25/2017. This SOF adds funds for Community Action Team (CAT) in OCA MHCAT, adds funds for Family Intensive Treatment (FIT) in OCA MS091, adds funds for Care Coordination in OCA MH0CN (Mental Health) and OCA MS0CN (Substance Abuse.)

- 1. Page 1, CF Standard Integrated Contract 2016, Section 1.1., Purpose and Contract Amount, is hereby amended to read:**

Section 1.1. Purpose and Contract Amount

The Department is engaging the Provider for the purpose of serving as a Regional Managing Entity, pursuant to s.394.9082, F.S., to manage the day-to-day operational delivery of behavioral health services through an organized system of care, pursuant to state and federal law, within the annual appropriation, as further described in Section 2, payable as provided in Section 3, in an amount not to exceed \$337,380,351.07.

- 2. Pages 56-61. CF Standard Integrated Contract 2016, REVISED EXHIBIT C2 – REGION SPECIFIC APPROPRIATIONS, dated 10/19/2017, are hereby deleted in their entirety and**

Pages 56-61, CF Standard Integrated Contract 2016, REVISED EXHIBIT C2 – REGION SPECIFIC APPROPRIATIONS, dated 11/10/2017, are hereby inserted and attached hereto.

- 3. Pages 67-70, CF Standard Integrated Contract 2016, REVISED EXHIBIT E – MINIMUM PERFORMANCE MEASURES, dated 10/19/2017, are hereby deleted in their entirety and Pages 67-70, CF Standard Integrated Contract 2016, REVISED EXHIBIT E – MINIMUM PERFORMANCE MEASURES, dated 11/10/2017, are hereby inserted and attached hereto.**
- 4. Pages 71-74, CF Standard Integrated Contract 2016, REVISED EXHIBIT F – METHOD OF PAYMENT, dated 10/19/2017, are hereby deleted in their entirety and Pages 71-74, CF Standard Integrated Contract 2016, REVISED EXHIBIT F – METHOD OF PAYMENT, dated 11/10/2017, are hereby inserted and attached hereto.**
- 5. Page 75, CF Standard Integrated Contract 2016, REVISED EXHIBIT F1 – ME SCHEDULE OF FUNDS, dated 10/11/2017, is hereby deleted in its entirety and Page 75, CF Standard Integrated Contract 2016, REVISED EXHIBIT F1 – ME SCHEDULE OF FUNDS, dated 10/25/2017, is hereby inserted and attached hereto.**
- 6. Page 76, CF Standard Integrated Contract 2016, REVISED EXHIBIT F2 – SCHEDULE OF PAYMENTS, SECTION F2-1, TABLE 7, dated 10/19/2017, is hereby deleted in its entirety and Page 76, CF Standard Integrated Contract 2016, REVISED EXHIBIT F2 – SCHEDULE OF PAYMENTS, SECTION F2-1, TABLE 7, dated 11/10/2017, is hereby inserted and attached hereto.**

<<< The remainder of this page is intentionally left blank. >>>

This amendment shall begin on November 11, 2017 or the date on which the amendment has 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. IN WITNESS THEREOF, the parties hereto have caused this nineteen (19) page amendment to be executed by their officials thereunto duly authorized.

PROVIDER: BROWARD BEHAVIORAL HEALTH COALITION, INC.

DEPARTMENT: FLORIDA DEPARTMENT OF CHILDREN AND FAMILIES

SIGNED BY: 

SIGNED BY: 

NAME: Lois Wexler

NAME: Vern Melvin

TITLE: Chairperson of the Board

TITLE: Regional Managing Director

DATE: 11/16/2017

DATE: 11-17-17

Federal ID Number: 453675836

REVISED EXHIBIT C2 – REGION-SPECIFIC APPROPRIATIONS

C2-1 Pursuant to the terms of Section C-2.2.2.1, the Managing Entity shall subcontract for the legislatively appropriated program-specific funds listed in Table 1 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.

C2-2 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:

C2-2.1 A description of the service purchased with the specific appropriation;

C2-2.2 The payment methodology and rate applied to the service;

C2-2.3 Output and outcome performance measures applied to the service; and

C2-2.4 The reporting requirements implemented to ensure regular and ad hoc status updates to the Department.

C2-3 At a minimum, the managing entity shall ensure each Network Service Provider:

C2-3.1 Reports the following performance metrics in the format specified by the Department:

C2-3.1.1 Number of clients served,

C2-3.1.2 Number of adults served,

C2-3.1.3 Number of children served,

C2-3.1.4 Number of clients admitted in a residential treatment center,

C2-3.1.5 Type of services provided to the clients, and

C2-3.1.6 Number of clients discharged.

C2-3.2 For any specific appropriation identified with the acronym "EOG/OPB" in Table 1:

C2-3.2.1 Provides an initial projected estimate of positive return on investment the state may receive by providing the funding on or before July 15, each Fiscal Year. The Managing Entity shall provide a copy of each providers projected estimate to the Department no later than July 20, each Fiscal Year; and

C2-3.2.2 Provides a report 15 days after the completion of each fiscal quarter documenting the actual return on investment achieved and describing the methodology by which the return on investment amount was determined. The Managing Entity shall provide a copy of each providers report on return on investment to the Department no later than 20 days after the completion of each fiscal quarter.

Table 1 – Program-Specific Fund Summary											
Year	Specific Appropriation	Provider	Amount								
FY14-15	372	Pregnant and Post-Partum Women Funding Allocated to the following providers and amounts 1. Broward Addiction and Recovery Center (BARC) 2. House of Hope 3. Susan B. Anthony Center, Inc. 4. The Starling Place, Inc.	\$1,043,188.00								
FY15-16 through FY17-18	PPG Solicitation LHZ03	Hanley Center Foundation, Inc.	\$147,266.00								
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								
		Family Intensive Treatment (FIT) funding, allocated to the following amounts for services in the designated locations. The Managing Entity shall designate a service provider for each location in accordance with Section C2-6.2. EOG/OPB	\$800,000.00								
FY16-17	383	Community Forensic Multidisciplinary Team (FMDT) Henderson Behavioral Health, Inc.	\$652,000.00								
	385	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.	\$1,043,188.00								
		Family Intensive Treatment (FIT) funding EOG/OPB	\$800,000.00								
FY16-17 through FY21-22	CRS Solicitation RFA07H16GS2	Henderson Behavioral Health, Inc. Effective 1/1/17 through 12/31/22	<table border="0"> <tr> <td>FY16-17</td> <td>\$2,088,415.00</td> </tr> <tr> <td>FY17-18</td> <td>\$2,606,185.00</td> </tr> <tr> <td>FY18-19 – FY20-21</td> <td>\$2,218,020.00</td> </tr> <tr> <td>FY21-22</td> <td>\$2,272,642.00</td> </tr> </table>	FY16-17	\$2,088,415.00	FY17-18	\$2,606,185.00	FY18-19 – FY20-21	\$2,218,020.00	FY21-22	\$2,272,642.00
FY16-17	\$2,088,415.00										
FY17-18	\$2,606,185.00										
FY18-19 – FY20-21	\$2,218,020.00										
FY21-22	\$2,272,642.00										

Year	Specific Appropriation	Provider	Amount
FY17-18	364	Recurring Henderson Behavioral Health, Inc.– Forensic Transitional Beds	\$1,163,520.00
	368	Pregnant Women, Mothers, and Affected Families Funding, Allocated to the following providers	\$1,043,188.00
		1. Broward Addiction and Recovery Center (BARC) 2. Banyan Community Health Center, Inc. 3. Susan B. Anthon, Center, Inc.	
		Family Intensive Treatment (FIT) funding	\$800,000.00
	389	Memorial Regional Hospital	\$500,000.00
	DR 4337 Hurricane Irma	Hurricane Irma Disaster Behavioral Health Response FEMA CCP Immediate Response Program	\$161,671.40
	381A	Family Intensive Treatment (FIT) funding	\$200,000.00
Community Action Treatment (CAT) Team		\$750,000.00	

C2-4 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:

C2-4.1 Specific Appropriation 372 – Pregnant and Post-Partum Women Funding

From Specific Appropriation 372, recurring General Revenue 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.

C2-5 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 1 for the implementation of the PPG program.

C2-5.1 The Managing Entity shall negotiate PPG services within the scope of work detailed in the Network Service Provider's application.

C2-5.2 The Subcontract shall incorporate the specifications and elements detailed in the RFA, including but not limited to objectives, measures, and reporting.

C2-5.3 The Subcontract shall incorporate funding as detailed in Table 1 for reasonable, allowable, and necessary expenditures required to perform PPG services.

C2-5.4 The Subcontract shall require the Network Service Provider to enter all prevention data into the Department's Performance Based Prevention System (PBPS).

C2-6 Fiscal Year 2015-16 Appropriations

Pursuant to the FY15-16 General Appropriations Act, Ch. 2015-232, Laws of Fla., the Managing Entity shall implement the following:

C2-6.1 Specific Appropriation 377J – Pregnant Women, Mothers, and Affected Families Funding

C2-6.1.1 From the funds in Specific Appropriation 377J, recurring General Revenue 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.

C2-6.1.2 The Managing Entity shall subcontract with the Network Service Providers for this funding as listed in Table 1. These subcontracts shall be executed and managed in accordance with Guidance 28 – Women's Special Funding. 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 Template 13 – Managing Entity Carry Forward Expenditure Report.

C2-6.2 Specific Appropriation 377J – Family Intensive Treatment Funding

C2-6.2.1 From the funds in Specific Appropriation 377J, General Revenue 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.

C2-6.2.2 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.

C2-6.2.3 The Managing Entity shall initiate a competitive bid process to deliver the FIT model by July 31, 2015.

C2-6.2.4 The Managing Entity shall subcontract with Network Service Providers on or before October 1, 2015, to provide FIT model services for the full amount of funding specified in Table 1 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.

C2-7 Fiscal Year 2016-17 Appropriations

Pursuant to the FY16-17 General Appropriations Act, Ch. 2016-86, Laws of Fla., the Managing Entity shall implement the following:

C2-7.1 Specific Appropriation 383 – Forensic Multidisciplinary Team (FMDT)

From the funds in Specific Appropriation 383, recurring General Revenue Fund is provided for the creation of a pilot community Forensic Multidisciplinary Team designed to divert individuals from secure forensic commitment by providing community-based services. To implement this pilot proviso project, the Managing Entity shall subcontract with a qualified Network Service Provider in the location specified in Table 1 to provide services according to the provisions of Guidance 28 – Forensic Multidisciplinary Team.

C2-7.2 Specific Appropriation 385 – Women's Special Funding

From the funds in Specific Appropriation 385, General Revenue for the expansion of substance abuse services for pregnant women, mothers, and their affected families. These subcontracts shall be executed

and managed in accordance with **Guidance 26 – Women's Special Funding**. 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 the greatest need and available treatment capacity.

C2-7.3 Specific Appropriation 385 – Family Intensive Treatment Funding

From the funds in Specific Appropriation 385, General Revenue to Implement the Family Intensive Treatment (FIT) team model that is designed to provide intensive team-based, family-focused, comprehensive services to families in the child welfare system with parental substance abuse. These subcontracts shall be executed and managed in accordance with **Guidance 18 – Family Intensive Treatment (FIT) Model Guidelines and Requirements**. 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.

C2-8 Fiscal Year 2016-17 through FY 21-22 Appropriations; Specific Appropriation 386K – Centralized Receiving Systems (CRS) Solicitation: RFA07H16GS2

C2-8.1 Pursuant to the Notice of Award for the CRS solicitation under RFA # RFA07H16GS2 and Specific Appropriation 386K of the FY16-17 General Appropriations Act, the Managing Entity shall execute a 5 year subcontract with Henderson Behavioral Health, Inc. for the annual amounts detailed in Table 1.

C2-8.2 The Managing Entity shall implement the CRS projects in accordance with the terms of **Guidance 27 – Centralized Receiving System (CRS) Grant**.

C2-9 Fiscal Year 2017-18 Appropriations

Pursuant to the FY17-18 General Appropriations Act, Ch. 2017-70, Laws of Fla., the Managing Entity shall implement the following:

C2-9.1 Specific Appropriation 364 – Recurring – Henderson Behavioral Health Transitional Beds

C2-9.2 From the funds in Specific Appropriation 364, the following recurring base appropriations projects shall be funded with general revenue funds:

Henderson Behavioral Health - Forensic treatment services 1,163,520 (FY17-18 partial year allocation)

C2-9.3 This project is a continuation of Contract LH287 as assigned to the Managing Entity, effective 9/1/17.

C2-9.4 This project implements the following appropriation from the FY16-17 General Appropriations Act and, subject to continual appropriation, will be funded at \$1,401,600 for future fiscal years.

... the General Revenue Fund is provided for an expansion of forensic mental health transitional beds to divert individuals sentenced under chapter 916, Florida Statutes, from the county jail system and to move eligible individuals currently in forensic state mental health institutions to community settings as an alternative to more costly institutional placement.

C2-9.5 Specific Appropriation 366 Projects

C2-9.5.1 Women's Special Funding

From the funds in Specific Appropriation 366, General Revenue for the expansion of substance abuse services for pregnant women, mothers, and their affected families. These subcontracts

shall be executed and managed in accordance with **Guidance 28 – Women's Special Funding**. 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 the greatest need and available treatment capacity.

C2-9.5.2 Family Intensive Treatment Funding

From the funds in Specific Appropriation 361A and 366, General Revenue to implement the Family Intensive Treatment (FIT) team model that is designed to provide intensive team-based, family-focused, comprehensive services to families in the child welfare system with parental substance abuse. These subcontracts shall be executed and managed in accordance with **Guidance 18 – Family Intensive Treatment (FIT) Model Guidelines and Requirements**. 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.

C2-9.6 Specific Appropriation 369 Project – Memorial General Hospital

From the funds in Specific Appropriation 369, the nonrecurring sum of \$500,000 from the Welfare Transition Trust Fund is provided for the Maternal Addiction Treatment Program at Memorial Regional Hospital in Broward County (HB 3677).

C2-9.7 FEMA DR 4337 FL - Hurricane Irma Disaster Behavioral Health Response

In response to the impact of Hurricane Irma, the Managing Entity shall implement the FEMA Crisis Counseling Program (CCP) Immediate Services Program (ISP), as defined in Guidance 23, under the project name "Project H.O.P.E. (Helping Our People In Emergencies)." The Managing Entity shall subcontract for these services as specified in Section C-1.7.2 and shall comply with the provisions regarding supplemental method of payment in Section F-6.

C2-9.7.1 Immediate Services Program

C2-9.7.1.1 The Managing Entity shall implement the program in Broward County.

C2-9.7.1.2 The Managing Entity shall implement the program in compliance with the terms of the DR 4337 FL Notice of Award and with the plan of services and budget narratives contained in Department's ISP Application, which are hereby incorporated by reference. Copies of the Notice of Award and the ISP Application are maintained in the contract file.

C2-9.8 Community Action Treatment (CAT) Team

From the funds in Specific Appropriation 361A, General Revenue to implement the Community Action Treatment (CAT) Team a multidisciplinary treatment team that provides services to children and young adults with a history of mental illness, multiple treatment failures, and who are at risk of out of home placement or return to out of home placement. The Managing Entity will conduct activities in accordance with the Department's CAT Program Guidance, dated September 22, 2017, hereby incorporated by reference.

REVISED EXHIBIT E – MINIMUM PERFORMANCE MEASURES

E-1 To demonstrate delivery of the Service Tasks detailed in Section C-1, the Managing Entity shall meet the annual performance measures in Table 3.

Table 3 – Managing Entity Performance Measures

<u>Measure Description</u>	<u>Consequence</u>
<p>Systemic Monitoring: The Managing Entity shall complete on-site monitoring, in accordance with Section C-1.4 of no less than twenty percent of all Network Service Providers each fiscal year. Completion of monitoring includes the release of a final monitoring report to the Network Service Provider. Progress towards attainment of this measure shall be demonstrated by the achievement of the following quarterly milestones. Each fiscal year, the Managing Entity shall monitor a minimum of:</p> <p>E-1.1 7% of its Network Service Providers by December 31;</p> <p>E-1.2 15% of its Network Service Providers by March 31; and</p> <p>E-1.3 20% of its Network Service Providers by June 30.</p>	<p>Failure to meet the standard shall be considered nonperformance pursuant to Section E-6.</p>
<p>Network Service Provider Compliance: A minimum of 95% of the Managing Entity's Network Service Providers shall demonstrate compliance with the following measure annually. Progress towards attainment of this measure shall be demonstrated by the monthly submission of Template 11 – Managing Entity Monthly Progress Report.</p> <p>E-1.4 A minimum 85% of the applicable Network Service Provider Measures established in Table 4 at the target levels for the Network Service Provider established in the subcontract.</p>	<p>Failure to meet the standard shall be considered nonperformance pursuant to Section E-5.</p>
<p>Block Grant Implementation: The Managing Entity shall ensure 100% of the cumulative annual Network Service Provider expenses comply with the Block Grants and maintenance of effort allocation standards established in Section B1-2.3. Progress towards attainment of this measure shall be demonstrated by the achievement of quarterly milestones for each fiscal year. Of the annual amount for each specified fund source appropriated to the Managing Entity, the following minimum percentages of each fund's amount shall be documented as expended in compliance with the applicable allocation standard:</p> <p>E-1.5 A minimum of 50% expended by December 31;</p> <p>E-1.6 A minimum of 100% by June 30.</p>	<p>Failure to meet the standard shall be considered nonperformance pursuant to Section E-5 and shall require payback of deficiency by the Managing Entity.</p>
<p>Implementation of General Appropriations Act: The Managing Entity shall meet 100% of the following requirements, by September 30:</p> <p>E-1.7 Implementation of Specific Appropriations, demonstrated by contracts with Network Service Providers; and</p> <p>E-1.8 Submission of all plans, pursuant to Exhibit C3.</p>	<p>Failure to meet the standard shall be considered nonperformance pursuant to Section E-5.</p>

E-2 To comply with the subcontract content requirements of Section C-2.2, the Managing Entity shall incorporate the Network Service Provider Measures in Table 4 into each Network Service Provider subcontract, as appropriate to the services and target populations in each subcontract. The Managing Entity is not required to apply the Network Targets to each individual subcontract. Rather, the Managing Entity shall establish specific targets for each measure in each subcontract, sufficient to ensure the Network cumulatively reaches the specified Network Targets.

Table 4 – Network Service Provider Measures

Target Population and Measure Description		Network Target
Adult Community Mental Health		
MH003	Average annual days worked for pay for adults with severe and persistent mental illness	40
MH703	Percent of adults with serious mental illness who are competitively employed	24%
MH742	Percent of adults with severe and persistent mental illnesses who live in stable housing environment	80%
MH743	Percent of adults in forensic involvement who live in stable housing environment	87%
MH744	Percent of adults in mental health crisis who live in stable housing environment	88%
Adult Substance Abuse		
SA753	Percentage change in clients who are employed from admission to discharge	10%
SA754	Percent change in the number of adults arrested 30 days prior to admission versus 30 days prior to discharge	15%
SA755	Percent of adults who successfully complete substance abuse treatment services	51%
SA756	Percent of adults with substance abuse who live in a stable housing environment at the time of discharge	94%
Children's Mental Health		
MH012	Percent of school days seriously emotionally disturbed (SED) children attended	68%
MH377	Percent of children with emotional disturbances (ED) who improve their level of functioning	84%
MH378	Percent of children with serious emotional disturbances (SED) who improve their level of functioning	85%
MH778	Percent of children with emotional disturbance (ED) who live in a stable housing environment	95%
MH779	Percent of children with serious emotional disturbance (SED) who live in a stable housing environment	93%
MH780	Percent of children at risk of emotional disturbance (ED) who live in a stable housing environment	98%
Children's Substance Abuse		
SA725	Percent of children who successfully complete substance abuse treatment services	48%
SA751	Percent change in the number of children arrested 30 days prior to admission versus 30 days prior to discharge	20%
SA752	Percent of children with substance abuse who live in a stable housing environment at the time of discharge	93%

E-3 To demonstrate delivery of the Service Tasks detailed in Section C-1, and the subcontract content requirements of Section C-2.3, the Managing Entity shall ensure the Network cumulatively reaches the annual output measures in Table 5.

Table 5 – Network Service Provider Output Measures Persons Served for Fiscal Year 17-18		
Program	Service Category	FY Target
Adult Mental Health	Residential Care	383
	Outpatient Care	8,428
	Crisis Care	4,474
	State Hospital Discharges	72
	Peer Support Services	41
Children's Mental Health	Residential Care	5
	Outpatient Care	1,200
	Crisis Care	117
	SIPP Discharge	5
Adult Substance Abuse	Residential Care	600
	Outpatient Care	7,003
	Detoxification	718
	Women's Specific Services	944
	Injecting Drug Users	615
	Peer Support Services	300
Children's Substance Abuse	Residential Care	5
	Outpatient Care	2,219
	Detoxification	1
	Prevention	514,582

E-4 If the Managing Entity fails to perform in accordance with this Contract, or fails to perform the minimum level of service required by this Contract, the Department will apply financial consequences provided for in Section E-5. The parties agree that the financial consequences provided for under Section E-5 constitute financial consequences under ss. 287.058(1)(h); and 215.971(1)(c), F.S. The foregoing does not limit additional financial consequences, which may include but are not limited to refusing payment, withholding payment until deficiency is cured, tendering partial payments, applying payment adjustments for additional financial consequences to the extent that this Contract so provides, or termination pursuant to the terms of Section 6.2, and requisition of services from an alternate source. Any payment made in reliance on the Managing Entity's evidence of performance, which evidence is subsequently determined to be erroneous, will be immediately due as an overpayment in accordance with Section 3.4, to the extent of such error.

E-5 Corrective Action for Performance Deficiencies

E-5.1 By execution of this Contract, the Managing Entity hereby acknowledges and agrees that its performance under the Contract must meet the standards set forth above and will be bound by the conditions set forth in this Contract. If performance deficiencies are not resolved to the satisfaction of the Department within the prescribed time, and if no extenuating circumstances can be documented by the Managing Entity to the Department's satisfaction, the Department may terminate the contract. The Department has the exclusive authority to determine whether there are extenuating or mitigating circumstances.

E-5.2 In accordance with the provisions of s. 402.73(1), F.S., and Rule 65-29.001, F.A.C., corrective action may be required for noncompliance, nonperformance, or unacceptable performance under this Contract. Financial consequences may be imposed for failure to implement or to make acceptable progress on such corrective action.

<<< The remainder of this page is intentionally left blank. >>>

REVISED EXHIBIT F – METHOD OF PAYMENT**F-1 Funding**

F-1.1 This advance fixed price, fixed payment Contract is comprised of federal and state funds, subject to reconciliation. Exhibit F1 identifies the type and amount of funding provided. At the beginning of each fiscal year, the Exhibit F1 will be amended into this Contract, and the total Contract amount in Table 6 will be adjusted accordingly.

F-1.2 The contract total dollar amount shall not exceed the amount specified in Section 1.1, subject to the availability of funds, as specified in Table 6.

State Fiscal Year	Managing Entity Operational Cost	Direct Services Cost	Supplemental DBH Funds	Total Value of Contract
2012-2013	\$ 1,842,303.68	\$ 28,436,518.39		\$ 30,078,822.07
2013-2014	\$ 2,285,924.00	\$ 43,857,573.00		\$ 46,143,497.00
2014-2015	\$ 2,304,258.26	\$ 44,246,413.74		\$ 46,550,672.00
2015-2016	\$ 2,298,027.15	\$ 48,789,242.85		\$ 51,087,270.00
2016-2017	\$ 2,657,237.00	\$ 51,122,907.00		\$ 53,780,144.00
2017-2018	\$ 2,631,846.00	\$ 54,207,355.00	\$ 161,871.00	\$ 57,000,672.00
2018-2019	\$ 2,442,755.00	\$ 50,316,519.00		\$ 52,759,274.00
Total	\$ 16,282,151.09	\$ 320,956,528.98	\$ 161,871.00	\$ 337,380,351.07

F-2 Payment

F-2.1 The Department will pay the Managing Entity an operational cost for the management of the Network in accordance with the terms and conditions of this Contract. The direct service cost is defined as the annual value of the Contract less the total value of both the Managing Entity operational cost and the Supplemental DBH Funds.

F-2.2 In accordance with s. 394.9082, F.S., the Department will pay the Managing Entity a two-month advance at the beginning of each fiscal year. Thereafter, the Managing Entity shall request monthly fixed payments equal to the fiscal year contract balance divided by the number of months remaining in the fiscal year. The advance and payment amounts for each fiscal year are specified in Exhibit F2. The payment request may be subject to financial consequences, pursuant to Section E-5.2.

F-2.3 The Managing Entity shall temporarily invest surplus advance funds in an insured interest bearing account, in accordance with s. 216.181(16)(b), F.S. The Managing Entity shall remit to the Department, on a quarterly basis, any interest earned on advance funds via check. The Managing Entity must submit documentation from the financial entity where said funds are invested, evidencing the Annual Percentage Rate and actual interest income for each month.

F-2.4 The Managing Entity shall expend any advance in accordance with the General Appropriations Act.

F-2.5 The Managing Entity shall request payment in accordance with Section F-3.

F-3 Invoice Requirements

F-3.1 In accordance with Exhibit F2, the Managing Entity shall:

F-3.1.1 Request payment monthly through the submission of a properly completed Template 10 – Managing Entity Monthly Fixed Payment Invoice;

F-3.1.2 Submit a properly completed Template 11 – Managing Entity Monthly Progress Report, for the month that payment is requested;

F-3.1.3 Submit a properly completed Template 12 – Managing Entity Monthly Expenditure Report, detailing actual costs incurred by the Managing Entity for the month that payment is requested. The SAMH Managing Entity Monthly Expenditure Report shall be certified by an authorized representative; and

F-3.1.4 Submit a properly completed Template 13 – Managing Entity Monthly Carry Forward Expenditure Report, detailing the expenditure of approved carry forward funds, until said funds are fully expended.

F-3.2 Failure to submit the properly completed required documentation shall cause payment to be delayed until such documentation is received. Submission and approval of the elements in Sections F-3.1 for the invoice period shall be considered the deliverables necessary for payment.

F-3.3 Within five business days of receipt of a properly completed invoice and Template 11 – Managing Entity Monthly Progress Report, the Contract Manager will either approve the invoice for payment or notify the Managing Entity in writing of any deficiencies that must be corrected by the Managing Entity before resubmission of the invoice.

F-3.4 The Department and the state's Chief Financial Officer reserve the right to request supporting documentation at any time, prior to the authorization of payment.

F-4 Cost Allocation Plan

F-4.1 The Managing Entity shall submit an initial Template 14 – Cost Allocation Plan within 30 days of execution and a revised Cost Allocation Plan to the Contract Manager annually by August 31, unless otherwise extended in writing by the Department.

F-4.2 The Department will review the Cost Allocation Plan and provide any comments within 15 days of submission. Revisions required by the Department shall be submitted by the date of the payment request for September. Failure to have an approved Cost Allocation Plan by September 20, unless extended in writing by the Department, will result in no further payment being made to the Managing Entity until the Department approves the Cost Allocation Plan.

F-4.3 The Managing Entity shall submit a revised Cost Allocation Plan whenever the Managing Entity:

F-4.3.1 Experiences a change in the type of funding it receives, whether under this Contract or an outside funding source; for example, when a new OCA is added, when a new outside funding source contributes to the Managing Entity's operational revenue or when an existing funding source is discontinued;

F-4.3.2 Makes internal organizational changes that affect the cost allocation methodology; or

F-4.3.3 Makes any changes in the allocation of costs relative to funds provided under this Contract and other outside sources.

F-4.4 The Managing Entity may request to amend or revise their Cost Allocation Plan at any time during the state fiscal year, in writing to the Contract Manager. The Managing Entity shall submit the amended or revised Cost Allocation Plan within 20 days of providing written notification. The Department will review and

provide written comments within 15 days of submission. The Managing Entity must submit a revised Cost Allocation Plan addressing any revisions required by the Department, within 15 days of the date of the Department's written response.

F-5 Carry Forward Funding

F-5.1 In accordance with s. 394.9082, F.S., the Managing Entity may carry forward documented unexpended state funds from one fiscal year to the next fiscal year, unless the following fiscal year falls outside the contract period, subject to the following conditions.

F-5.1.1 Any funds carried forward shall be expended in accordance with the General Appropriations Act in effect when the funds were allocated to the Managing Entity

F-5.1.2 The cumulative amount carried forward may not exceed eight percent of the contract total. Any unexpended state funds in excess of eight percent must be returned to the Department.

F-5.1.3 The funds carried forward may not be used in any way that would create increased recurring future obligations, and such funds may not be used for any type of program or service that is not currently authorized by this contract.

F-5.1.4 Any unexpended funds that remain at the end of the contract period shall be returned to the Department.

F-5.2 Within 30 days after receiving confirmation of the approved carried forward amount from the Department, The Managing Entity shall submit a properly completed **Template 15 – Managing Entity Spending Plan for Carry Forward Report**.

F-6 Allowable Costs

F-6.1 All costs associated with performance of the services contemplated by this contract must be both reasonable and necessary and in compliance with the cost principles pursuant to 2 CFR Part 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards - Subpart E, 45 CFR Part 75 - Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards - Subpart E, The Reference Guide for State Expenditures, and Ch. 65E-14, F.A.C.

F-6.2 None of the funds provided under the following grants may be used to pay the salary of an individual at a rate in excess of Level II of the Executive Schedule: Block Grants for Community Mental Health Services, Substance Abuse Prevention and Treatment Block Grant, Projects for Assistance in Transition from Homelessness, Project Launch, Florida Youth Transition to Adulthood; and Florida Children's Mental Health System of Care Expansion Implementation Project

F-6.3 Any compensation paid for an expenditure subsequently disallowed as a result of the Managing Entity's or any Network Service Providers' non-compliance with state or federal funding regulations shall be repaid to the Department upon discovery.

F-6.4 Invoices must be dated, signed by an authorized representative of the Managing Entity and submitted in accordance with the submission schedule in this contract, with appropriate service utilization and Individuals Served data accepted into the SAMH Data System, in accordance with PAM 155-2.

F-6.5 The Managing Entity is expressly prohibited from expending funds specified as "Direct Services Costs" in Table 8, for anything other than a subcontract with a Network Service Provider.

F-7 Financial Reconciliation

F-7.1 The Managing Entity shall submit reports that reflect the Managing Entity's actual operational cost and the actual service cost of the Network in accordance with Exhibit F2. The Managing Entity shall submit a final Managing Entity Monthly Expenditure Report annually no later than August 15. Payment for the final month of the fiscal year and carry forward shall not be approved until final reconciliation has been completed by the Department.

F-7.2 The Department will reconcile actual expenditures reported to the funds disbursed to the Managing Entity based on the properly completed Managing Entity Monthly Expenditure Reports and the Managing Entity Monthly Carry Forward Expenditure Reports, according to the following schedule:

F-7.2.1 Quarterly, after September 30, December 31, March 31, and June 30 each state fiscal year during desk reviews; and

F-7.2.2 Annually, after June 30 each state fiscal year during year end reconciliation.

F-7.3 Any funds disbursed to the Managing Entity that are not expended or were determined to have been expended for unallowable costs shall be considered overpayment to the Managing Entity. The Department shall recoup such overpayments pursuant to Section 3.5. In the event an overpayment is identified after the end of a fiscal year and no further invoice is due, the Managing Entity shall remit the overpayment to the Department via check.

F-8 Supplemental Disaster Behavioral Health Provisions

Whenever the Department authorizes Disaster Behavioral Health (DBH) response services, pursuant to Section C-1.7, the following provisions shall apply, notwithstanding any provisions in this Contract to the contrary.

F-8.1 Supplemental Payments

F-8.1.1 The terms of Section F-2 notwithstanding, the Department will pay the Managing Entity each month for the amount of actual expenditures incurred by the Managing Entity or its Network Service Providers in the course of providing FEMA Crisis Counseling Program (CCP) services or other authorized DBH services.

F-8.1.2 Funds designated in Exhibit F1 for CCP or other DBH services shall be excluded from the fixed payment calculations specified in Section F2-2.

F-8.2 Supplemental Allowable Costs

F-8.2.1 The terms of Section F-6 notwithstanding, allowable costs for DBH response services is expressly limited to the extent such expenditures are allowable under the terms and conditions of any funds awarded to the Department for the purpose of responding to a specific disaster event.

F-8.2.2 In response to each event, the Notice of Award, the Department's DBH application, plan of service, and budget narratives identifying allowable costs shall be incorporated by reference into Exhibit C2.

F-8.3 Supplemental Invoices

F-8.3.1 The terms of Section F-3 notwithstanding, the Managing Entity shall request payment for DBH response services through submission of Template 24 - Disaster Behavioral Health Managing Entity Supplemental Invoice and Expenditure Report.

F-8.3.2 The Managing Entity shall submit supplemental invoices on or before the 20th of each month for services provided during the preceding month, unless the Department approves a request for an alternative invoicing schedule in writing.

F-8.4 Supplemental Financial Reconciliations

The terms of Section F-7 notwithstanding, the Managing Entity shall submit financial reports reflecting actual DBH service expenses of the Managing Entity and its Network Service Providers as scheduled by and using templates distributed by the Department's Disaster Behavioral Health Coordinator. Actual DBH expenses may not include any Managing Entity allocated, administrative, overhead or indirect expenses without express advance written authorization by the Department's Disaster Behavioral Health Coordinator.

REVISED EXHIBIT F2 - SCHEDULE OF PAYMENTS

F2-1 Table 7 specifies the schedule of payments for the current fiscal year of this Contract.

Table 7 - Schedule of Payments for Fiscal Year 2017-18						
Month of Services	FY Contract Balance Prior to Payment	Fixed Payment Amount	Invoice Packet Due Date	Progress and Expenditure Report Period	Funding Amendments	Notes
Annual Advance	\$53,780,144.00	\$8,863,357.33	7/1/17	N/A	\$388,793.00	Amendment #0027
Jul-17	\$45,205,579.67	\$3,767,131.63	8/20/17	July		
Aug-17	\$41,438,448.04	\$3,767,131.64	9/20/17	August	\$1,076,520.00	Amendment #0028
Sep-17	\$38,748,836.40	\$3,874,683.64	10/20/17	September		
Oct-17	\$36,010,902.78	\$3,890,100.30	11/20/17	October	\$138,760.00	Amendment #0029
Nov-17	\$32,576,598.48	\$4,072,074.85	12/20/17	November	\$1,455,794.00	Amendment #0030
Dec-17	\$28,504,521.91	\$4,072,074.55	1/20/18	December		
Jan-18	\$24,432,447.36	\$4,072,074.56	2/20/18	January		
Feb-18	\$20,360,372.80	\$4,072,074.56	3/20/18	February		
Mar-18	\$16,288,298.24	\$4,072,074.56	4/20/18	March		
Apr-18	\$12,216,223.68	\$4,072,074.56	5/20/18	April		
May-18	\$8,144,149.12	\$4,072,074.56	6/20/18	May		
Jun-18	\$4,072,074.56	\$4,072,074.56	6/15/18	June		
Total FY Payments		\$56,839,001.00				
Supplemental Disaster Behavioral Health Funding		\$161,671.00				
Total Contract Funding		\$57,000,672.00				