

**THIS AMENDMENT**, entered into between the Florida Department of Children and Families, hereinafter referred to as the "Department" and **South Florida Behavioral Health Network, Inc.**, hereinafter referred to as the "Provider," amends **Contract #KH225**.

**PREAMBLE:** The amendment identifies the funding allocations for Fiscal Year 2011-2012, correctly identifies the statutory reference for the Juvenile Incompetent to Proceed Program, adds new contract requirements for the provisions identified in the Department's Assisted Living Facilities with Limited Mental Health License exhibit; identifies the Appropriation Line Item(s) pursuant to CDA 11-23, adds additional Required Reports, and identifies the goals to be achieved by reducing administrative costs in order to achieve an increase in services.

As a result, the Standard Contract, Attachment I, **Exhibit A-2**, Funding Detail, **Exhibit B-2**, Line Item Operating Budget, **Exhibit D**, Substance Abuse and Mental Health Required Performance Outcomes and Outputs for Fiscal Year 2011-2012, and **Exhibit G**, Required Reports, are amended.

1. Page 6, Standard Contract, Section II, paragraph A, Contract Amount, as previously amended on page 1 of Amendment #0002, is hereby amended to read:

**A. Contract Amount**

To pay for contracted services, according to the terms and conditions of this contract, in an amount not to exceed **\$378,873,509.00**, or the rate schedule, subject to the availability of funds. The State of Florida's performance and obligation to pay under this contract is contingent upon an annual appropriation by the Legislature. Any costs or services paid for under any other contract or from any other source are not eligible for payment under this contract.

2. Page 56, Attachment I, Section B.1.a., Task List, paragraph (32) e., is hereby added to read:

e. On a monthly basis, per **Exhibit G**, Required Reports, the managing entity shall submit to the Department, a MDWP (F.A.C.E.S.) Census Report. The report shall identify the participating F.A.C.E.S. subcontractors, the number of Youth Enrolled, Number of Youth Involved with a System Partner, Number of Youth Participating In the National Evaluation, Number of Youth Discharged, and the Total Number of Youth Served.

3. Page 56, Attachment I, Section B.1.a., Task List, paragraph (34), is hereby amended to read:

**(34) Juvenile Incompetent to Proceed Program**

The managing entity will manage the Juvenile Incompetent to Proceed Program (JITP) as per section 985.19, F.S. and as per the Department of Children and Families operating procedure. In addition, the managing entity will insure that all children involved with the

JITP program are linked with the appropriate mental health services and reduce the time to access treatment services.

On a monthly basis, per **Exhibit G**, Required Reports, the managing entity shall submit to the Department, a JITP Monthly Census Report. The report shall identify the participating JITP subcontractors, the number of community children served, number of dependent children served, the number of co-occurring children served and the wait list report for children pending JITP services.

**4. Page 58, Attachment I, Section B.1.a., Task List, paragraph (37), is hereby amended to read:**

**(37) Functional Family Therapy (FFT)** is a highly structured, short-term family intervention for youths with multicultural needs and effective delinquency prevention for siblings of offenders. It has been developed for use with highly dysfunctional families at risk of serious problems, including delinquency and family violence. FFT is designed to target children between the ages of 11 and 17. The goals of FFT are to engage and motivate the youth and their families by decreasing negative interactions, and thus breaking the patterns that attribute to negative consequence for the youth and the rest of the family. Each family will develop a specific behavior change plan to reduce and eliminate problem behaviors and negative family relational patterns. For the final goal, the family will generalize changes acquired in therapy across problem situations, and learn to successfully utilize community resources.

The managing entity will create and implement a utilization management process to manage this valuable resource in the children's mental health system.

On a monthly basis, per **Exhibit G**, Required Reports, the managing entity shall submit to the Department, a FFT Monthly Census Report. The monthly census report will identify the Mayor System Referral Partners, the treatment subcontractor(s) providing the services, total youth served, total co-occurring youth served and the wait list report for youth pending FFT services.

**5. Page 58, Attachment I, Section B.1.a., Task List, paragraph (39), is hereby added to read:**

**(39) Census Report for Children's Mental Health Residential Level 1 Services for SIPP Medicaid Program**

On a bi-weekly basis, per **Exhibit G**, Required Reports, the managing entity shall submit to the Department, a Residential Services Census Report. The report shall identify Residential subcontractors, the Number of Dependent Children served, Number of Community Children Served, Number of Out of Circuit Children Served, Total Number of Children Placed, Total Number of Contracted Beds, Number of Children Pending Placement, Bed Availability (including pending placement), Number of Children Pending Discharge, Number of Children whose services are paid by the Department's Children's Mental Health funding, Number of Children whose services are paid by the Department's

Children's Substance Abuse funding.

6. Page 58, Attachment I, Section B.1.a., Task List, paragraph (40), is hereby added to read:

**(40) Children's Mental Health Incidental Expense Cost Center Report**

On a monthly basis, per **Exhibit G**, Required Reports, the managing entity shall submit to the Department, a Children's Mental Health Incidental Expense Cost Center Report. The report shall identify by participating CMH subcontractor, the total amount allocated in the incidental cost center, the Year-to-Date Paid, the contract balance per contracted amount in the Incidental. The report shall identify the amount paid by subcontractor on a monthly basis.

7. Page 58, Attachment I, Section B.1.a., Task List, paragraph (41), is hereby added to read:

**(41) Assisted Living Facilities with Limited Mental Health License**

The managing entity agrees to ensure that for those subcontractors that provide services to residents in Assisted Living Facilities with a Limited Mental Health license, that these subcontractors comply with the provisions identified in the Department's **Assisted Living Facilities with a Limited Mental Health License** exhibit, which is hereby incorporated by reference.

8. Page 58, Attachment I, Section B.1.a., Task List, paragraph (42), is hereby added to read:

**(42) Site Visits and Monitoring Surveys for Public Baker Act Receiving Facilities and Crisis Stabilization Units**

The managing entity in partnership with the Department will conduct site visits and monitoring surveys for Public Baker Act Receiving Facilities and Crisis Stabilization Units for the purpose of designation and re-designation of these facilities. The Department will assume the lead role in the performance of this function.

The managing entity shall be responsible for investigating any complaints with the Department with regard to any of these facilities.

9. Page 74, Attachment I, Section C., Method of Payment, paragraph 1.a., and (1) (a), as previously amended on page 3 of Amendment #0002, are hereby amended to read:

**1. Payment Clauses**

a. This is an advance cost reimbursement and fixed price, fixed payment contract, comprised of Federal sources and a grant of State funds. The Funding Detail is the document that identifies the amount of Federal and Grant resources. The Department will ensure that any applicable appropriated funding for direct substance abuse and mental health services is contracted with the managing entity. Any increases will be documented through a contract amendment, resulting in a current fiscal year funding and corresponding services increase. Such increases in services must be supported by additional deliverables as outlined in the amendment. At the beginning of each fiscal year, the Funding Detail will be amended into this contract, and the total contract amount will be adjusted accordingly. The Department shall pay the managing entity for the delivery of services provided in accordance with the terms of this contract for a total dollar amount not to exceed **\$378,873,509.00**, subject to the availability of funds. A summary of the Funding Detail is attached as follows:

Exhibit A- 1	Fiscal Year 10-11	\$56,607,730.00
Exhibit A- 2	Fiscal Year 11-12	\$ 75,827,242.00
Exhibit A- 3	Fiscal Year 12-13	\$ TBD
Exhibit A- 4	Fiscal Year 13-14	\$ TBD
Exhibit A- 5	Fiscal Year 14-15	\$ TBD
Exhibit A- 6	Fiscal Year 15-16	\$ TBD

**(1) Network Provider Service Expenses – Cost Reimbursement**

(a) The Department shall reimburse the payment of the delivery of service units provided by approved network providers that are provided in accordance with the terms and conditions of this contract, not to exceed the following, based on the Funding Detail, subject to the availability of funds.

Fiscal Year	Subcontracted Services Total Amount
2010-2011	\$52,952,530.00
2011-2012	\$ 70,081,007.00
2012-2013	\$ TBD
2013-2014	\$ TBD
2014-2015	\$ TBD
2015-2016	\$ TBD

10. Page 75, Attachment I, Section C. 1. (2) Method of Payment, Administrative Expenses – Fixed Price, Fixed Payment, for fiscal year 07/01/11- 06/30/12, is hereby amended to read:

Service Unit	Fixed Fee	# of Units	Total Amount
One Month of Administration, Management and Oversight (07/01/11 – 06/30/12)	\$277,630.00	12	\$3,331,565.00

11. Page 76, Attachment I, Section C.1.e., Method of Payment, is hereby added to read:

e. This contract is funded by the following FY 2011-2012 Appropriation Line Item(s): 314a, 315, 316, 317, 317a, 322, 324, 327, 334, 335

12. Page 76, Attachment I, Section C.1.(3), Method of Payment, as previously amended on page 4 of Amendment #0001, is hereby amended to read:

**(3) The Miami Dade Wraparound Cooperative Agreement Expenses**

The Department shall reimburse the managing entity, on a cost reimbursement basis, for expenses relating to the delivery of SAMHSA Grant Wraparound Project services that are provided in accordance with the terms and conditions of this contract and The Miami Dade Wraparound Cooperative Agreement #1U79SM59055-01, incorporated herein by reference, not to exceed the following, based on the approved **Line Item Operating Budget (Exhibit's B-1, B-2)**, subject to the availability of funds:

<b>Fiscal Year</b>	<b>Miami Dade Wraparound Cooperative Agreement #1U79SM59055-01  Network Provider/Personnel/Consulting Costs</b>	<b>Miami Dade Wraparound Cooperative Agreement #1U79SM59055-01  Managing Entity Administration Cost</b>
2010-2011	\$580,698.00	\$50,000.00
2011-2012	\$940,856.00	\$102,341.00
2012-2013	TBD	TBD
2013-2014	TBD	TBD
2014-2015	TBD	TBD
2015-2016	TBD	TBD

13. Page 76, Attachment I, Section C.1., Method of Payment, paragraph (4) is hereby amended to read:

**(4) Substance Abuse and Mental Health Services Administration Haiti Emergency Response Grant Application #1H07SM000317-01**

The Department shall reimburse the managing entity, on a cost reimbursement basis, for expenses relating to the delivery of **SAMHSA Haiti Emergency Response Grant Application** services that are provided in accordance with the terms and conditions of the grant application, this contract, and/or the Approved Annual Action Plan and based on the

approved Line Item Operating Budget (Exhibit's B-1, B-2), subject to the availability of funds.

<b>Fiscal Year</b>	<b>SAMHSA Haiti Emergency Response Grant Application # 1H07SM000317-01  Network Provider Services Cost</b>	<b>SAMHSA Haiti Emergency Response Grant Application # 1H07SM000317-01  Managing Entity Administration Cost</b>
<b>2010-2011</b>	<b>\$466,580.00</b>	<b>\$17,470.00</b>
<b>2011-2012</b>	<b>\$1,319,063.00</b>	<b>\$52,410.00</b>
<b>2012-2013</b>	<b>TBD</b>	<b>TBD</b>
<b>2013-2014</b>	<b>TBD</b>	<b>TBD</b>
<b>2014-2015</b>	<b>TBD</b>	<b>TBD</b>
<b>2015-2016</b>	<b>TBD</b>	<b>TBD</b>

14. Page 76, Attachment I, Section C.1., Method of Payment, paragraph (5) is hereby added to read:

**(5) Reduction of Administrative Costs to Support Increased Services**

The Department is committed to ensuring that the maximum amount of financial resources is made available for direct services to individuals served through administrative and service provision cost savings and efficiencies including but limited to, the streamlining of the network provider, the reduction, elimination, and consolidation of duplicative network provider and managing entity administrative structures; coordinated procurements with parallel state, local, and private entities and other reductions to the network provider administrative costs.

The managing entity shall achieve administrative cost savings and efficiencies across the network of subcontractors, maximize the amount of contract funds available for the provision of services, expand service capacity, and develop the necessary infrastructure to efficiently and effectively manage the service system. The resulting service system will increase access for those in need of care, improve the coordination and continuity of care for vulnerable and high risk populations, and redirect service dollars from restrictive care settings to community-based recovery services.

The Department expects the following administrative cost reduction goals and corresponding services increase goals to be achieved for each of the five years of the contract as follows:

Fiscal Year	Service Cost	Network Provider Administrative Cost	Managing Entity Administrative Cost**	Total Admin Cost	Total Cost Per Year
2010-2011 (9-Months)	46,074,726	7,925,082	2,607,922	10,533,004	56,607,730
2011-2012*	62,417,189	9,570,025	3,840,028	13,410,053	75,827,242
2012-2013*	63,116,316	8,923,308	3,787,618	12,710,926	75,827,242
2013-2014*	63,815,443	8,224,181	3,787,618	12,011,799	75,827,242
2014-2015*	64,514,571	7,525,053	3,787,618	11,312,671	75,827,242
2015-2016* (3-Months)	16,303,424	1,706,482	946,905	2,653,386	18,956,811

316,241,669	43,874,131	18,757,709	62,631,839	378,873,509
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\*Projected Funding Per Fiscal Year

\*\*Includes MDWP (FACES) Staff Salaries, Fringe and Travel Costs( refer to Line Item Budget for funding distribution)

The managing entity shall submit to the Department, a detailed report, with supporting documentation, justifying the mitigating circumstances for its inability to achieve the foregoing administrative cost reduction goals and corresponding services increase goals, per **Exhibit G**, Required Reports.

15. Page 77, Attachment I, Section., Method of Payment, paragraph 3.f. Scheduling the Advance Payment, is hereby amended to read:

For Fiscal Year 2010-2011:

Month	Type of Request	Based On:	Date of Submission
October	Advance	Anticipated Cash Needs	October 1 <sup>st</sup>
November	Advance	Anticipated Cash Needs	October 1 <sup>st</sup>
December	Reimbursement	October Actual Expenditures	November 30 <sup>th</sup>
January	Reimbursement	November Actual Expenditures	December 30 <sup>th</sup>
February	Reimbursement	December Actual Expenditures	January 30 <sup>th</sup>
March	Reimbursement	January Actual Expenditures	February 30 <sup>th</sup>
April	Reimbursement	February Actual Expenditures	March 30 <sup>th</sup>
May	Reimbursement	March Actual Expenditures	April 30 <sup>th</sup>
June	Reimbursement	April Actual Expenditures	May 30 <sup>th</sup>
Reconciliation	Recoupment	May Actual Expenditures	June 30 <sup>th</sup>
Reconciliation	Recoupment	June Actual Expenditures	August 31 <sup>st</sup>
Final FY Invoice	Reconciliation – Final Expenditure Report	Year to date Actual Expenditures as of June 30 <sup>th</sup>	August 31 <sup>st</sup>

**For Fiscal Year 2011-2015**

Month	Type of Request	Based On:	Date of Submission
July	Advance	Anticipated Cash Needs	July 1 <sup>st</sup>
August	Advance	Anticipated Cash Needs	July 1 <sup>st</sup>
September	Reimbursement	July Actual Expenditures	August 30 <sup>th</sup>
October	Reimbursement	August Actual Expenditures	September 30 <sup>th</sup>
November	Reimbursement	September Actual Expenditures	October 30 <sup>th</sup>
December	Reimbursement	October Actual Expenditures	November 30 <sup>th</sup>
January	Reimbursement	November Actual Expenditures	December 30 <sup>th</sup>
February	Reimbursement	December Actual Expenditures	January 30 <sup>th</sup>
March	Reimbursement	January Actual Expenditures	February 30 <sup>th</sup>
April	Reimbursement	February Actual Expenditures	March 30 <sup>th</sup>
May	Reimbursement	March Actual Expenditures	April 30 <sup>th</sup>
June	Reimbursement	April Actual Expenditures	May 30 <sup>th</sup>
Reconciliation	Recoupment	May Actual Expenditures	June 30 <sup>th</sup>
Reconciliation	Recoupment	June Actual Expenditures	August 31 <sup>st</sup>
Final Invoice	Reconciliation – Final Expenditure Report	Year to date Actual Expenditure as of June 30 <sup>th</sup>	August 31 <sup>st</sup>

**Fiscal Year 2015-2016**

Month	Type of Request	Based On:	Date of Submission
July	Advance	Anticipated Cash Needs	July 1 <sup>st</sup>
August	Advance	Anticipated Cash Needs	July 1 <sup>st</sup>
September	Reimbursement	July Actual Expenditures	August 30 <sup>th</sup>
Reconciliation	Recoupment	August Actual Expenditures	September 30 <sup>th</sup>
Final Invoice	Reconciliation – Final Expenditure Report	Year to Date Actual Expenditure as of September 30 <sup>th</sup>	November 30 <sup>th</sup>

16. Pages 90-91, Exhibit A-2, Funding Detail, (dated 10/01/2010), are hereby deleted in their entirety and Pages 90-91, Revised Exhibit A-2, Funding Detail for fiscal year 2011-12, are inserted in lieu thereof and attached hereto.

17. Page 101, Exhibit B-2, Line Item Operating Budget, for contract period 07/01/2011 to 06/30/2012, (dated 10/01/2010), is hereby deleted in its entirety and Page 101, Revised Exhibit B-2, Line Item Budget for contract period 07/01/2011 to 06/30/2012, (dated 07/01/2011), is inserted in lieu thereof and attached hereto.

18. Pages 116-120, Exhibit D, Substance Abuse and Mental Health Required Performance Outcomes and Outputs for Fiscal Year 2011-2012 (dated 10/01/2010), are hereby deleted in their entirety and Pages 116-120, Revised Exhibit D, Substance Abuse and Mental Health Required Performance Outcomes and Outputs for Fiscal Year 2011-2012 (dated 07/01/2012), are inserted in lieu thereof and attached hereto.

19. Pages 150-153, Exhibit G, Required Reports, (dated April 1, 2011), as previously amended on page 10 of Amendment #0002, are hereby deleted in their entirety and



07/01/2011

Pages 150-153, Revised Exhibit G, Required Reports, (dated July 1, 2011), are inserted in lieu thereof and attached hereto.

20. Pages 164-166, Attachment III, Audit Attachment, are hereby deleted in their entirety and Pages 164-166, Revised Attachment III, dated 05/06/2011, are inserted in lieu thereof and attached hereto.

This amendment shall begin on 07/01/2011 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 **twenty-four (24)** page amendment to be executed by their officials thereunto duly authorized.

PROVIDER: South Florida Behavioral Health Network, Inc.

STATE OF FLORIDA  
DEPARTMENT OF CHILDREN AND FAMILIES

SIGNED  
BY: John D. Dow

SIGNED  
BY: Jacqui B. Colyer

NAME: John Dow

NAME: Jacqui B. Colyer

TITLE: Executive Director

TITLE: Regional Director

DATE: 6/30/11

DATE: 7-1-2011

FEDERAL ID NUMBER: 59-3385099

APPROVED AS TO FORM  
AND LEGAL SUFFICIENCY

Regional Legal Counsel

6/29/11  
Date

MENTAL HEALTH  
FUNDING DETAIL

Provider Name South Florida Behavioral Health Network,

Contract # KH225

Revision # 0003

FY 2011-2012

Budget Entity 60910506 - Adult Mental Health	OCA	AMOUNT	Budget Entity 60910506 - Children's Mental Health	OCA	AMOUNT
<b>502004-EMERGENCY STABILIZATION</b>			<b>503001-EMERGENCY STABILIZATION</b>		
<b>G/A-ADULT COMM. MENTAL HEALTH</b>	(100610)		<b>G/A-CHILDREN'S MENTAL HEALTH</b>	(100435)	
ADAMH Trust Fund TF (027005)*	AESS1	\$725,613	ADAMH Trust Fund TF (027005)*	CESS1	\$437,988
General Revenue (000326)*	AESS1	\$796,152	General Revenue (000326)*	CESS1	\$112,443
TSTF (122023)*	AESS1	\$9,432	FGTF - Title XXI (261015)	89Q01	\$30,662
General Revenue (000326)*	SMHA1	\$455,000	General Revenue (000326)*	SMHC1	
<b>G/A-BAKER ACT SERVICES</b>	(100611)		<b>G/A-CHILDREN'S BAKER ACT</b>	(104257)	
General Revenue (000326)*	AESS1	\$8,078,482	General Revenue (000326)*	CESS1	\$1,469,218
TSTF (122023)*	AESS1				
<b>G/A-OUTPATIENT BAKER ACT SVCS PILOT</b>	(100612)				
General Revenue (000326)	AESS1				
TSTF (122023)	AESS1				
<b>Emergency Stabilization Total =</b>		<b>\$10,064,679</b>	<b>Emergency Stabilization Total =</b>		<b>\$2,050,311</b>
<b>502018-RECOVERY &amp; RESILIENCY</b>			<b>503013-RECOVERY &amp; RESILIENCY</b>		
<b>G/A-ADULT COMM. MENTAL HEALTH</b>	(100610)		<b>G/A-CHILDREN'S MENTAL HEALTH</b>	(100435)	
ADAMH Trust Fund TF (027005)	ARRS1	\$1,102,130	ADAMH Trust Fund TF (027005)*	CRRS1	\$1,081,317
O&MTF (027005)	ARRS1		General Revenue (000326)*	CRRS1	\$2,300,594
General Revenue (000326)	ARRS1	\$12,217,411	General Revenue - Children At Risk of ED (000326)	CARED	\$100,000
GR/AGAPE Fam Ministry (000326)*	AFMMD	\$800,000	FGTF-MIAMI-DADE Wrap Around Pro YR-1 (261015)	GMDW1	\$952,483
GR/Comm Forensic Beds-Adult Svc (000326)	CFBAS	\$3,154,522	General Revenue (000326)*	SMHC2	
ADAMH Trust Fund - FACT Admin (027005)	FTA19	\$415,188	General Revenue (000326)	SP5MA	
General Revenue - FACT Admin (000326)	FTA19	\$1,708,223	GR-JV Restor Incomp To Pro(000326)*	32N03	
FGTF -FMGPMA - Medicaid Admin (261015)	FTA19	\$876,570	FGTF - Title XXI (261015)	89Q13	\$1,532,160
General Revenue - FACT svcs (000326)	FTS19	\$763,200			
FGTF -FGGGJD - Jail Diversion Pro (261015)	GJDT1				
FGTF-FGGGPT-Trans From Homelessness (261015)	GX018	\$528,927			
O&MTF (027005)	MHS18		<b>Recovery &amp; Resiliency Total =</b>		<b>\$5,966,554</b>
General Revenue (000326)	SMHA2	\$1,295,000			
WTTF TANF (401001)	39A18	\$2,054,412			
General Revenue (000326)	LPPME	\$1,000,000			
FGTF -Haitian Grant (261015)	CCH11				
GR -Pre Admin Screen Rev MCAID ADM(000326)	9QPSR				
FGTF-FMGPMA-Pre Admin Screen Rev MCAID (261015)	9QPSR				
<b>G/A-INDIGENT PSYCH MEDICATION PRO</b>	(101350)		<b>G/A-PURCHASED RESIDENTIAL</b>		
General Revenue (000326)*	ARRS1	\$113,991	<b>TREATMENT SERVICES</b>	(102780)	
			GR/MCAID & Non-MCAID MOE (000326)*	9PRNM	\$360,285
			GR/Purch Res Treatment-Medicaid Svcs (000326)	9PRTS	
<b>G/A-BAKER ACT SERVICES</b>	(100611)		<b>G/A-PURCHASE/THERA SVCS CHILD</b>	(100800)	
General Revenue (000326)*	ARRS1		General Revenue (000326)*	19MCB	
<b>Recovery &amp; Resiliency Total =</b>		<b>\$26,029,574</b>	<b>Recovery &amp; Resiliency Total =</b>		<b>\$360,285</b>
<b>TOTAL ADULT COMM. MH =</b>		<b>\$36,094,253</b>	<b>TOTAL CHILDREN'S MENTAL HEALTH =</b>		<b>\$8,377,150</b>
<b>TOTAL ALL MH PROGRAMS =</b>		<b>\$44,471,403</b>			

Community Mental Health Block Grant

Contract No. KH225

## REVISED EXHIBIT B-2

## LINE ITEM OPERATING BUDGET

AGENCY: South Florida Behavioral Health Network, Inc.

CONTRACT # KH225

CONTRACT PERIOD: FROM: 07/01/2011 TO 06/30/2012 DATE PREPARED: 07/01/2011

LINE ITEMS	Administration, Management & Oversight AMOUNTS	Special Projects- CMH SAMSHA Wraparound Grant AMOUNTS	Other Special Projects AMOUNTS	TOTAL
<b>I. PERSONNEL SERVICES</b>				
(a) SALARIES	\$ 2,203,241	\$ 340,447	\$ 41,924	\$ 2,585,612
(b) FRINGE	\$ 550,810	\$ 85,112	\$ 10,486	\$ 646,408
<b>TOTAL PERSONNEL =</b>	<b>\$ 2,754,051</b>	<b>\$ 425,559</b>	<b>\$ 52,410</b>	<b>\$ 3,232,020</b>
<b>II. EXPENSES</b>				
(a) BUILDING OCCUPANCY	\$ 163,049	\$ 18,117		\$ 181,166
(b) PROFESSIONAL SERVICES	\$ 57,532			\$ 57,532
(c) TRAVEL	\$ 49,152	\$ 16,386		\$ 65,538
(d) EQUIPMENT COSTS				
(e) FOOD SERVICES				
(f) MEDICAL AND PHARMACY				
(g) SUBCONTRACTED SERVICES				
(h) INSURANCE	\$ 9,296	\$ 455		\$ 9,751
(i) INTEREST				
(j) OPERATING SUPPLIES & EXPENSES	\$ 298,485			\$ 298,485
(k) OTHER				
(l) DONATED ITEMS				
<b>TOTAL EXPENSES =</b>	<b>\$ 577,514</b>	<b>\$ 34,958</b>	<b>\$ -</b>	<b>\$ 612,472</b>
<b>III. NONEXPENDABLE PROPERTY</b>				
(a) EQUIPMENT	\$ -	\$ -	\$ -	\$ -
(b) PROPERTY	\$ -	\$ -	\$ -	\$ -
<b>TOTAL NONEXPENDABLE PROPERTY =</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>IV. COMPUTER HARDWARE, SOFTWARE, &amp; SERVICES</b>				
<b>TOTAL COMPUTER EXPENSES =</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>V. SPECIAL PROJECTS</b>				
	\$ -	\$ 582,680	\$ 1,319,063	\$ 1,901,743
<b>GRAND TOTAL =</b>	<b>\$ 3,331,565</b>	<b>\$ 1,043,197</b>	<b>\$ 1,371,473</b>	<b>\$ 5,746,235</b>

**Exhibit D**  
**Substance Abuse and Mental Health Required Performance Outcomes and Outputs**  
*For Fiscal Year 2011-2012*

Provider

Name: **South Florida Behavioral Health Network, Inc.** Contract #: **KH225** Date: **07/01/2011** Revision **#0003****I. Mental Health Contracted Services****A. Required Performance Output Standards for Each Target Population**  
(including all clients paid for by SAMH, Medicaid and Local Match)Minimum  
Numbers to  
be Served

\*Please explain in the comment section below if a target population is indicated in the section below, but there is no corresponding outcome standard for that population.

**1. Adult Mental Health**

- a. Adults with Severe and Persistent Mental Illness (SPMI) (M0016)/(MH016)
- b. Adults with Serious and Acute Episodes of Mental Illness (M05301)/(MH5301)
- c. Adults with Mental Health Problems (M05302)/(MH5302)
- d. Adults with Forensic Involvement (M0018)/(MH018)

21,749

607

1,683

274

**2. Children's Mental Health**

- a. Children with Serious Emotional Disturbances (SED) (M0031)/(MH031)
- b. Children with Emotional Disturbances (ED) (M0032)/(MH032)
- c. Children at-risk of Emotional Disturbances (M0033)/(MH033)

10,531

5,516

92

**B. Required Performance Outcome Standards for Each Target Population**Minimum  
Contract  
Standard

\*Please explain in the comment section below if there is an Outcome Standard but there is no corresponding target population indicated.

**1. Adult Mental Health - Adults with Severe and Persistent Mental Illness**

- a. Percent of adults with severe and persistent mental illnesses who live in stable housing environment will be at least (M0742)/MH742) (**Statewide Target – 93%**)
- b. Average annual number of days (post admission assessments) worked for pay for adults with severe and persistent mental illness will be at least (M0003)/(MH003) – (**Statewide Target – 30**)

93%

30

**2. Adult Mental Health - Adults in Mental Health Crisis, including Adults with Serious and Acute Episodes of Mental Illness and Adults with Mental Health Problems**

- a. Percent of adults in mental health crisis who live in stable housing environment will be at least (M0744)/MH744) – (**Statewide Target – 90%**)

90%

**3. Adult Mental Health – Adults with Serious Mental Illness (SPMI, MH Crisis, Forensic)**

- a. Percent of adults with serious mental illness who are competitively employed will be at least (M0703)/MH703) – (**Statewide Target – 15%**)

15%

**4. Adult Mental Health - Forensic Involvement**

- b. Percent of adults in forensic involvement who live in stable housing environment will be at least (M0743)/MH743) – (**Statewide Target – 70%**)

70%

**5. Children's Mental Health - Seriously Emotionally Disturbed**

- a. Percent of children with serious emotional disturbance who live in stable housing environment will be at least (M0779)/(MH779) – (**Statewide Target – 95%**)
- b. Percent of children with serious emotional disturbance who improve their level of functioning will be at least (M0378)/MH378) – (**Statewide Target – 65%**)
- c. Percent of school days seriously emotionally disturbed children attended will be at least (M0012)/(MH012) – (**Statewide Target – 86%**)

95%

65%

86%

**6. Children's Mental Health - Emotionally Disturbed**

- a. Percent of children who live in stable housing environment will be at least (M0778)/(MH778) – (**Statewide Target – 95%**)
- b. Percent of children who improve their level of functioning will be at least (M0377)/(MH377) – (**Statewide Target – 64%**)

95%

64%

**Exhibit D**  
**Substance Abuse and Mental Health Required Performance Outcomes and Outputs**  
*For Fiscal Year 2011-2012*

Provider

Name: **South Florida Behavioral Health Network, Inc.** Contract #: **KH225** Date: **07/01/2011** Revision **#0003****7. Children's Mental Health – At-Risk of Emotional Disturbance**

- a. Percent of children who live in stable housing environment will be at least (M0780) (MH780)  
 – (Statewide Target – 90%)

**90%****C. Required Internal Measures****1. Data Submission Outcomes for Mental Health**

- a. Percent of persons receiving state-contracted mental health service event records which have matching mental health initial (purpose 1) admission records in the Substance Abuse and Mental Health Information System will be at least (SAMHIS) (M0759)  
 The standard target for this measure is at least 95%

**95%****II. Substance Abuse Contracted Services****A. Required Performance Output Standards for Each Target Population (including all clients paid for by SAMH, Medicaid and Local Match)**

\*Please explain in the comment section below if a target population is indicated in the section below, but there is no corresponding outcome standard for that population.

**Minimum  
Numbers to  
be Served****1. Adults with Substance Abuse Problems**

- a. Number of Adults Served (M0063)/(SA063)

**12,354****2. Children with Substance Abuse Problems**

- a. Number of Children Served (M0052)/(SA052)

**4,520****3. Adults At-Risk of Substance Abuse Problems- (Non GAA)**

- a. Number of Adults participating in Prevention Services (M0785)/(SA785)  
 b. Number of Adults participating in Level 1 Prevention Programs (M0767)/(SA767)  
 c. Number of Adults participating in Level 2 Prevention Programs (M0768)/(SA768)  
 d. Number of adults participating in Level 1 Prevention Programs who complete 75 percent of the program's schedule of activities (M0769)/(SA769)  
 e. Number of adults participating in Level 2 Prevention Programs who complete 75 percent of the program's schedule of activities (M0770)/(SA770)

**18,087****150****10****112****7****4. Children At-Risk of Substance Abuse Problems- (Non GAA)**

- a. Number of children participating in Prevention Services (M0762)/(SA762)  
 b. Number of children participating in Level 1 Prevention Programs (M0761)/(SA761)  
 c. Number of children participating in Level 2 Prevention Programs (M0695)/(SA695)  
 d. Number of children participating in Level 1 Prevention Programs who complete 75 percent of the program's schedule of activities (M0763)/(SA763)  
 e. Number of children participating in Level 2 Prevention Programs who complete 75 percent of the program's schedule of activities (M0764)/(SA764)

**15,683****9,735****354****2,164****143****B. Required Performance Outcome Standards for Each Target Population**

\*Please explain in the comment section below if there is an Outcome Standard but there is no corresponding target population indicated.

**Minimum  
Contract  
Standard****1. Adults with Substance Abuse Problems**

- a. Percent of adults who successfully complete substance abuse treatment services will be at least (M0755)/(SA755) - (Statewide Target – 50%)  
 b. Percent change in clients who are employed from admission to discharge will be at least (M0753)/(SA753) (Statewide Target – 20%)  
 c. Percent of adults who live in a stable housing environment at the time of discharge will be at least (M0756)/(SA756) - (Statewide Target – 80%)

**50%****20%****80%**

**Exhibit D**  
**Substance Abuse and Mental Health Required Performance Outcomes and Outputs**  
*For Fiscal Year 2011-2012*

Provider

Name: **South Florida Behavioral Health Network, Inc.** Contract #: **KH225** Date: **07/01/2011** Revision **#0003**

d.	Percent change in the number of adults arrested 30 days prior to admission versus 30 days prior to discharge (M0754/SA754) ( <b>Statewide Target – 35%</b> )	<b>35%</b>
<b>2.</b>	<b>Adults At-Risk of Substance Abuse Problems - (Non GAA) (Statewide Target for Each 50%)</b>	
a.	Percent of adults participating in Level 1 Prevention Programs who complete 75 percent of the program's schedule of activities will be at least (M0771)/(SA771)	<b>50%</b>
b.	Percent of adults participating in Level 2 Prevention Programs who complete 75 percent of the program's schedule of activities will be at least (M0772)/(SA772)	<b>50%</b>
<b>3.</b>	<b>Children with Substance Abuse Problems</b>	
a.	Percent of children who successfully complete substance abuse treatment services will be at least (SA725)/M0725) - ( <b>Statewide Target – 55%</b> )	<b>55%</b>
b.	Percent of children who live in a stable housing environment will be at least (M0752)/SA752) - ( <b>Statewide Target – 85%</b> )	<b>85%</b>
c.	Percent change in the number of children arrested 30 days prior to admission versus 30 days prior to discharge will be at least (M0751/SA751) - ( <b>Statewide Target – 20%</b> )	<b>20%</b>
<b>4.</b>	<b>Children At-Risk of Substance Abuse Problems - (Non GAA) (Statewide Target for each 50%)</b>	
a.	Percent of children participating in Level 1 Prevention Programs who complete 75 percent of the program's schedule of activities will be at least (M0765)/(SA765)	<b>50%</b>
b.	Percent of children participating in Level 2 Prevention Programs who complete 75 percent of the program's schedule of activities will be at least (M0766)/(SA766)	<b>50%</b>
<b>5.</b>	<b>Data Submission for Prevention Program Tool (Baseline – Non GAA)</b>	
a.	Percent of approved Prevention Descriptions completed within 30 days of contract execution. ( <b>Statewide Target – 50%</b> )	<b>50%</b>
<b>C. Required Internal Measures</b>		
<b>1.</b>	<b>Data Submission Outcomes for Substance Abuse</b>	
a.	Percent of persons receiving state-contracted substance abuse service event records which have matching substance abuse initial (purpose 1) admission records in the Substance Abuse and Mental Health Information System will be at least (SAMHIS) (M0758) The standard target for this measure is at least 95%	<b>95%</b>

### III. Managing Entity Contracted Services

#### a. Performance Measures

- (1) 80 percent of Network Providers surveyed for satisfaction will rate the administrative services of the provider as "Satisfactory" or higher.
- (2) 80 percent of stakeholders surveyed for satisfaction will rate the administrative services of the provider as "Satisfactory" or higher.
- (3) 80 percent of consumers surveyed for satisfaction will rate the administrative services of the provider as "Satisfactory" or higher.
- (4) 90 percent of the Network Providers will receive reimbursement for verified services from the provider within 15 days following the managing entity receipt of a valid invoice.
- (5) TBD percent reduction in the average number of days people are on the residential substance abuse wait list.

**Exhibit D**  
**Substance Abuse and Mental Health Required Performance Outcomes and Outputs**  
*For Fiscal Year 2011-2012*

Provider Name: **South Florida Behavioral Health Network, Inc.** Contract #: **KH225** Date: **07/01/2011** Revision **#0003**

- (6) TBD percent reduction in the average number of people waiting on the residential substance abuse wait list.
- (7) TBD percent reduction in the average number of days people are on the adult mental health wait list.
- (8) TBD percent reduction in the average number of people waiting on the adult mental health wait list.
- (9) TBD percent reduction in the average number of days people are on the children's mental health wait list.
- (10) TBD percent reduction in the average number of people waiting on the children's mental health wait list.
- (11) TBD percent reduction in the average number of days people are on the forensic wait list.
- (12) TBD percent reduction in the average number of people waiting on the forensic wait list.
- (13) The ME will manage the utilization of contracted service dollars to prevent any lapse in service dollars.

**b. Methodology**

- (1) The numerator is the number of Network Providers indicating ratings of "satisfactory" or higher on the satisfaction survey. The denominator is the number of Network Providers responding to the satisfaction survey. The measure is based on attainment of 80 percent or greater level of satisfaction.
- (2) The numerator is the number of stakeholders indicating ratings of "satisfactory" or higher on the satisfaction survey. The denominator is the number of stakeholders responding to the satisfaction survey. The measure is based on attainment of 80 percent or greater level of satisfaction.
- (3) The numerator is the number of consumers indicating ratings of "satisfactory" or higher on the satisfaction survey. The denominator is the number of consumers responding to the satisfaction survey. The measure is based on attainment of 80 percent or greater level of satisfaction.
- (4) The numerator is the number of properly prepared invoices received from Network Providers that are paid within 15 days of receipt from Network Providers. The denominator is the number of properly prepared invoices with all required backup data received from the Network Providers for each month. The measure is based on attaining an average of 90 percent or greater rate over a 12-month period.
- (5) One minus the fraction whose numerator is the average number of days people were on the residential substance abuse wait list during the past fiscal, and whose denominator is the average number of days people were on the residential substance abuse wait list during the previous fiscal, the result of this calculation times 100 provides the percent.
- (6) One minus the fraction whose numerator is the average number of people waiting on the residential substance abuse wait list during the past fiscal year, and whose denominator is the average number of people on the residential substance abuse wait list during the previous fiscal, the result of this calculation times 100 provides the percent.
- (7) One minus the fraction whose numerator is the average number of days people were on the adult mental health wait list during the past fiscal, and whose denominator is the average number of days people were on the residential substance abuse wait list during the previous fiscal, the result of this calculation times 100 provides the percent.
- (8) One minus the fraction whose numerator is the average number of people waiting on the adult mental health wait list during the past fiscal year, and whose denominator is the average number of people on the



**Exhibit D**  
**Substance Abuse and Mental Health Required Performance Outcomes and Outputs**  
*For Fiscal Year 2011-2012*

Provider Name: **South Florida Behavioral Health Network, Inc.** Contract #: **KH225** Date: **07/01/2011** Revision **#0003**

residential substance abuse wait list during the previous fiscal, the result of this calculation times 100 provides the percent.

(9) One minus the fraction whose numerator is the average number of days people were on the children's mental health wait list during the past fiscal, and whose denominator is the average number of days people were on the residential substance abuse wait list during the previous fiscal, the result of this calculation times 100 provides the percent.

(10) One minus the fraction whose numerator is the average number of people waiting on the children's mental health wait list during the past fiscal year, and whose denominator is the average number of people on the residential substance abuse wait list during the previous fiscal, the result of this calculation times 100 provides the percent.

(11) One minus the fraction whose numerator is the average number of days people were on the forensic wait list during the past fiscal, and whose denominator is the average number of days people were on the residential substance abuse wait list during the previous fiscal, the result of this calculation times 100 provides the percent.

(12) One minus the fraction whose numerator is the average number of people waiting on the forensic wait list during the past fiscal year, and whose denominator is the average number of people on the residential substance abuse wait list during the previous fiscal, the result of this calculation times 100 provides the percent.

(13) The numerator is the amount of service dollars utilized by Network Providers at the end of each fiscal year. The denominator is the total amount of service dollars allocated to the ME during each fiscal year.

**VI. Haiti Community Response Program Services**

Minimum Numbers to be Served
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**B. Required Performance Output Standards**

**1. Outreach and Public Education Services**

a. Number of adults and children served

9685

**2. Case Management and Referral Services**

a. Number of adults and children served

210

**3. Short-Term Outpatient Treatment services**

a. Number of adults and children served

160

**B. Required Performance Outcome Standards**

**1. Outreach and Public Education Services**

a. Percent of adults and children receiving outreach and public education services

90

**2. Case Management and Referral Services**

a. Percent of adults and children referred for services

85

**3. Short-Term Outpatient Treatment Services**

a. Percent of adults and children who successfully complete treatment

85

**V. Comments / Explanations**

\*There should be a number, baseline, or N/A inserted for each target or outcome in the sections above. \*Please explain if a target population is indicated but there is no corresponding outcome standard for that population, or if there is an Outcome Standard but there is no corresponding target population indicated.

# REVISED EXHIBIT G REQUIRED REPORTS

Performance Contract  
SAMH Services Program

Provider Name: South Florida Behavioral Health Network, Inc.  
Date: July 1, 2011

Contract No. KH225  
Amendment #0003

	Due Date	# of Copies	Send to:
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## Required Reports

Response to Monitoring Reports and Corrective Action Plans	Within 30 days from the day the report is received.	1	Contract Manager
Validation of review by the Chief Financial Officer, or designee, of subcontractor's Sliding Fee Scale [reflecting the uniform schedule of discounts referenced in 65E-14.018(4)]	Within 30 days of contract execution	1	Contract Manager
Validation of review of subcontractor's Agency Service Capacity Report, Projected Cost Center Operating and Capital Budget, Cost Center Personnel Detail Report (if applicable)	September 30, 2011 September 30, 2012 September 30, 2013 September 30, 2014 September 30, 2015	1	Contract Manager
Consolidated Program Description	Prior to contracting for year 2 of the contract and every other year thereafter, or any updates thereafter.	1	Contract Manager
Monthly Data Required by CFP 155-2	Within 15 days after end of month	Electronic Submission	SAMH Program Office as appropriate
Incident Report	The managing entity shall ensure that subcontractors are entering incident reports into IRAS within 24 hours.  The managing entity shall submit monthly incident report logs by subcontractor and submit quarterly trends analysis.	1 to Contract Manager	As specified in CFOP 215-6, and other Regional language as directed by the contract.
Audit Schedules (for client non-specific unit cost performance contracts)	The ME's Audit Schedule is due 180 days after the end of the ME fiscal year or 45 days upon completion of audit, whichever comes first.  The ME shall submit the network provider's audit schedules 30 days after receipt from the network provider.	1 to Region	Contract Manager
Schedule of State Earnings Schedule of related Party Transaction Adjustments Program/Cost Center Actual Expenses & Revenues Schedule Schedule of Bed-Day Availability Payments	Due 180 days after the end of the fiscal year or 45 days upon completion of audit, whichever comes first.	1 to Region	Region SAMH
Financial & Compliance Audit per Attachment II	180 days after the end of the managing entity's fiscal year or 45 days after its completion, whichever comes first.	1	See Attachment II SAMH Contract Manager

## Reports Required for Substance Abuse Providers

Annual Report for HIV Early	Upon Request of the department	1 to Circuit	Circuit Contract Manager/ Substance
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# REVISED EXHIBIT G REQUIRED REPORTS

Performance Contract  
SAMH Services Program

Intervention Services, SAPT Block Grant Set Aside Funded Services Only		1 to Headquarters	Abuse Program Office
Annual Report for Evidenced-based Injection Drug User Outreach Services, SAPT Block Grant Mandate, Designated Providers Only	Upon Request of the department	1 to Circuit 1 to Headquarters	Circuit Contract Manager/Substance Abuse Program Office
Annual Report for Pregnant Women and Women With Dependent Children SAPT Block Grant Set Aside Funded Services Only	Upon Request of the department	1 to Circuit 1 to Headquarters	Circuit Contract Manager/ Substance Abuse Program Office
<b>Other Reports</b>			
Approved Annual Action Plan	By June 1 <sup>st</sup> of each fiscal year	1	Contract Manager
Reduction of Administrative Cost to Support Increased Services	September 15, 2011 September 15, 2012 September 15, 2013 September 15, 2014 September 15, 2015 December 15, 2016	1	Contract Manager
Quarterly Annual Action Plan Reports on Accomplishments and Deliverables	As identified in the Annual Action Plan	1	Contract Manager
Monthly Administration and Service Invoices	30 days after the month of service	1	Contract Manager
Final Invoice	By July 31 of each fiscal year and 31 days after contract end date	1	Contract Manager
Utilization Management Wait List (	SA services. MH services (Residential Level 2 and Short term Residential Treatment)  Co-occurring (Residential Care Services)  Quarterly or as agreed upon in the Approved Annual Action Plan.	1	Contract Manager
Crisis Stabilization Unit Utilization Report	Monthly	1	Contract Manager
Monitoring Schedule	For fiscal year 2010-2011, within 30 days of receipt of the risk assessment prepared by the Department's Contract Oversight Unit and by August 30 <sup>th</sup> of each fiscal year thereafter.	1	Contract Manager
Validation of receipt and review of Network Providers grievance procedures	Within 30 days of contract execution	1	Contract Manager
Validation that all Network Providers produced copies of their Informed Consent Forms	Within 30 days of contract execution	1	Contract Manager
Validation of receipt and review of Network Providers Emergency Preparedness Plan	Within 30 days of contract execution and by June 1 of each fiscal year	1	Contract Manager
Validation of Network Providers Civil Rights Compliance Questionnaire	Within 30 days of contract execution	1	Contract Manager

# REVISED EXHIBIT G REQUIRED REPORTS

Performance Contract  
SAMH Services Program

Validation of Network Providers Security Agreements	Within 30 days of contract execution	1	Contract Manager
Affidavit Regarding Debarment	Annual for the ME and 15 days prior to contract negotiation with subcontractor, or as requested by the contract manager.	1	Contract Manager
Beginning Inventory Report	Within 30 days of contract execution	1	Contract Manager
Training Schedule	Within 15 days prior to the training quarter.	1	Contract Manager
Invoice Review Supporting Documentation including Medicaid and 3 <sup>rd</sup> Party Billing	As per the contract and/or as requested by the contract manager	1	Contract Manager
Lapse Analysis Report	30 days after the month of services	1	Contract Manager
Annualized Line Item Budget & Narrative	60 days before the beginning of each fiscal year.	1	Contract Manager
Annual Inventory Report	May 15 <sup>th</sup> of each fiscal year	1	Contract Manager
Closeout Inventory Report	By July 31, 2015	1	Contract Manager
Cooperative Agreements/MOU/MOA/Procedures	As identified in the Annual Action Plan and the contract. Quarterly progress report spreadsheet identifying executed and pending execution of agreements/procedures	1	Contract Manager
Quality Assurance Reviews, Monitoring Reports & Corrective Action Plans	Within 30 days after exit conference	1	Contract Manager

## REGION SPECIFIC REPORTS

### Children's Mental Health

Juvenile Incompetent to Proceed	By the 15 <sup>th</sup> following the month of service	1 1	Contract Manager CMH Program Administrator
Functional Family Therapy	By the 15 <sup>th</sup> following the month of service	1 1	Contract Manager CMH Program Administrator
MDWP (F.A.C.E.S.)	By the 15 <sup>th</sup> following the month of service	1 1	Contract Manager CMH Program Administrator
Residential Care Services	Bi-monthly (mid month and last day of the month following the month of services)	1 1	Contract Manager CMH Program Administrator
Incidental Expenses	By the 15 <sup>th</sup> following the moth of service	1 1	Contract Manager CMH Program Administrator

### Adult Mental Health

<b>FACT Reports</b> (1) Quarterly FACT Ad Hoc Reports (2) Reporting of significant incidents & interventions,	Subcontractors to submit to the managing entity by October 15 <sup>th</sup> January 15, April 15 and July 15 of each fiscal year. The managing entity is to submit to the department the reports one (1) week after the due dates listed above	1	Contract Manager and SAMH Program Office/Headquarters as specified in the contract
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# REVISED EXHIBIT G REQUIRED REPORTS

Performance Contract  
SAMH Services Program

as needed			
Quarterly Contingency Funds Report	Subcontractors to submit to the managing entity by October 31, January 30, April 30 and July 31 of each fiscal year. The managing entity is to submit to the department a summary of the quarterly expenditures one (1) week after the due dates listed above	1	Contract Manager and SAMH Program Office
PATH Annual Reports	Drafts to be submitted to the managing entity. The managing entity to submit the drafts to the SAMH Program Office. The managing entity to submit the final reports to DCF Central Office in Tallahassee in April or May of each fiscal year as requested	1 Southern Region SAMH for Prior Approval,  1 final to DCF Central Office in Tallahassee	Southern Region SAMH Program Office, Contract Manager, and On-line Site
Discharge Tracking List	Monthly	1	Program Administrator for SAMH
<b>Forensic Services</b>			
Monthly Report for Individuals on Conditional Release	By 20 <sup>th</sup> of each month	1	Program Administrator for SAMH and MH Administrator Office
Statewide Beds Status Reports	Weekly	1	Mental Health Program Office-Headquarters and Program Administrator for SAMH
Discharge Tracking List	Monthly	1	Program Administrator for SAMH
Department of Corrections Reports	Quarterly	1	Mental Health Program Office-Headquarters and Program Administrator for SAMH
<b>Haiti Emergency Response Grant Application For Intermediate Services # 1H07SM000317-01</b>			
Quarterly Progress and Financial Reports	Subcontractor (New Horizons Community Mental Health Center, Inc.) to submit to the managing entity by June 6, 2011, September 5, 2011, and December 5, 2011.  The managing entity is to submit to the department the reports by June 8, 2011, September 7, 2011, and December 7, 2011.	1  1 to Headquarters	Contract Manager  Mental Health Program Office
Final Progress and Financial Report	Subcontractor (New Horizons Community Mental Health Center, Inc.) to submit to the managing entity by April 23, 2012.  The managing entity is to submit to the department the reports by April 25, 2012	1  1 to Headquarters	Contract Manager  Mental Health Program Office

## **ATTACHMENT III**

The administration of resources awarded by the Department of Children & Families to the provider may be subject to audits as described in this attachment.

### **MONITORING**

In addition to reviews of audits conducted in accordance with OMB Circular A-133 and Section 215.97, F.S., as revised, the department may monitor or conduct oversight reviews to evaluate compliance with contract, management and programmatic requirements. Such monitoring or other oversight procedures may include, but not be limited to, on-site visits by department staff, limited scope audits as defined by OMB Circular A-133, as revised, or other procedures. By entering into this agreement, the recipient agrees to comply and cooperate with any monitoring procedures deemed appropriate by the department. In the event the department determines that a limited scope audit of the recipient is appropriate, the recipient agrees to comply with any additional instructions provided by the department regarding such audit. The recipient further agrees to comply and cooperate with any inspections, reviews, investigations, or audits deemed necessary by the department's inspector general, the state's Chief Financial Officer or the Auditor General.

### **AUDITS**

#### **PART I: FEDERAL REQUIREMENTS**

This part is applicable if the recipient is a State or local government or a non-profit organization as defined in OMB Circular A-133, as revised.

In the event the recipient expends \$500,000 or more in Federal awards during its fiscal year, the recipient must have a single or program-specific audit conducted in accordance with the provisions of OMB Circular A-133, as revised. The recipient agrees to provide a copy of the single audit to the Department's Single Audit Unit and its contract manager. In the event the recipient expends less than \$500,000 in Federal awards during its fiscal year, the recipient agrees to provide certification to the Department's Single Audit Unit and its contract manager that a single audit was not required. In determining the Federal awards expended during its fiscal year, the recipient shall consider all sources of Federal awards, including Federal resources received from the Department of Children & Families, Federal government (direct), other state agencies, and other non-state entities. The determination of amounts of Federal awards expended should be in accordance with guidelines established by OMB Circular A-133, as revised. An audit of the recipient conducted by the Auditor General in accordance with the provisions of OMB Circular A-133, as revised, will meet the requirements of this part. In connection with the above audit requirements, the recipient shall fulfill the requirements relative to auditee responsibilities as provided in Subpart C of OMB Circular A-133, as revised.

The schedule of expenditures should disclose the expenditures by contract number for each contract with the department in effect during the audit period. The financial statements should disclose whether or not the matching requirement was met for each applicable contract. All questioned costs and liabilities due the department shall be fully disclosed in the audit report package with reference to the specific contract number.

Single Audit Information for Recipients of Recovery Act Funds:

(a) To maximize the transparency and accountability of funds authorized under the American Recovery and Reinvestment Act of 2009 (Pub. L. 111-5) (Recovery Act) as required by Congress and in accordance with 2 CFR 215.21 "Uniform Administrative Requirements for Grants and Agreements" and OMB Circular A-102 Common Rules provisions, recipients agree to maintain records that identify adequately the source and application of Recovery Act funds. OMB Circular A-102 is available at <http://www.whitehouse.gov/omb/circulars/a102/a102.html>.

CF1120 (05/06/2011)  
South Florida Behavioral Health Network, Inc.

Contract No. KH225

(b) For recipients covered by the Single Audit Act Amendments of 1996 and OMB Circular A-133, "Audits of States, Local Governments, and Non-Profit Organizations," recipients agree to separately identify the expenditures for Federal awards under the Recovery Act on the Schedule of Expenditures of Federal Awards (SEFA) and the Data Collection Form (SF-SAC) required by OMB Circular A-133. OMB Circular A-133 is available at <http://www.whitehouse.gov/omb/circulars/a133/a133.html>. This shall be accomplished by identifying expenditures for Federal awards made under the Recovery Act separately on the SEFA, and as separate rows under Item 9 of Part III on the SF-SAC by CFDA number, and inclusion of the prefix "ARRA-" in identifying the name of the Federal program on the SEFA and as the first characters in Item 9d of Part III on the SF-SAC.

(c) Recipients agree to separately identify to each subrecipient, and document at the time of subaward and at the time of disbursement of funds, the Federal award number, CFDA number, and amount of Recovery Act funds. When a recipient awards Recovery Act funds for an existing program, the information furnished to subrecipients shall distinguish the subawards of incremental Recovery Act funds from regular subawards under the existing program.

(d) Recipients agree to require their subrecipients to include on their SEFA information to specifically identify Recovery Act funding similar to the requirements for the recipient SEFA described above. This information is needed to allow the recipient to properly monitor subrecipient expenditure of ARRA funds as well as oversight by the Federal awarding agencies, Offices of Inspector General and the Government Accountability Office.

## **PART II: STATE REQUIREMENTS**

This part is applicable if the recipient is a nonstate entity as defined by Section 215.97(2), Florida Statutes.

In the event the recipient expends \$500,000 or more in state financial assistance during its fiscal year, the recipient must have a State single or project-specific audit conducted in accordance with Section 215.97, Florida Statutes; applicable rules of the Department of Financial Services; and Chapters 10.550 (local governmental entities) or 10.650 (nonprofit and for-profit organizations), Rules of the Auditor General. The recipient agrees to provide a copy of the single audit to the Department's Single Audit Unit and its contract manager. In the event the recipient expends less than \$500,000 in State financial assistance during its fiscal year, the recipient agrees to provide certification to the Department's Single Audit Unit and its contract manager that a single audit was not required. In determining the state financial assistance expended during its fiscal year, the recipient shall consider all sources of state financial assistance, including state financial assistance received from the Department of Children & Families, other state agencies, and other nonstate entities. State financial assistance does not include Federal direct or pass-through awards and resources received by a nonstate entity for Federal program matching requirements.

In connection with the audit requirements addressed in the preceding paragraph, the recipient shall ensure that the audit complies with the requirements of Section 215.97(8), Florida Statutes. This includes submission of a financial reporting package as defined by Section 215.97(2), Florida Statutes, and Chapters 10.550 or 10.650, Rules of the Auditor General.

The schedule of expenditures should disclose the expenditures by contract number for each contract with the department in effect during the audit period. The financial statements should disclose whether or not the matching requirement was met for each applicable contract. All questioned costs and liabilities due the department shall be fully disclosed in the audit report package with reference to the specific contract number.

## **PART III: REPORT SUBMISSION**

Any reports, management letters, or other information required to be submitted to the department pursuant to this agreement shall be submitted within 180 days after the end of the provider's fiscal year or within 30

days of the recipient's receipt of the audit report, whichever occurs first, directly to each of the following unless otherwise required by Florida Statutes:

- A. Contract manager for this contract (2 copies)
- B. Department of Children & Families ( 1 electronic copy and management letter, if issued )

Office of the Inspector General  
Single Audit Unit  
Building 5, Room 237  
1317 Winewood Boulevard  
Tallahassee, FL 32399-0700

Email address: [single\\_audit@dcf.state.fl.us](mailto:single_audit@dcf.state.fl.us)

- C. Reporting packages for audits conducted in accordance with OMB Circular A-133, as revised, and required by Part I of this agreement shall be submitted, when required by Section .320(d), OMB Circular A-133, as revised, by or on behalf of the recipient directly to the Federal Audit Clearinghouse using the Federal Audit Clearinghouse's Internet Data Entry System at:  
<http://harvester.census.gov/fac/collect/ddeindex.html>  
and other Federal agencies and pass-through entities in accordance with Sections .320(e) and (f), OMB Circular A-133, as revised.
- D. Copies of reporting packages required by Part II of this agreement shall be submitted by or on behalf of the recipient directly to the following address:

Auditor General  
Local Government Audits/342  
Claude Pepper Building, Room 401  
111 West Madison Street  
Tallahassee, Florida 32399-1450

Email address: [flaudgen\\_localgovt@aud.state.fl.us](mailto:flaudgen_localgovt@aud.state.fl.us)

Providers, when submitting audit report packages to the department for audits done in accordance with OMB Circular A-133 or Chapters 10.550 (local governmental entities) or 10.650 (nonprofit or for-profit organizations), Rules of the Auditor General, should include, when available, correspondence from the auditor indicating the date the audit report package was delivered to them. When such correspondence is not available, the date that the audit report package was delivered by the auditor to the provider must be indicated in correspondence submitted to the department in accordance with Chapter 10.558(3) or Chapter 10.657(2), Rules of the Auditor General.

#### **PART IV: RECORD RETENTION**

The recipient shall retain sufficient records demonstrating its compliance with the terms of this agreement for a period of six years from the date the audit report is issued and shall allow the department or its designee, Chief Financial Officer or Auditor General access to such records upon request. The recipient shall ensure that audit working papers are made available to the department or its designee, Chief Financial Officer or Auditor General upon request for a period of three years from the date the audit report is issued, unless extended in writing by the department.