

AGREEMENT FOR SERVICES #889-PHD0909  
AMENDMENT I

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This Amendment I to that Agreement for Services #889-PHD0909, made and entered into by and between the County of El Dorado, a political subdivision of the State of California (hereinafter referred to as "County") and Sierra Foothills AIDS Foundation, Inc., whose Agent for Service of Process is Susan Farrington, 12183 Locksley Lane, Suite 208, Auburn, CA 95602, (hereinafter referred to as "Contractor").

**RECITALS**

**WHEREAS**, Contractor has been engaged by County to provide case management services for individuals and families in the County, in accordance with Agreement for Services #889-PHD0909, dated December 10, 2009, incorporated herein and made by reference a part hereof; and

**WHEREAS**, January 14, 2009, Amendment 3 to the Ryan White Funding Agreement between County of El Dorado and Sacramento County (hereinafter referred to as "Grantor") increased funding for services, resulting in County of El Dorado submitting an amended work plan and budget for contracted case management services; and

**WHEREAS**, the amended work plan and budget submitted to Grantor for contracted case management services was approved by the Grantor, allowing County to increase the not-to-exceed amount of that Agreement for Services 889-PHD0909 with Contractor from \$97,212 to \$101,402; and

**WHEREAS**, Contractor, working in good faith with County, provided an additional 1,769 units of service to clients, as shown on the County of Sacramento Department of Health and Human Services "Contract Analysis Report DHHS-CARE System, March 2009 to February 2010" available upon request and incorporated by reference as if fully set forth herein; and

**WHEREAS**, the parties hereto have mutually agreed to increase the not-to-exceed amount of the original Agreement, amending **Article III – Compensation for Services**, and have mutually agreed to amend and replace **Exhibits B and C** of said Agreement;

**NOW THEREFORE**, the parties do hereby agree that Agreement for Services #889-PHD0909 shall be amended a first time as follows:

1. Article III shall be amended in its entirety to read as follows:

**Article III. COMPENSATION FOR SERVICES**

Compensation for Ryan White Part A CARE services shall not exceed \$101,402 for the entire term of this Agreement, July 1, 2009 through March 31, 2010 (see Exhibit B (Amendment I) – Budget Summary and Budget Narrative and Exhibit C (Amendment I) – Units of Service Summary attached hereto and incorporated by reference herein). Adjustments between line items shown in Exhibit B (Amended) – Budget Summary shall be allowed when agreed to in writing between Contractor and the County Contract Administrator.

Payment for services rendered shall be in arrears and based on the increased units of service reimbursement rate shown on Exhibit C (Amendment I) – Unit of Service Summary.

2. Exhibit B – Budget Summary and Narrative Budget Summary shall be replaced in its entirety by Exhibit B (Amendment I) – Budget Summary and Budget Narrative, attached hereto and incorporated by reference herein.

3. Amended Exhibit C – Units of Service Summary shall be replaced in its entirety by Exhibit C (Amendment I) – Units of Service Summary, attached hereto and incorporated by reference herein.

Except as herein amended, all other parts and sections of that Agreement #889-PHD0909 shall remain unchanged and in full force and effect.

**Requesting Contract Administrator Concurrence:**

By: Michael Ungeheuer Dated: 8/31/12  
Michael Ungeheuer, RN, MN, PHN, Community Public Health Nursing Manager  
Health and Human Services Agency

**Requesting Department Head Concurrence:**

By: Daniel Nielson Dated: 9-4-2012  
Daniel Nielson, M.P.A.  
Director  
Health and Human Services Agency

**IN WITNESS WHEREOF**, the parties hereto have executed this First Amendment to that Agreement for Services 889-PHD0909 on the dates indicated below.

**-- COUNTY OF EL DORADO --**

Dated: \_\_\_\_\_

By: \_\_\_\_\_

John R. Knight, Chair  
Board of Supervisors  
"County"

ATTEST:  
Terri Daly, Acting Clerk  
of the Board of Supervisors

By: \_\_\_\_\_  
Deputy Clerk

Dated: \_\_\_\_\_

**-- CONTRACTOR --**

**SIERRA FOOTHILLS AIDS FOUNDATION  
A CALIFORNIA CORPORATION**

By:   
Susan Farrington, Executive Director  
"Contractor"

Dated: 9-10-12

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Exhibit B (Amendment I)  
 Budget Summary  
 Ryan White CARE Act  
 Sierra Foothills AIDS Foundation  
 July 1, 2009 through February 28, 2010

	<b>Maximum Allowed</b>
	<b>7/1/09 through 02/28/2010</b>
<b><u>Personnel:</u></b>	
Executive Director (.2 FTE)	\$8,900
Case Manager: (1.0 FTE)	24,330
Bookkeeper: (.3 FTE)	8,340
Case Aid/Administrative Assistant: (.5 FTE)	11,400
Subtotal Personnel:	\$52,970
Benefits:	14,037
<b>Total Personnel Costs:</b>	<b>\$67,007</b>
 <b><u>Operating Expenses:</u></b>	
Rent & Utilities	\$9,475
Communications	3,360
Travel	2,760
Office Supplies	1,800
Postage & Photocopying	960
Insurance	935
Computer/Office Equipment & Maintenance	0
Staff Volunteer Training/Development	0
Audit Fee	2,920
<b>Total Operating Costs</b>	<b>\$22,210</b>
<b>Total Case Management Costs</b>	<b>\$89,217</b>
 <b><u>Client Financial Aid</u></b>	
Ambulatory Medical Care	\$2,450
Mental Health / Counseling	570
Oral Health Care	620
Transportation	1,725
Emergency Financial Assistance	6,820
<b>Total Client Financial Aid</b>	<b>\$12,185</b>
<b>TOTAL Sierra Foothills AIDS Foundation CARE Act Budget:</b>	<b>\$101,402</b>

Exhibit B (Amendment I)  
 Budget Narrative  
 Ryan White CARE Act  
 Sierra Foothills AIDS Foundation  
 July 1, 2009 through February 28, 2010

**Case Management Services (Includes both office-based and field-based services)** **\$89,217**

**Office-Based Case Management:** This sub-category applies to the delivery of Case Management services in a traditional office setting established as the contractor's regular place of business.

**Field-Based Case Management:** This sub-category applies to the delivery of Case Management services in non-traditional settings such as at the home of the client, at homeless shelters, or other where clients may be temporarily located.

**Personnel:**

<b><u>Executive Director (.2 FTE)</u></b>	<b>\$8,900</b>
Overall management of the CARE program, responsible for all operations of the program and supervision of all staff. In addition provides back up for case management services. Also serves as volunteer coordinator responsible for recruiting, training and supervision of all volunteers.	
<b><u>Case Manager: (1.0 FTE)</u></b>	<b>\$24,330</b>
Provides comprehensive case management services including intake and assessment, development of service plan, service plan monitoring, information and referral and benefits counseling.	
<b><u>Bookkeeper: (.33 FTE)</u></b>	<b>\$8,340</b>
Responsible for accounts payable and receivable, invoicing, payroll and data entry.	
<b><u>Case Aid/Administrative Assistant: (.5 FTE)</u></b>	<b>\$11,400</b>
Responsible for non professional assistance in carrying out tasks of case management services, clerical support, data entry, reception.	
<b><u>Subtotal Personnel:</u></b>	<b>\$52,970</b>
<b><u>Benefits</u></b>	<b>\$14,037</b>
<b><u>Total Personnel Costs:</u></b>	<b><u>\$67,007</u></b>

**Operating Expenses:**

<b><u>Rent &amp; Utilities</u></b>	<b>\$9,475</b>
Office space and utilities needed to provide for service and administrative needs.	
<b><u>Communications</u></b>	<b>\$3,360</b>
Phone, Internet, Fax services needed to provide for service needs.	
<b><u>Travel</u></b>	<b>\$2,760</b>
Mileage and related travel costs of providing services and as needed to meet administrative needs.	

**Budget Narrative, Cont.**

<u>Office Supplies</u>	<b>\$1,800</b>
Consumable supplies needed to provide for services and administrative needs	
<u>Postage &amp; Photocopying</u>	<b>\$960</b>
Postage and photocopying costs needed to provide for services and administrative needs	
<u>Insurance</u>	<b>\$935</b>
Insurance required as per contract.	
<u>Computer/Office Equipment &amp; Maintenance</u>	<b>\$0</b>
Maintenance and replacement of equipment as needed to provide for services and administrative needs	
<u>Staff Volunteer Training/Development</u>	<b>\$0</b>
Staff development and training costs as needed to maintain professional competency.	
<u>Audit Fee</u>	<b>\$2,920</b>
Audit as required per contract.	
<b><u>Total Operating Costs</u></b>	<b><u>\$22,210</u></b>

**Ambulatory Care** **\$2,450**

Services funded under this category include the provision of professional, diagnostic, and therapeutic services rendered by a physician, physician's assistant, clinical nurse specialist or nurse practitioner in an outpatient, community-based and/or office-based facility that is appropriately licensed to provide such services. These services include diagnostic testing, early intervention and risk assessment, preventive care and screening, practitioner examination, documenting medical history, diagnosis and treatment of common physical and mental conditions, prescribing and managing medication therapy, care of minor injuries, education and counseling on health and nutritional issues, minor surgery and assisting in surgery, well-baby care, continuing care and management of chronic conditions, and referral to and provision of specialty care. Primary Medical Care for the Treatment of HIV Infection includes provisions of care that is consistent with Public Health Service Guidelines. Such care must include access to antiretrovirals and other drug therapies, including prophylaxis and treatment of opportunistic infections and combination antiretroviral therapies.

**Emergency Financial Assistance** **\$6,820**

**(Includes Food Vouchers, Other Critical Need and Medications)**

Direct emergency financial assistance for food vouchers and provision of medications not covered by the AIDS Drug Assistance Program (ADAP) or any other payer source as prescribed by the primary care physician or psychiatrist of an HIV/AIDS client for conditions (HIV/AIDS, related or not) which negatively impact the client's health and well-being.

**Budget Narrative, Cont.**

**Mental Health Services**

**\$570**

Services funded under this category include psychological and psychiatric treatment and counseling services, from an organization licensed or authorized within the State of California to provide mental health services by mental health professionals including psychiatrists, psychologists, social workers, and counselors.

**Oral Health Care**

**\$620**

Services funded under this category include diagnostic, prophylactic and therapeutic services rendered by dentists, dental hygienists, dental assistants and other appropriately licensed or certified professional practitioners.

**Transportation**

**\$1,725**

Conveyance services provided to a client in order to access health care or psychosocial support services. May be provided routinely or on an emergency basis via a voucher program, bus passes, volunteer-based transportation services.

**Total Services**

**\$12,185**

**Total Budget for Sierra Foothills AIDS Foundation**

**\$101,402**

**EXHIBIT C (Amendment I)**  
**SIERRA FOOTHILLS AIDS FOUNDATION**  
**UNITS OF SERVICE SUMMARY**  
**FY 2009-2010 (July 1, 2009 through February 28, 2010)**

SERVICE PRIORITY	Service Code	Units of Service Description	Estimated Quantity		Unit Cost	Total Funding Requested
			# of UDC	# of Units		
<b>Ambulatory Medical Care</b>						
	01008	Primary care visit w/HCP	17	2100	1 unit = 1 vendor paid dollar	\$2,100.00
	01009	Specialty care visit w/HCP	0	0	1 unit = 1 vendor paid dollar	\$0.00
	010010	Laboratory services	3	350	1 unit = 1 vendor paid dollar	\$350.00
<b>Case Management</b>						
	14020	1 15 minute field based face to face encounter	63	3318	1 unit = a 15 minute encounter	\$48,000.00
	14021	1 15 minute field based other encounter	77	2778	1 unit = a 15 minute encounter	\$41,217.00
<b>Oral Care</b>						
	02002	1 dental care visit	2	620	1 unit = 1 vendor paid dollar	\$620.00
<b>Mental Health/Counseling</b>						
	03045	Adult individual-psychological	1	570	1 unit = 1 vendor paid encounter	\$570.00
<b>Transportation</b>						
	11025	Client/family transportation	32	1725	1 unit = 1 vendor paid dollar	\$1,725.00
<b>Other Critical Need</b>						
	11029	Emergency Financial Assistance	43	6820	1 unit = 1 vendor paid dollar	\$6,820.00

**TOTAL EXPENDITURE**

**\$101,402.00**