THIRD AMENDMENT TO AGREEMENT FOR PROVISION OF 1 HIV CARE SERVICES 2 3 **BETWEEN COUNTY OF ORANGE** 4 AND 5 AIDS SERVICES FOUNDATION ORANGE COUNTY 6 7 MARCH 1, 2016 THROUGH FEBRUARY 28, 2019 8 9

THIS THIRD AMENDMENT TO AGREEMENT entered into the 1st day of November, 2017 (effective date), is by and between the COUNTY OF ORANGE (COUNTY), and AIDS Services Foundation Orange County, a California nonprofit corporation (CONTRACTOR), whereby the Parties agree to amend that certain Agreement for the provision of HIV Care Services dated March 1, 2016 (Agreement). COUNTY and CONTRACTOR may sometimes be referred to herein individually as "Party" or collectively as "Parties." The Original Agreement, the First Amendment, the Second Amendment and this Third Amendment are and shall continue to be administered by the County of Orange Health Care Agency (ADMINISTRATOR).

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WITNESSETH:

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WHEREAS, on January 26, 2016, COUNTY authorized the Agreement with CONTRACTOR for the provision of HIV Care Services for the period March 1, 2016 through February 28, 2019 in the amount of \$6,091,170; and

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WHEREAS, on January 26, 2016, the Board of Supervisors authorized ADMINISTRATOR to increase the Agreement by an amount not to exceed a total of 10% of the Period One funding for the Agreement; and

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WHEREAS, on October 1, 2016, after approval of the Orange County HIV Planning Council, ADMINISTRATOR through a First Amendment, authorized an increase of \$78,705, for Period One revising the Period One amount from \$2,030,390 to \$2,109,095, for a revised total Maximum Obligation of \$6,169,875; and

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WHEREAS, on October 12, 2016 and December 14, 2016, after approval of the Orange County HIV Planning Council, ADMINISTRATOR through a Second Amendment, authorized an additional increase of \$123,376 for Period One by exercising partial contingency balance due to identified service needs and CONTRACTOR picking up additional clients transitioning from another program, further modifying the Period One amount from \$2,109,095 to \$2,232,471 for a revised total Maximum Obligation of \$6,293,251; and

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WHEREAS, COUNTY now desires to amend the Agreement with CONTRACTOR to increase the

36 37 | maximum obligation for Period Two by \$292,435 from \$2,030,390 to \$2,322,825 and Period Three by

HCA ASR 17-000898 Page 1 of 33 \$292,435 based on an increase in the Ryan White Part A allocation for Period Two and additional funding from the City of Anaheim for Food Pantry, and increase the maximum obligation for Period Three by \$292,345 from \$2,030,390 to \$2,322,825 based upon the anticipated funding for Period Three, for a revised total maximum obligation of \$6,878,121; and

WHEREAS, CONTRACTOR desires to accept the additional funding and agrees to provide increased or additional services pursuant to the terms and conditions of the original Agreement and scope of work:

NOW, THEREFORE, in consideration of the mutual covenants, benefits, and promises contained herein, COUNTY and CONTRACTOR do hereby agree as follows:

1. Page 4, lines 8-11 of the Agreement are amended to read as follows:

"Maximum Obligation:

Period One Maximum Obligation: \$2,232,471
Period Two Maximum Obligation: 2,322,825
Period Three Maximum Obligation: 2,322,825
TOTAL MAXIMUM OBLIGATION: \$6,878,121"

2. Paragraph II. of Exhibit A to the Agreement is amended to read as follows:

"II. BUDGET

- A. The following Budget is set forth for informational purposes only.
- B. Line item budgets for Medical Transportation shall be used to purchase bus passes and ACCESS coupons only. Budgets for Medical Transportation may not be exceeded without prior ADMINISTRATOR approval.
 - 1. Medical Case Management (Medical Retention) Services

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1	ADMINISTRATIVE COSTS	PERIOD ONE	PERIOD TWO	PERIOD THREE
2	Salaries	\$ 36,412	\$ 34,976	\$ 34,976
3	Benefits	7,377	6,094	6,094
4	Operating Expenses			
5	Services and Supplies	9,227	8,930	8,930
6	SUBTOTAL	\$ 53,016	\$ 50,000	\$ 50,000
7				
8	DIRECT CARE COSTS			
9	Salaries	\$331,568	\$325,197	\$325,197
10	Benefits	69,743	74,797	74,797
11	Operating Expenses			
12	Services and Supplies	75,842	50,006	50,006
13	SUBTOTAL	\$477,153	\$450,000	\$450,000
14				
15	TOTAL COST	\$530,169	\$500,000	\$500,000
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17	2. Medical Case Managemen	t (Linkage to Care) Se	ervices	
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19	ADMINISTRATIVE COSTS	PERIOD ONE	PERIOD TWO	PERIOD THREE
20	Salaries	\$ 2,723	\$ 1,938	\$ 1,938
21	Benefits	681	466	466
22	Operating Expenses			
23	Services and Supplies	<u>2,596</u>	<u>2,596</u>	<u>2,596</u>
24	SUBTOTAL	\$ 6,000	\$ 5,000	\$ 5,000
25				
26	DIRECT CARE COSTS			
27	Salaries	\$36,120	\$23,736	\$23,736
28	Benefits	8,669	5,339	5,339
29	Operating Expenses			
30	Services and Supplies	9,212	15,925	<u> 15,925</u>
31	SUBTOTAL	\$54,001	\$45,000	\$45,000
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33	TOTAL COST	\$60,001	\$50,000	\$50,000
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 $X: \c Contracts - 2016 - \c 2016-2019 \c Phiase fiv care services third amendment fy 16-19-lm. Doc alds service Foundation Orange County$

1	3. Medical Case Managemen	nt (Medical Retention)) Services – MAI	
2				
3	ADMINISTRATIVE COSTS	PERIOD ONE	PERIOD TWO	PERIOD THREE
4	Salaries	\$ 3,424	\$ 3,023	\$ 3,023
5	Benefits	822	536	536
6	Operating Expenses			
7	Services and Supplies	1,001	441	441
8	SUBTOTAL	\$ 5,247	\$ 4,000	\$ 4,000
9				
10	DIRECT CARE COSTS			
11	Salaries	\$29,693	\$23,945	\$23,945
12	Benefits	6,936	5,483	5,483
13	Operating Expenses			
14	Services and Supplies	10,601	6,572	6,572
15	SUBTOTAL	\$47,230	\$36,000	\$36,000
16				
17	TOTAL COST	\$52,477	\$40,000	\$40,000
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19	4 Madical Casa Managamar	at (Linkaga ta Cara) S	orvious MAI	
19	4. Medical Case Management	it (Linkage to Care) S	elvices – MAI	
20	4. Medical Case Managemen	it (Linkage to Care) S	ervices – MAI	
	ADMINISTRATIVE COSTS	PERIOD ONE	PERIOD TWO	PERIOD THREE
20		- -		PERIOD THREE 8,215
20 21	ADMINISTRATIVE COSTS	PERIOD ONE	PERIOD TWO	
20 21 22	ADMINISTRATIVE COSTS Salaries	<u>PERIOD ONE</u> \$ 8,399	PERIOD TWO 8,215	8,215
20 21 22 23	ADMINISTRATIVE COSTS Salaries Benefits	<u>PERIOD ONE</u> \$ 8,399	PERIOD TWO 8,215	8,215
20 21 22 23 24	ADMINISTRATIVE COSTS Salaries Benefits Operating Expenses	<u>PERIOD ONE</u> \$ 8,399 1,779	PERIOD TWO 8,215 1,972	8,215 1,972
20 21 22 23 24 25	ADMINISTRATIVE COSTS Salaries Benefits Operating Expenses Services and Supplies	PERIOD ONE \$ 8,399 1,779	PERIOD TWO 8,215 1,972 1,167	8,215 1,972
20 21 22 23 24 25 26	ADMINISTRATIVE COSTS Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL	PERIOD ONE \$ 8,399 1,779	PERIOD TWO 8,215 1,972 1,167	8,215 1,972
20 21 22 23 24 25 26 27	ADMINISTRATIVE COSTS Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS	PERIOD ONE \$ 8,399 1,779 673 \$ 10,851	PERIOD TWO 8,215 1,972 1,167 \$ 11,354	8,215 1,972 1,167 \$ 11,354
20 21 22 23 24 25 26 27 28	ADMINISTRATIVE COSTS Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries	PERIOD ONE \$ 8,399 1,779 673 \$ 10,851 \$ 61,863	PERIOD TWO 8,215 1,972 1,167 \$ 11,354 \$ 72,468	8,215 1,972 1,167 \$ 11,354 \$ 72,468
20 21 22 23 24 25 26 27 28 29	ADMINISTRATIVE COSTS Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits	PERIOD ONE \$ 8,399 1,779 673 \$ 10,851 \$ 61,863	PERIOD TWO 8,215 1,972 1,167 \$ 11,354 \$ 72,468	8,215 1,972 1,167 \$ 11,354 \$ 72,468
20 21 22 23 24 25 26 27 28 29 30	ADMINISTRATIVE COSTS Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits Operating Expenses	PERIOD ONE \$ 8,399 1,779 673 \$ 10,851 \$ 61,863 17,495	9ERIOD TWO 8,215 1,972 1,167 \$ 11,354 \$ 72,468 18,753	8,215 1,972 1,167 \$ 11,354 \$ 72,468 18,753
20 21 22 23 24 25 26 27 28 29 30 31	ADMINISTRATIVE COSTS Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits Operating Expenses Services and Supplies	PERIOD ONE \$ 8,399 1,779	9ERIOD TWO 8,215 1,972 1,167 \$ 11,354 \$ 72,468 18,753	8,215 1,972 1,167 \$ 11,354 \$ 72,468 18,753
20 21 22 23 24 25 26 27 28 29 30 31 32	ADMINISTRATIVE COSTS Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits Operating Expenses Services and Supplies	PERIOD ONE \$ 8,399 1,779	9ERIOD TWO 8,215 1,972 1,167 \$ 11,354 \$ 72,468 18,753	8,215 1,972 1,167 \$ 11,354 \$ 72,468 18,753
20 21 22 23 24 25 26 27 28 29 30 31 32 33	ADMINISTRATIVE COSTS Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL	PERIOD ONE \$ 8,399 1,779 673 \$ 10,851 \$ 61,863 17,495 18,305 \$ 97,663	9ERIOD TWO 8,215 1,972 1,167 \$ 11,354 \$ 72,468 18,753 10,968 \$102,189	8,215 1,972 1,167 \$ 11,354 \$ 72,468 18,753 10,968 \$102,189
20 21 22 23 24 25 26 27 28 29 30 31 32 33 34	ADMINISTRATIVE COSTS Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL	PERIOD ONE \$ 8,399 1,779 673 \$ 10,851 \$ 61,863 17,495 18,305 \$ 97,663	9ERIOD TWO 8,215 1,972 1,167 \$ 11,354 \$ 72,468 18,753 10,968 \$102,189	8,215 1,972 1,167 \$ 11,354 \$ 72,468 18,753 10,968 \$102,189

 $X: \c Contracts - 2016 - \c 2016-2019 \c Phiase fiv Care services third amendment fy 16-19-lm. Doc alds service Foundation Orange County$

1	5. Non-Medical Case Manag	gement (Client Suppor	t) Services	
2				
3	ADMINISTRATIVE COSTS	PERIOD ONE	PERIOD TWO	PERIOD THREE
4	Salaries	\$ 8,449	\$ 8,936	\$ 8,936
5	Benefits	2,026	2,143	2,143
6	Operating Expenses			
7	Services and Supplies	2,505	1,921	1,921
8	SUBTOTAL	\$ 12,980	\$ 13,000	\$ 13,000
9				
10	DIRECT CARE COSTS			
11	Salaries	\$ 76,689	\$ 77,960	\$ 77,960
12	Benefits	15,632	17,929	17,929
13	Operating Expenses			
14	Services and Supplies	24,503	21,111	21,111
15	SUBTOTAL	\$116,824	\$117,000	\$117,000
16				
17	TOTAL COST	\$129,804	\$130,000	\$130,000
18				
19	6. Non-Medical Case Manag	gement (Client Suppor	t) Services – MAI	
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20				
20 21	ADMINISTRATIVE COSTS	PERIOD ONE	PERIOD TWO	PERIOD THREE
	ADMINISTRATIVE COSTS Salaries	<u>PERIOD ONE</u> \$ 2,123	<u>PERIOD TWO</u> \$ 3,692	PERIOD THREE \$ 3,692
21				·
21 22	Salaries	\$ 2,123	\$ 3,692	\$ 3,692
21 22 23	Salaries Benefits	\$ 2,123	\$ 3,692	\$ 3,692
21 22 23 24	Salaries Benefits Operating Expenses	\$ 2,123 509	\$ 3,692 661	\$ 3,692 661
21 22 23 24 25	Salaries Benefits Operating Expenses Services and Supplies	\$ 2,123 509 554	\$ 3,692 661 <u>647</u>	\$ 3,692 661
21 22 23 24 25 26	Salaries Benefits Operating Expenses Services and Supplies	\$ 2,123 509 554	\$ 3,692 661 <u>647</u>	\$ 3,692 661
21 22 23 24 25 26 27	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL	\$ 2,123 509 554	\$ 3,692 661 <u>647</u>	\$ 3,692 661
21 22 23 24 25 26 27 28	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS	\$ 2,123 509 <u>554</u> \$ 3,186	\$ 3,692 661 $\frac{647}{$ 5,000}$	\$ 3,692 661 $\frac{647}{$ 5,000}$
21 22 23 24 25 26 27 28 29	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries	\$ 2,123 509 554 \$ 3,186	\$ 3,692 661 $\frac{647}{$ 5,000}$	\$ 3,692 661 $\frac{647}{$ 5,000}$
21 22 23 24 25 26 27 28 29 30	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits	\$ 2,123 509 554 \$ 3,186	\$ 3,692 661 $\frac{647}{$ 5,000}$	\$ 3,692 661 $\frac{647}{$ 5,000}$
21 22 23 24 25 26 27 28 29 30 31	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits Operating Expenses	\$ 2,123 509	\$ 3,692 661	\$ 3,692 661
21 22 23 24 25 26 27 28 29 30 31 32	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits Operating Expenses Services and Supplies	\$ 2,123 509 <u>554</u> \$ 3,186 \$18,886 4,004 <u>5,785</u>	\$ 3,692 661	\$ 3,692 661
21 22 23 24 25 26 27 28 29 30 31 32 33	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits Operating Expenses Services and Supplies	\$ 2,123 509 <u>554</u> \$ 3,186 \$18,886 4,004 <u>5,785</u>	\$ 3,692 661	\$ 3,692 661
21 22 23 24 25 26 27 28 29 30 31 32 33 34	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL	\$ 2,123 509 <u>554</u> \$ 3,186 \$18,886 4,004 <u>5,785</u> \$28,675	\$ 3,692 661 <u>647</u> \$ 5,000 \$29,819 6,008 <u>9,173</u> \$45,000	\$ 3,692 661 <u>647</u> \$ 5,000 \$29,819 6,008 <u>9,173</u> \$45,000

 $X: \c Contracts - 2016 - \c 2016-2019 \c Phiase fiv Care services third amendment fy 16-19-lm. Doc alds service Foundation Orange County$

1	7. Non-Medical Case Manag	gement (Client Advoca	acy) Services	
2				
3	ADMINISTRATIVE COSTS	PERIOD ONE	PERIOD TWO	PERIOD THREE
4	Salaries	\$ 6,777	\$ 6,223	\$ 6,223
5	Benefits	1,626	1,075	1,075
6	Operating Expenses			
7	Services and Supplies	965	702	702
8	SUBTOTAL	\$ 9,368	\$ 8,000	\$ 8,000
9				
10	DIRECT CARE COSTS			
11	Salaries	\$52,901	\$44,753	\$44,753
12	Benefits	12,167	11,696	11,696
13	Operating Expenses			
14	Services and Supplies	19,244	15,551	15,551
15	SUBTOTAL	\$84,312	\$72,000	\$72,000
16				
17	TOTAL COST	\$93,680	\$80,000	\$80,000
18				
19	7. Non-Medical Case Manag	gement (Client Advoca	acy) Services – MAI	
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20 21	ADMINISTRATIVE COSTS	PERIOD ONE	PERIOD TWO	PERIOD THREE
- 11	ADMINISTRATIVE COSTS Salaries	PERIOD ONE \$0	PERIOD TWO \$ 179	PERIOD THREE \$ 179
21		·		·
21 22	Salaries	\$0	\$ 179	\$ 179
21 22 23	Salaries Benefits	\$0 0	\$ 179	\$ 179
21 22 23 24	Salaries Benefits Operating Expenses	\$0	\$ 179 31	\$ 179 31
21 22 23 24 25	Salaries Benefits Operating Expenses Services and Supplies	\$0 0	\$ 179 31 <u>20</u>	\$ 179 31 <u>20</u>
21 22 23 24 25 26	Salaries Benefits Operating Expenses Services and Supplies	\$0 0	\$ 179 31 <u>20</u>	\$ 179 31 <u>20</u>
21 22 23 24 25 26 27	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL	\$0 0	\$ 179 31 <u>20</u>	\$ 179 31 <u>20</u>
21 22 23 24 25 26 27 28	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS	\$0 0 \$0	\$ 179 31 $\frac{20}{$230}$	\$ 179 31
21 22 23 24 25 26 27 28 29	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries	\$0 0 \$0 \$0	\$ 179 31 \(\frac{20}{\$ 230} \)	\$ 179 31 \(\frac{20}{\$ 230} \)
21 22 23 24 25 26 27 28 29 30	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits	\$0 0 \$0 \$0 \$0	\$ 179 31 \(\frac{20}{\$ 230} \)	\$ 179 31 \(\frac{20}{\$ 230} \)
21 22 23 24 25 26 27 28 29 30 31	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits Operating Expenses	\$0 0 \$0 \$0	\$ 179 31 \(\frac{20}{\$ 230} \) \$1,287 336	\$ 179 31 20 \$ 230 \$1,287 336
21 22 23 24 25 26 27 28 29 30 31 32	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits Operating Expenses Services and Supplies	\$0 0 \$0 \$0 \$0 0	\$ 179 31 20 \$ 230 \$1,287 336 447	\$ 179 31 20 \$ 230 \$1,287 336 447
21 22 23 24 25 26 27 28 29 30 31 32 33	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits Operating Expenses Services and Supplies	\$0 0 \$0 \$0 \$0 0	\$ 179 31 20 \$ 230 \$1,287 336 447	\$ 179 31 20 \$ 230 \$1,287 336 447
21 22 23 24 25 26 27 28 29 30 31 32 33 34 35	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL	\$0 0 \$0 \$0 \$0 0 0	\$ 179 31 20 \$ 230 \$1,287 336 447 \$2,070	\$ 179 31 20 \$ 230 \$1,287 336 447 \$2,070

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1	8. Non-Medical Case Manag	gement (Benefits Cour	nseling) Services	
2				
3	ADMINISTRATIVE COSTS	PERIOD ONE	PERIOD TWO	PERIOD THREE
4	Salaries	\$ 5,186	\$ 5,186	\$ 5,186
5	Benefits	1,245	1,245	1,245
6	Operating Expenses			
7	Services and Supplies	806	806	<u>806</u>
8	SUBTOTAL	\$ 7,237	\$ 7,237	\$ 7,237
9				
10	DIRECT CARE COSTS			
11	Salaries	\$44,698	\$44,698	\$44,698
12	Benefits	10,282	10,282	10,282
13	Operating Expenses			
14	Services and Supplies	10,158	10,158	10,158
15	SUBTOTAL	\$65,138	\$65,138	\$65,138
16				
17	TOTAL COST	\$72,375	\$72,375	\$72,375
18				
19	9. Non-Medical Case Manag	gement (Eligibility Sci	reening) Services	
20				
21	ADMINISTRATIVE COSTS	PERIOD ONE	PERIOD TWO	PERIOD THREE
22	Salaries	\$ 12,727	\$ 12,727	\$ 12,727
23	Benefits	3,055	3,055	3,055
24	Operating Expenses			
25	Services and Supplies	1,981	1,981	1,981
26	SUBTOTAL	\$ 17,763	\$ 17,763	\$ 17,763
27				
28	DIRECT CARE COSTS			
29	Salaries	\$106,517	\$106,517	\$106,517
30	Benefits	24,498	24,498	24,498
31	Operating Expenses			
32	Services and Supplies	28,847	28,847	28,847
33	SUBTOTAL	\$159,862	\$159,862	\$159,862
34				
35	TOTAL COST	\$177,625	\$177,625	\$177,625
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1		10. Mental Health – Fe	e-for-Service				
2							
3		DIRECT CARE COSTS	PERIO PERIO	OD ONE	PERIOD TW	O PER	RIOD THREE
4		Mental Health Counseling		\$82,500	\$52,5	500	\$52,500
5		Subcontractor		2,500		<u>500</u>	2,500
6							
7		TOTAL COSTS		\$85,000	\$55,0	000	\$55,000
8							
9		11. Health Insurance	Premium/Cost	Sharing a	and Emergency	Financial	Assistance for
10		Medications					
11							
12		ADMINISTRATIVE COS	TS <u>PERI</u>	OD ONE	PERIOD TW		RIOD THREE
13		Salaries		\$ 7,066	\$ 11,8		\$ 11,866
14		Benefits		1,695	2,1	67	2,167
15		Operating Expenses					
16		Services and Supplies		1,789	<u></u>	<u>)17</u>	2,017
17		SUBTOTAL		\$ 10,550	\$ 16,0)50	\$ 16,050
18							
19		DIRECT CARE COSTS					
20		Operating Expenses					
21		Services and Supplies		\$123,950	\$149,4		<u>\$149,450</u>
22		SUBTOTAL		\$123,950	\$149,4	150	\$149,450
23							
24		TOTAL COSTS		\$134,500	\$165,5	500	\$165,500
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 $X: \c Contracts - 2016 - \c 2016-2019 \c Phiase fiv Care services third amendment fy 16-19-lm. Doc alds service Foundation Orange County$

1	12. Home Health Care and Hom	ne and Community-I	Based Services	
2				
3	ADMINISTRATIVE COSTS	PERIOD ONE	PERIOD TWO	PERIOD THREE
4	Salaries	\$ 3,066	\$ 5,707	\$ 5,707
5	Benefits	1,293	1,049	1,049
6	Operating Expenses			
7	Services and Supplies	1,858	945	<u>945</u>
8	SUBTOTAL	\$ 6,217	\$ 7,701	\$ 7,701
9				
10	DIRECT CARE COSTS			
11	Operating Expenses			
12	Services and Supplies	<u>\$55,961</u>	\$69,310	<u>\$69,310</u>
13	SUBTOTAL	\$55,961	\$69,310	\$69,310
14				
15	TOTAL COSTS	\$62,178	\$77,011	\$77,011
16				
17	13. Medical Nutrition Therapy			
18				
19	ADMINISTRATIVE COSTS	PERIOD ONE	PERIOD TWO	PERIOD THREE
20	Salaries	\$ 8,167	\$ 8,359	\$ 8,359
21	Benefits	1,960	1,533	1,533
22	Operating Expenses			
23	Services and Supplies	<u>373</u>	1,608	1,608
24	SUBTOTAL	\$ 10,500	\$ 11,500	\$ 11,500
25				
26	DIRECT CARE COSTS			
27	Salaries	\$ 72,500	\$ 75,000	\$ 75,000
28	Benefits	17,400	18,000	18,000
29	Operating Expenses			
30	Services and Supplies	4,600	10,500	10,500
31	SUBTOTAL	\$ 94,500	\$103,500	\$103,500
32				
33	TOTAL COSTS	\$105,000	\$115,000	\$115,000
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 $X: \c Contracts - 2016 - \c 2016-2019 \c Phiase fiv Care services third amendment fy 16-19-lm. Doc alds service Foundation Orange County$

1	14. Food Bank			
2				
3	ADMINISTRATIVE COSTS	PERIOD ONE	PERIOD TWO	PERIOD THREE
4	Salaries	\$ 13,278	\$ 17,485	\$ 17,485
5	Benefits	2,636	3,243	3,243
6	Operating Expenses			
7	Services and Supplies	3,004	2,772	<u>2,772</u>
8	SUBTOTAL	\$ 18,918	\$ 23,500	\$ 23,500
9				
10	DIRECT CARE COSTS			
11	Salaries	\$ 44,970	\$ 54,114	\$ 54,114
12	Benefits	10,823	13,250	13,250
13	Operating Expenses			
14 15	Services and Supplies	114,468	144,136	144,136
16	SUBTOTAL	\$170,261	\$211,500	\$211,500
17		Ψ170 ,2 01	4211,000	Ψ211,500
18	TOTAL COSTS	\$189,179	\$235,000	\$235,000
19				
20	15. Nutritional Supplements			
21				
22	A DA COMENTANTO A COME		DEDIOD TIMO	DEDICE MILE
	ADMINISTRATIVE COSTS	<u>PERIOD ONE</u>	PERIOD TWO	PERIOD THREE
23	ADMINISTRATIVE COSTS Salaries	<u>PERIOD ONE</u> \$ 6,941	\$ 6,791	<u>PERIOD THREE</u> \$ 6,791
23 24				
- 11	Salaries	\$ 6,941	\$ 6,791	\$ 6,791
24	Salaries Benefits Operating Expenses Services and Supplies	\$ 6,941 1,407 	\$ 6,791 1,267 1,942	\$ 6,791 1,267 1,942
24 25	Salaries Benefits Operating Expenses	\$ 6,941 1,407	\$ 6,791 1,267	\$ 6,791 1,267
24 25 26	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL	\$ 6,941 1,407 	\$ 6,791 1,267 1,942	\$ 6,791 1,267 1,942
24 25 26 27 28 29	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS	\$ 6,941 1,407 1,366 \$ 9,714	\$ 6,791 1,267	\$ 6,791 1,267
24 25 26 27 28	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries	\$ 6,941 1,407 1,366 \$ 9,714	\$ 6,791 1,267 1,942 \$ 10,000	\$ 6,791 1,267 1,942 \$ 10,000
24 25 26 27 28 29	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits	\$ 6,941 1,407 1,366 \$ 9,714	\$ 6,791 1,267	\$ 6,791 1,267
24 25 26 27 28 29 30 31 32	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits Operating Expenses	\$ 6,941 1,407 1,366 \$ 9,714 \$21,385 5,518	\$ 6,791 1,267 1,942 \$ 10,000 \$23,712 5,690	\$ 6,791 1,267 1,942 \$ 10,000 \$23,712 5,690
24 25 26 27 28 29 30 31 32 33	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits Operating Expenses Services and Supplies	\$ 6,941 1,407 1,366 \$ 9,714 \$21,385 5,518 60,531	\$ 6,791 1,267 1,942 \$ 10,000 \$23,712 5,690 60,598	\$ 6,791 1,267 1,942 \$ 10,000 \$23,712 5,690 60,598
24 25 26 27 28 29 30 31 32 33 34	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits Operating Expenses	\$ 6,941 1,407 1,366 \$ 9,714 \$21,385 5,518	\$ 6,791 1,267 1,942 \$ 10,000 \$23,712 5,690	\$ 6,791 1,267 1,942 \$ 10,000 \$23,712 5,690
24 25 26 27 28 29 30 31 32 33 34 35	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL	\$ 6,941 1,407 1,366 \$ 9,714 \$21,385 5,518 60,531 \$87,434	\$ 6,791 1,267 1,942 \$ 10,000 \$23,712 5,690 60,598 \$90,000	\$ 6,791 1,267 1,942 \$ 10,000 \$23,712 5,690 60,598 \$90,000
24 25 26 27 28 29 30 31 32 33 34	Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL DIRECT CARE COSTS Salaries Benefits Operating Expenses Services and Supplies SUBTOTAL TOTAL COSTS	\$ 6,941 1,407 1,366 \$ 9,714 \$21,385 5,518 60,531	\$ 6,791 1,267 1,942 \$ 10,000 \$23,712 5,690 60,598	\$ 6,791 1,267 1,942 \$ 10,000 \$23,712 5,690 60,598

 $X: \c CONTRACTS - 2016 - \c 2016-2019 \c PH\ASF HIV CARE SERVICES THIRD AMENDMENT FY 16-19-LM.DOC AIDS SERVICE FOUNDATION ORANGE COUNTY$

1	000
3 ADMINISTRATIVE COSTS PERIOD ONE PERIOD TWO PERIOD THE 4 DIRECT CARE COSTS 5 Home Delivered Meals \$25,000 \$15,000 \$15 6 TOTAL COSTS \$25,000 \$15,000 \$15	000
4 DIRECT CARE COSTS 5 Home Delivered Meals \$25,000 \$15,000 \$15 6 TOTAL COSTS \$25,000 \$15,000 \$15	000
6 7 TOTAL COSTS \$25,000 \$15,000 \$15	
7 TOTAL COSTS \$25,000 \$15,000 \$15	000
	000
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9 17. Medical Transportation	
10	
11 ADMINISTRATIVE COSTS <u>PERIOD ONE</u> <u>PERIOD TWO</u> <u>PERIOD THR</u>	<u>EE</u>
12 Salaries \$ 18,977 \$ 23,373 \$ 23.	373
	555
14 Operating Expenses	
	<u>519</u>
16 SUBTOTAL \$ 28,392 \$ 34,447 \$ 34,	447
17	
DIRECT CARE COSTS	
19 Salaries \$101,688 \$119,556 \$119	
20 Benefits 41,464 \$ 34,000 \$ 34.	000
Operating Expenses	160
22 Services and Supplies <u>106,416</u> <u>156,468</u> <u>156</u>	
23 SUBTOTAL \$249,568 \$310,024 \$310.	024
24 25 TOTAL COSTS \$277,960 \$344,471 \$344.	<i>1</i> 71
25 TOTAL COSTS \$277,960 \$344,471 \$344, 26	4/1
26 27 18. TOTAL CONTRACT COSTS \$2,232,471 \$2,322,825 \$2,322,5	225
28 C. CONTRACTOR may request to shift funds between budgeted line items for the purp	
meeting specific program needs by utilizing a Budget/Staffing Modification Request form provi	
30 ADMINISTRATOR. CONTRACTOR shall submit a properly completed Budget/Staffing Modif	•
Request to ADMINISTRATOR for consideration, in advance, which will include a justifi	
32 narrative specifying the purpose of the request, the amount of said funds to be shifted and the sus	
annual impact of the shift as may be applicable to the current contract period and/or future c	_

34 | periods. CONTRACTOR shall obtain written approval of any Budget Staffing Modification Request(s) from ADMINISTRATOR prior to implementation by CONTRACTOR. Failure of CONTRACTOR to obtain written approval from ADMINISTRATOR for proposed Budget/Staffing Modification 37 | Request(s) may result in disallowance of those costs.

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 $X: \contracts - 2016 - \$ AIDS SERVICE FOUNDATION ORANGE COUNTY

- D. CONTRACTOR's administrative costs cannot exceed ten percent (10%) of total costs for each service. Overhead expenses (e.g., rent, utilities, repair and maintenance) are considered administrative costs.
- E. CONTRACTOR's cumulative total costs shall be evaluated monthly and compared to the percent of expected contracted costs at that point in the contract period. If CONTRACTOR's actual costs deviate ten percent (10%), either above or below the target, ADMINISTRATOR may request a written justification and a corrective action plan or request for budget revision.
- F. In the event CONTRACTOR's costs are ten percent (10%) or more below the percent of expected contracted costs; and CONTRACTOR's plan is not acceptable to ADMINISTRATOR, or CONTRACTOR fails to submit a plan within the time period specified by ADMINISTRATOR, ADMINISTRATOR may reduce the Maximum Obligation for the Period as set forth in the Referenced Contract Provisions of this Agreement. ADMINISTRATOR shall notify CONTRACTOR in writing of such reduction.
 - G. Catalog of Federal Domestic Assistance (CFDA) Information
- 1. This Agreement includes federal funds paid to CONTRACTOR. The CFDA number(s) and associated information for federal funds paid through this Agreement are specified below:

CFDA Year: 2017 CFDA No.: 93.914

Program Title: HIV Emergency Relief Project Grants (B)
Federal Agency: Department of Health and Human Services

Award Name: HIV Emergency Relief Projects Grants (B) (Ryan White Part A)

Amount: \$2,297,825 (estimated)

CFDA No. 14.241

Program Title: Housing Opportunities for Persons with AIDS (indirect)

Federal Agency: Department of Housing and Urban Development

Award Name: Housing Opportunities for Persons with AIDS (indirect)

Amount: \$25,000 (estimated)

- 2. CONTRACTOR may be required to have an audit conducted in accordance with 31 USC 7501 7507, as well as its implementing regulations under 2 CFR Part 200. CONTRACTOR shall be responsible for complying with any federal audit requirements within the reporting period specified by 31 USC 7501 7507, as well as its implementing regulations under 2 CFR Part 200.
- 3. ADMINISTRATOR may revise the CFDA information listed above, and shall notify CONTRACTOR in writing of said revisions.
 - H. CONTRACTOR may not use Ryan White Part A funds for:

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- 1. purchase or improve land, or to purchase, construct or permanently improve any building or other facility (other than minor remodeling),
 - 2. cash payments to service recipients,
- 3. development of materials designed to promote or encourage intravenous drug use or sexual activity, whether homosexual or heterosexual,
 - 4. the purchase of vehicles without written Grants Management Officer approval,
- 5. non-targeted marketing or promotions or advertising about HIV services that target the general public,
- 6. broad-scope awareness activities about HIV services that target the general public, outreach activities,
 - 7. outreach activities that have HIV prevention education as their exclusive purpose,
- 8. influencing or attempting to influence members of Congress and other Federal personnel, and
 - 9. foreign travel.
- I. CONTRACTOR and ADMINISTRATOR may mutually agree, in writing, to modify the Budget Paragraph of this Exhibit A to the Agreement."
- 3. Paragraph VIII. of Exhibit A to the Agreement is amended to read as follows:

"II. STAFFING

A. MEDICAL CASE MANAGEMENT (MEDICAL RETENTION) SERVICES

1. CONTRACTOR shall, at a minimum, provide the following paid staff expressed in FTEs, which shall be equal to an average of forty (40) hours worked per week:

ADMINISTRATIVE STAFF	PERIOD ONE FTEs	PERIOD TWO FTEs	PERIOD THREE <u>FTEs</u>
Executive Director	0.0704	0.0489	0.0489
Executive Assistant	0.0704	0.0489	0.0489
HR Generalist		0.0489	0.0489
Director of Finance & Operations	0.0699	0.0554	0.0554
Senior Accountant	0.0699	0. 0554	0. 0554
Staff Accountant	0.0699	0. 0554	0. 0554
Accounting Clerk	0.0699	0. 0554	0. 0554
Data Programmer	0.0699	<u>0. 0554</u>	<u>0. 0554</u>
SUBTOTAL FTEs	0.4903	0.4235	0.4235
//			

PROGRAM ADMINISTRATIVE STAFF			
Senior Director of Programs	0.0020	0.0020	0.0020
SUBTOTAL	0.0020	0.0020	0.0020
DIRECT CARE STAFF			
Senior Director of Programs	0.0999	0.1020	0.1020
Director of Case Management	0.7149	0.7149	0.7149
Nurse Case Manager	1.9420	2.3544	2.3544
Case Management Assistant	0.6447	0.8775	0.8775
Social Worker	2.6562	2.0364	2.0364
Benefit Counselor	0.1371	0.1400	<u>0.1400</u>
SUBTOTAL	6.1948	6.2252	6.2252
TOTAL FTEs	6.6871	6.6507	6.6507

2. CONTRACTOR shall adhere to staffing requirements as stated in Standards of Care for Case Management provided by ADMINISTRATOR.

B. MEDICAL CASE MANAGEMENT (LINKAGE TO CARE) SERVICES

1. CONTRACTOR shall, at a minimum, provide the following paid staff expressed in FTEs, which shall be equal to an average of forty (40) hours worked per week:

ADMINISTRATIVE STAFF	PERIOD ONE	PERIOD TWO	PERIOD THREE
ADMINISTRATIVE STAFF	<u>FTEs</u>	<u>FTEs</u>	<u>FTEs</u>
Executive Director	0.0000	0.0027	0.0027
Executive Assistant	0.0000	0.0027	0.0027
HR Generalist	0.0000	0.0027	0.0027
Director of Finance & Operations	0.0098	0.0031	0.0031
Senior Accountant	0.0098	0.0031	0.0031
Staff Accountant	0.0098	0.0031	0.0031
Accounting Clerk	0.0098	0.0031	0.0031
Data Programmer	0.0098	0.0031	0.0031
SUBTOTAL	0.0490	0.0236	0.0236
//			

1	PROGRAM ADMINISTRATIVE			
2	STAFF			
3	Senior Director of Programs	0.0000	0.0005	0.0005
4	SUBTOTAL	0.0000	0.0005	0.0005
5				
6	DIRECT CARE STAFF			
7	DIRECT CARE STAFT			
8	Senior Director of Programs	0.0260	0.0260	0.0260
9	Director of Case Management	0.0052	0.0052	0.0052
10	Linkage to Care Social Worker	1.0075	0.5075	0.5075
11	SUBTOTAL	1.0387	0.5387	0.5387
12				
13	TOTAL FTEs	1.0877	0.5628	0.5628
14				

- 2. CONTRACTOR shall adhere to staffing requirements as stated in Standards of Care for Case Management provided by ADMINISTRATOR.
 - C. MEDICAL CASE MANAGEMENT (MEDICAL RETENTION) SERVICES MAI
- 1. CONTRACTOR shall, at a minimum, provide the following paid staff expressed in FTEs, which shall be equal to an average of forty (40) hours worked per week:

PERIOD ONE	PERIOD TWO	PERIOD THREE
<u>FTEs</u>	<u>FTEs</u>	<u>FTEs</u>
0.0247	0.0267	0.0267
0.0000	0.0267	0.0267
0.0000	0.0267	0.0267
0.0008	0.0302	0.0302
0.0008	0.0302	0.0302
0.0008	0.0302	0.0302
0.0008	0.0302	0.0302
0.0008	0.0302	0.0302
0.0287	0.2311	0.2311
0.0008	0.0020	0.0020
0.0008	0.0020	0.0020
	FTEs 0.0247 0.0000 0.0000 0.0008 0.0008 0.0008 0.0008 0.0287	FTEs FTEs 0.0247 0.0267 0.0000 0.0267 0.0008 0.0302 0.0008 0.0302 0.0008 0.0302 0.0008 0.0302 0.0008 0.0302 0.0287 0.2311

DIRECT CARE STAFF			
Senior Director of Programs	0.0337	0.0121	0.0121
Director of Case Management	0.0361	0.0022	0.0022
Nurse Case Manager	0.1952	0.1423	0.1423
Case Management Assistant	0.0377	0.0525	0.0525
Social Worker	<u>0.1684</u>	0.2351	0.2351
SUBTOTAL FTEs	0.4711	0.4442	0.4442
TOTAL FTEs	0.5006	0.6773	0.6773

2. CONTRACTOR shall adhere to staffing requirements as stated in Standards of Care for Case Management provided by ADMINISTRATOR.

D. MEDICAL CASE MANAGEMENT (LINKAGE TO CARE) SERVICES - MAI

1. CONTRACTOR shall, at a minimum, provide the following paid staff expressed in FTEs, which shall be equal to an average of forty (40) hours worked per week:

ADMINISTRATIVE STAFF	PERIOD ONE FTEs	PERIOD TWO FTEs	PERIOD THREE FTEs
Executive Director	0.0475	0.0109	0.0109
Executive Assistant	0.0433	0.0109	0.0109
HR Generalist	0.0000	0.0109	0.0109
Director of Finance & Operations	0.0016	0.0124	0.0124
Senior Accountant	0.0016	0.0124	0.0124
Staff Accountant	0.0016	0.0124	0.0124
Accounting Clerk	0.0016	0.0124	0.0124
Data Programmer	<u>0.0016</u>	0.0124	0.0124
SUBTOTAL FTEs	0.0988	0.0947	0.0947
PROGRAM ADMINISTRATIVE			
STAFF			
Senior Director of Programs	0.0012	0.0012	<u>0.0012</u>
SUBTOTAL	0.0012	0.0012	0.0012
DIRECT CARE STAFF			
Senior Director of Programs	0.0706	0.0213	0.0213
Director of Case Management	0.0609	0.0477	0.0477
Linkage to Care Social Worker	0.3365	1.5075	1.5075
Nurse Case Manager	0.3120	0.0000	0.0000

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Case Management Assistant	0.0602	0.0000	0.0000
Social Worker	0.2693	0.0000	0.0000
SUBTOTAL	1.1095	1.5765	1.5765
TOTAL FTEs	1.2095	1.6724	1.6724

2. CONTRACTOR shall adhere to staffing requirements as stated in Standards of Care for Case Management provided by ADMINISTRATOR.

E. NON-MEDICAL CASE MANAGEMENT (CLIENT SUPPORT) SERVICES - CONTRACTOR shall, at a minimum, provide the following paid staff expressed in FTEs, which shall be equal to an average of forty (40) hours worked per week:

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13	ADMINISTRATIVE STAFF	PERIOD ONE	PERIOD TWO	PERIOD THREE
14	ADMINISTRATIVESTALL	<u>FTEs</u>	<u>FTEs</u>	<u>FTEs</u>
15	Executive Director	0.0063	0.0124	0.0124
16	Executive Assistant	0.000	0.0124	0.0124
17	HR Generalist	0.000	0.0124	0.0124
18	Director of Finance & Operations	0.0271	0.0140	0.0140
19	Senior Accountant	0.0271	0.0140	0.0140
20	Staff Accountant	0.0271	0.0140	0.0140
21	Accounting Clerk	0.0271	0.0140	0.0140
22	Data Programmer	0.0271	0.0140	<u>0.0140</u>
23	SUBTOTAL	0.1418	0.1072	0.1072
24				
25	PROGRAM ADMINISTRATIVE			
26	STAFF			
27	Senior Director of Programs	0.0020	0.0020	<u>0.0020</u>
28	SUBTOTAL	0.0020	0.0020	0.0020
29	DIRECT CARE STAFF			
30	Senior Director of Programs	0.0375	0.0325	0.0325
31	Director of Case Management	0.0146	0.0127	0.0127
32	Case Mgr –Service Coordinator	<u>1.6906</u>	<u>1.1450</u>	<u>1.1450</u>
33	SUBTOTAL	1.7427	1.1902	1.1902
34				
35	TOTAL FTEs	1.8865	1.2994	1.2994
36	//			
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F. NON-MEDICAL CASE MANAGEMENT (CLIENT SUPPORT) SERVICES - MAI CONTRACTOR shall, at a minimum, provide the following paid staff expressed in FTEs, which shall be equal to an average of forty (40) hours worked per week:

4				
5		PERIOD ONE	PERIOD TWO	PERIOD THREE
6	ADMINISTRATIVE STAFF	FTEs	FTEs	FTEs
7	F 5:			
8	Executive Director	0.0016	0.0053	0.0053
9	Executive Assistant	0.0000	0.0053	0.0053
10	HR Generalist	0.0000	0.0053	0.0053
11	Director of Finance & Operations	0.0068	0.0060	0.0060
12	Senior Accountant	0.0068	0.0060	0.0060
13	Staff Accountant	0.0068	0.0060	0.0060
14	Accounting Clerk	0.0068	0.0060	0.0060
15	Data Programmer	0.0068	0.0060	0.0060
16	SUBTOTAL	0.0356	0.0459	0.0459
17	PROGRAM ADMINISTRATIVE			
18	STAFF			
19	Senior Director of Programs	0.0005	0.0005	0.0005
20	SUBTOTAL	0.0005	0.0005	0.0005
21				
22	DIRECT CARE STAFF			
23	Senior Director of Programs	0.0671	0.0337	0.0337
24	Director of Case Management	0.0065	0.0032	0.0032
25	Nurse Case Manager	0.0000	0.1769	0.1769
26	Case Mgr –Service Coordinator	0.2784	0.2920	0.2920
27	SUBTOTAL	0.3520	0.5058	0.5058
28				
29	TOTAL FTEs	0.3881	0.5522	0.5522
30	//			
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 $X: \c Contracts - 2016 - \c 2016-2019 \c Phiase fiv Care services third amendment fy 16-19-lm. Doc alds service Foundation Orange County$

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G. NON-MEDICAL CASE MANAGEMENT (CLIENT ADVOCACY) SERVICES-CONTRACTOR shall, at a minimum, provide the following paid staff expressed in FTEs, which shall be equal to an average of forty (40) hours worked per week:

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5	ADMINISTRATIVE STAFF	PERIOD ONE	PERIOD TWO	PERIOD THREE
6		<u>FTEs</u>	<u>FTEs</u>	<u>FTEs</u>
7	Executive Director	0.0444	0.0086	0.0086
8	Executive Assistant	0.0000	0.0086	0.0086
9	HR Generalist	0.0000	0.0086	0.0086
10	Director of Finance & Operations	0.0032	0.0097	0.0097
11	Senior Accountant	0.0032	0.0097	0.0097
12	Staff Accountant	0.0032	0.0097	0.0097
13	Accounting Clerk	0.0032	0.0097	0.0097
14	Data Programmer	0.0032	0.0097	0.0097
15	SUBTOTAL	0.0604	0.0743	0.0743
16				
17	PROGRAM ADMINISTRATIVE			
18	STAFF			
19	Senior Director of Programs	0.0025	0.0025	<u>0.0025</u>
20	SUBTOTAL	0.0025	0.0025	0.0025
21				
22	DIRECT CARE STAFF			
23	Senior Director of Programs	0.1000	0.0834	0.0834
24	Director of Case Management	0.1156	0.1105	0.1105
25	Case Manager – Client Advocate	0.9900	0.6232	0.6232
26	SUBTOTAL	1.2056	0.8171	0.8171
27				
28	TOTAL FTEs	1.2685	0.8939	0.8939
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H. NON-MEDICAL CASE MANAGEMENT (BENEFIT COUNSELING) SERVICES-CONTRACTOR shall, at a minimum, provide the following paid staff expressed in FTEs, which shall be equal to an average of forty (40) hours worked per week:

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A DMINISTD A TIME STAFE	PERIOD ONE	PERIOD TWO	PERIOD THREE
ADMINISTRATIVE STAFF	<u>FTEs</u>	<u>FTEs</u>	<u>FTEs</u>
Executive Director	0.0041	0.0072	0.0072
Senior Administrative Assistant	0.0041	0.0072	0.0072
HR Generalist	0.0000	0.0072	0.0072
Director of Finance & Operations	0.0161	0.0081	0.0081
Senior Accountant	0.0161	0.0081	0.0081
Staff Accountant	0.0161	0.0081	0.0081
Accounting Clerk	0.0161	0.0081	0.0081
Data Programmer	<u>0.0161</u>	0.0081	<u>0.0081</u>
SUBTOTAL	0.0887	0.0621	0.0621
PROGRAM ADMINISTRATIVE			
STAFF			
Senior Director of Programs	0.0007	0.0007	0.0007
SUBTOTAL	0.0007	0.0007	0.0007
DIRECT CARE STAFF			
Director of Housing & Benefits	0.0145	0.0132	0.0132
Benefit Counselor	<u>0.8500</u>	<u>0.7718</u>	<u>0.7718</u>
SUBTOTAL	0.8645	0.7912	0.7912
TOTAL FTEs	0.9539	0.8540	0.8540

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I. NON-MEDICAL CASE MANAGEMENT (ELIGIBILITY SCREENING) SERVICES-CONTRACTOR shall, at a minimum, provide the following paid staff expressed in FTEs, which shall be equal to an average of forty (40) hours worked per week:

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A]	ADMINISTRATIVE STAFF	PERIOD ONE	PERIOD TWO	PERIOD THREE
	ADMINISTRATIVE STAFF	<u>FTEs</u>	<u>FTEs</u>	<u>FTEs</u>
	Executive Director	0.0102	0.0176	0.0176
	Administrative Assistant	0.0102	0.0176	0.0176
	HR Generalist		0.0176	0.0176
	Director of Finance & Operations	0.0394	0.0199	0.0199

1	Senior Accountant	0.0394	0.0199	0.0199
2	Staff Accountant	0.0394	0.0199	0.0199
3	Accounting Clerk	0.0394	0.0199	0.0199
4	Data Programmer	0.0394	0.0199	0.0199
5	SUBTOTAL	0.2174	0.1523	0.1523
6				
7	PROGRAM ADMINISTRATIVE			
8	STAFF			
9	Senior Director of Programs	0.0018	<u>0.0018</u>	0.0018
10	SUBTOTAL	0.0018	0.0018	0.0018
11				
12	DIRECT CARE STAFF			
13	Director of Housing & Benefits	0.0355	0.0331	0.0331
14	Eligibility Screener	3.0000	<u>2.8257</u>	<u>2.8257</u>
15	SUBTOTAL	3.0355	2.8588	2.8588
16	TOTAL FTEs	3.2547	3.0129	3.0129
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J. HEALTH INSURANCE PREMIUM/COST SHARING AND EMERGENCY FINANCIAL ASSISTANCE FOR MEDICATIONS - CONTRACTOR shall, at a minimum, provide the following paid staff expressed in FTEs, which shall be equal to an average of forty (40) hours worked per week:

22	ADMINISTRATIVE STAFF	PERIOD ONE	PERIOD TWO	PERIOD THREE
23	ADMINISTRATIVE STAFF	<u>FTEs</u>	<u>FTEs</u>	<u>FTEs</u>
24	Executive Director	0.0000	0.0011	0.0011
25	Sr. Administrative Assistant	0.0000	0.0011	0.0011
26	HR Generalist	0.0000	0.0011	0.0011
27	Director of Finance & Operations	0.0276	0.0012	0.0012
28	Senior Accountant	0.0276	0.0012	0.0012
29	Staff Accountant	0.0276	0.0012	0.0012
30	Accounting Clerk	0.0276	0.0012	0.0012
31	Data Programmer	0.0276	0.0012	0.0012
32	TOTAL FTEs	0.1380	0.1536	0.1536
33	//			
34	//			
35	//			
36	//			
37	//			

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1. CONTRACTOR shall, at a minimum, provide the following paid staff expressed in FTEs, which shall be equal to an average of forty (40) hours worked per week:

ADMINISTRATIVE STAFF	PERIOD ONE	PERIOD TWO	PERIOD THREE
ADMINISTRATIVE STAFT	<u>FTEs</u>	<u>FTEs</u>	<u>FTEs</u>
Executive Director	<u>0.0000</u>	0.0169	0.0169
Sr. Administrative Assistant	<u>0.0000</u>	0.0169	0.0169
HR Generalist	0.0000	0.0169	0.0169
Director of Finance & Operations	0.0093	0.0191	0.0191
Senior Accountant	0.0093	0.0191	0.0191
Staff Accountant	0.0093	0.0191	0.0191
Accounting Clerk	0.0093	0.0191	0.0191
Data Programmer	0.0093	<u>0.0191</u>	<u>0.0191</u>
TOTAL FTEs	0.0465	0.1462	0.1462

2. CONTRACTOR shall ensure that:

- a. Paraprofessional services are provided by a homemaker, a home-health aide, a nurse assistant certified by the State of California, or an individual who has successfully completed a minimum of forty (40) hours of orientation and training in providing personal care services;
- b. Registered Nurses providing care possess a current California license, and have experience and/or education demonstrating knowledge of techniques and principles of home-health care.
- L. MEDICAL NUTRITION THERAPY SERVICES CONTRACTOR shall, at a minimum, provide the following paid staff expressed in FTEs, which shall be equal to an average of forty (40) hours worked per week:

ADMINISTRATIVE STAFF	PERIOD ONE	PERIOD TWO	PERIOD THREE
ADMINISTRATIVE STAFF	<u>FTEs</u>	<u>FTEs</u>	<u>FTEs</u>
Executive Director	0.0000	0.0125	0.0125
Sr. Administrative Assistant	0.0000	0.0125	0.0125
HR Generalist	0.0000	0.0125	0.0125
Director of Finance & Operations	0.0297	0.0142	0.0142
Senior Accountant	0.0297	0.0142	0.0142
Staff Accountant	0.0297	0.0142	0.0142
Accounting Clerk	0.0297	0.0142	0.0142
Data Programmer	0.0297	0.0142	0.0142
SUBTOTAL	0.1485	0.1085	0.1085

DIRECT CARE STAFF			
Registered Dietician	1.0000	1.0000	1.0000
SUBTOTAL	1.0000	1.0000	1.0000
TOTAL FTEs	1.1485	1.1085	1.1085

M. FOOD BANK SERVICES - CONTRACTOR shall, at a minimum, provide the following paid staff expressed in FTEs, which shall be equal to an average of forty (40) hours worked per week:

	PERIOD ONE	PERIOD TWO	PERIOD THREE
ADMINISTRATIVE STAFF	<u>FTEs</u>	<u>FTEs</u>	<u>FTEs</u>
Executive Director	0.0241	0.0248	0.0248
Executive Assistant	0.0241	0.0248	0.0248
HR Generalist	0.0000	0.0248	0.0248
Director of Finance & Operations	0.0239	0.0281	0.0281
Senior Accountant	0.0239	0.0281	0.0281
Staff Accountant	0.0239	0.0281	0.0281
Accounting Clerk	0.0239	0.0281	0.0281
Data Programmer	0.0239	0.0281	0.0281
SUBTOTAL	0.1677	0.2149	0.2149
PROGRAM ADMINISTRATIVE			
STAFF			
Senior Director of Programs	0.0058	0.0063	0.0063
Director of Support Services	0.0058	0.0063	0.0063
SUBTOTAL	0.0116	0.0126	0.0126
DIRECT CARE STAFF			
Senior Director of Programs	0.0801	0.0344	0.0344
Director of Support Services	0.4170	0.3743	0.3743
Food Pantry Coordinator	0.3237	0.7370	0.7370
Volunteer Services	0.0914	0.1568	0.1568
Drivers	0.0874	0.0784	0.0784
SUBTOTAL	0.9996	1.3809	1.3809
TOTAL FTEs	1.1789	1.6804	1.6804
//			

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N. NUTRITIONAL SUPPLEMENTS SERVICES - CONTRACTOR shall, at a minimum, provide the following paid staff expressed in FTEs, which shall be equal to an average of forty (40) hours worked per week:

4				
5	ADMINISTRATIVE STAFF	PERIOD ONE	PERIOD TWO	PERIOD THREE
6	ADMINISTRATIVE STAFT	<u>FTEs</u>	<u>FTEs</u>	<u>FTEs</u>
7	Executive Director	0.0124	0.0090	0.0090
8	Executive Assistant	0.0124	0.0090	0.0090
9	HR Generalist	0.0000	0.0090	0.0090
10	Director of Finance & Operations	0.0123	0.0152	0.0152
11	Senior Accountant	0.0123	0.0152	0.0152
12	Staff Accountant	0.0123	0.0152	0.0152
13	Accounting Clerk	0.0123	0.0152	0.0152
14	Data Programmer	0.0123	<u>0.0152</u>	<u>0.0152</u>
15	SUBTOTAL	0.0863	0.1030	0.1030
16				
17	PROGRAM ADMINISTRATIVE			
18	STAFF			
19	Senior Director of Programs	0.0063	0.0052	0.0052
20	Director of Support Services	0.0063	0.0052	<u>0.0052</u>
21		0.0126	0.0104	0.0104
22	DIRECT CARE STAFF			
23	Senior Director of Programs	0.0170	0.0100	0.0100
24	Director of Support Services	0.4458	0.2624	0.2624
25	Food Pantry Coordinator	0.0849	0.1000	0.1000
26	Volunteer Coordinator	0.2548	0.1500	0.1500
27	SUBTOTAL	0.8025	0.5224	0.5224
28				
29	TOTAL FTEs	0.9014	0.6358	0.6358
30	//			
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O. MEDICAL TRANSPORTATION SERVICES - CONTRACTOR shall, at a minimum, provide the following paid staff expressed in FTEs, which shall be equal to an average of forty (40) hours worked per week:

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A DAMANICED A TIME CE A CE	PERIOD ONE	PERIOD TWO	PERIOD THREE
ADMINISTRATIVE STAFF	<u>FTEs</u>	<u>FTEs</u>	<u>FTEs</u>
Executive Director	0.0004	0.0332	0.0332
Administrative Assistant	0.0042	0.0332	0.0332
HR Generalist	0.0000	0.0332	0.0332
Director of Finance & Operations	0.0615	0.0376	0.0376
Senior Accountant	0.0615	0.0376	0.0376
Staff Accountant	0.0615	0.0376	0.0376
Accounting Clerk	0.0615	0.0376	0.0376
Data Programmer	0.0615	0.0376	0.0376
SUBTOTAL	0.3121	0.2876	0.2876
PROGRAM ADMINISTRATIVE			
STAFF			
Senior. Director of Programs	0.01250	0.01250	0.01250
Director of Support Services	0.01250	0.01250	0.01250
SUBTOTAL	0.02500	0.02500	0.02500
DIRECT CARE STAFF			
Senior Director of Programs	0.0375	0.0375	0.0375
Director of Support Services	0.1075	0.1200	0.1200
Volunteer Coordinator	0.0000	0.0500	0.0500
Transportation Coordinator	1.0000	1.0000	1.0000
Transportation Drivers	1.9000	1.9000	1.9000
SUBTOTAL	3.0450	3.1075	3.1075
TOTAL FTEs	3.3821	3.4201	3.4201

P. CONTRACTOR and ADMINISTRATOR may mutually agree, in writing, to modify the Staffing Paragraph of this Exhibit A to the Agreement."

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1	4. Paragraph IX. of Exhibit A to the Agree	ement is amended t	o read as follows:			
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3		UNITS OF SERV		M) CEDVICEC		
4	A. MEDICAL CASE MANAGE	`		ON) SERVICES -		
5	CONTRACTOR shall, at minimum, provide	e the following unit	is of service:			
6 7		PERIOD ONE	PERIOD TWO	PERIOD THREE		
8		Units of Service	Units of Service	Units of Service		
9	Medical Case Management Medical	Omes of Softies	Cintis of Service			
10	Retention					
11	15-min Face-to-face contacts	1,632	1,665	1,665		
12	15-min Service Coordination on	2.700	2 440	2 440		
13	behalf of client	2,799	3,440	3,440		
14	Unduplicated clients	188	150	150		
15						
16						
17	B. MEDICAL CASE MANAGEMEN	,) CARE) SERVIC	ES – CONTRACTOR		
18	shall at minimum provide the following uni	ts of service:				
19						
		DEDIOD ONE	DEDIOD TWO	DEDIOD TUDEE		
20		PERIOD ONE	PERIOD TWO	PERIOD THREE		
20 21	Medical Case Management Linkage to	PERIOD ONE Units of Service	PERIOD TWO Units of Service	PERIOD THREE Units of Service		
20 21 22	Medical Case Management Linkage to	·				
20 21 22 23	Medical Case Management Linkage to Care 15-min Face-to-face contacts	·				
20 21 22	Care	Units of Service 270	Units of Service 70	Units of Service 70		
20 21 22 23 24	Care 15-min Face-to-face contacts	Units of Service	Units of Service	Units of Service		
20 21 22 23 24 25	Care 15-min Face-to-face contacts 15-min Service Coordination on	Units of Service 270	Units of Service 70	Units of Service 70		
20 21 22 23 24 25 26	Care 15-min Face-to-face contacts 15-min Service Coordination on behalf of client	Units of Service 270 850	Units of Service 70 145	Units of Service 70 145		
20 21 22 23 24 25 26 27	Care 15-min Face-to-face contacts 15-min Service Coordination on behalf of client	Units of Service 270 850	Units of Service 70 145	Units of Service 70 145		
20 21 22 23 24 25 26 27 28	Care 15-min Face-to-face contacts 15-min Service Coordination on behalf of client Unduplicated clients C. MEDICAL CASE MANAGEMI	Units of Service 270 850 60 ENT (MEDICAL	To 145 60 RETENTION) S	Units of Service 70 145 60		
20 21 22 23 24 25 26 27 28 29	Care 15-min Face-to-face contacts 15-min Service Coordination on behalf of client Unduplicated clients	Units of Service 270 850 60 ENT (MEDICAL	To 145 60 RETENTION) S	Units of Service 70 145 60		
20 21 22 23 24 25 26 27 28 29 30 31 32	Care 15-min Face-to-face contacts 15-min Service Coordination on behalf of client Unduplicated clients C. MEDICAL CASE MANAGEMI	Units of Service 270 850 60 ENT (MEDICAL ethe following units)	70 145 60 RETENTION) Sets of service:	Units of Service 70 145 60 SERVICES – MAI -		
20 21 22 23 24 25 26 27 28 29 30 31 32 33	Care 15-min Face-to-face contacts 15-min Service Coordination on behalf of client Unduplicated clients C. MEDICAL CASE MANAGEMI	270 850 60 ENT (MEDICAL e the following unit	Units of Service 70 145 60 RETENTION) Sets of service: PERIOD TWO	Units of Service 70 145 60 SERVICES – MAI -		
20 21 22 23 24 25 26 27 28 29 30 31 32 33 34	Care 15-min Face-to-face contacts 15-min Service Coordination on behalf of client Unduplicated clients C. MEDICAL CASE MANAGEMI CONTRACTOR shall, at minimum, provide AFRICAN AMERICAN	Units of Service 270 850 60 ENT (MEDICAL ethe following units)	70 145 60 RETENTION) Sets of service:	Units of Service 70 145 60 SERVICES – MAI -		
20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35	Care 15-min Face-to-face contacts 15-min Service Coordination on behalf of client Unduplicated clients C. MEDICAL CASE MANAGEMI CONTRACTOR shall, at minimum, provide AFRICAN AMERICAN Medical Case Management Medical	270 850 60 ENT (MEDICAL e the following unit	Units of Service 70 145 60 RETENTION) Sets of service: PERIOD TWO	Units of Service 70 145 60 SERVICES – MAI -		
20 21 22 23 24 25 26 27 28 29 30 31 32 33 34	Care 15-min Face-to-face contacts 15-min Service Coordination on behalf of client Unduplicated clients C. MEDICAL CASE MANAGEMI CONTRACTOR shall, at minimum, provide AFRICAN AMERICAN	270 850 60 ENT (MEDICAL e the following unit	Units of Service 70 145 60 RETENTION) Sets of service: PERIOD TWO	Units of Service 70 145 60 SERVICES – MAI -		

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1	15-min Service Coordination on	303	303	303
2	behalf of client	303	303	303
3	Unduplicated clients	31	31	31
4	LATINO			
5	Medical Case Management Medical			
6	Retention			
7	15-min Face-to-face contacts	633	633	633
8	15-min Service Coordination on	1,213	1,213	1,213
9	behalf of client	1,213	1,213	1,213
10	Unduplicated clients	84	84	84
11				
12	D. MEDICAL CASE MANAGEMENT	(LINKAGE	TO CARE)	SERVICES – MAI -

D. MEDICAL CASE MANAGEMENT (LINKAGE TO CARE) SERVICES – MAI CONTRACTOR shall, at minimum, provide the following units of service:

AFRICAN AMERICAN		PERIOD ONE	PERIOD TWO	PERIOD THREE
		<u>Units of Service</u>	<u>Units of Service</u>	<u>Units of Service</u>
	Medical Case Management Linkage to			
	Care			
	15-min Face-to-Face contacts	266	70	70
	15-min Service Coordination on behalf of client	308	145	145
	Unduplicated clients	14	14	14
	LATINO			
	Medical Case Management Linkage to			
	Care			
	15-min Face-to-Face contacts	165	165	165
	15-min Service Coordination on behalf of client	400	400	400
	Unduplicated clients	40	50	50

E. NON-MEDICAL CASE MANAGEMENT (CLIENT SUPPORT) SERVICES - CONTRACTOR shall, at minimum, provide the following units of service. A session shall be fifteen (15) minutes in duration and shall consist of face-to-face contact with a client to assist with benefits services.

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1	I	PERIOD ONE	PERIOD TWO	PERIOD THREE
2		Units of Service	Units of Service	<u>Units of Service</u>
3	Client Support			
4	15- min Face-to-Face contacts	612	612	612
5	15-min Service Coordination on	1,517	1,517	1,517
6	behalf of client	1,517	1,517	1,517
7	Unduplicated clients	132	132	132
8				
9	F. NON-MEDICAL CASE MANA	`	,	
10	CONTRACTOR shall, at minimum, provid	de the following u	nits of service with	a client to assist with
11	benefits services.			
12		DEDIOD ONE	DEDIOD TWO	DEDIOD TUDEE
13	AFRICAN AMERICAN	PERIOD ONE Units of Service	PERIOD TWO Units of Service	PERIOD THREE
14 15	Client Support	Office of Service	Office of Service	<u>Units of Service</u>
16	15- min Face-to-Face contacts	165	220	220
17	15-min Service Coordination on	103	220	220
18	behalf of client	256	510	510
19	Unduplicated clients	33	20	20
20	LATINO			
21	Client Support			
22	15- min Face-to-Face contacts	385	1,415	1,415
23	15-min Service Coordination on	594	3,223	3,223
24	behalf of client	374	3,223	3,223
25	Unduplicated clients	77	135	135
26				
27	G. NON-MEDICAL CASE MANAGI	EMENT – (CLIEN	T ADVOCACY) - (CONTRACTOR shall,
28	at minimum, provide the following units	of service with a	client to provide	referral, education, or
29	information regarding needed services.			

	PERIOD ONE	PERIOD TWO	PERIOD THREE
	<u>Units of Service</u>	<u>Units of Service</u>	<u>Units of Service</u>
Client Advocacy			
15-min Face-to-face contacts	250	185	185
15-min Service Coordination on behalf of client	425	425	425
Unduplicated clients	450	185	185

H. NON-MEDICAL CASE MANAGEMENT (BENEFITS COUNSELING AND ELIGIBILITY SCREENING) SERVICES - CONTRACTOR shall, at minimum, provide the following units of service. A session shall be fifteen (15) minutes in duration and shall consist of face-to-face contact with a client to assist with benefits services.

	PERIOD ONE Units of Service	PERIOD TWO Units of Service	PERIOD THREE Units of Service
General Benefits Counseling			
15-min Face-to-Face contacts	1,800	1,800	1,800
15 min Service Coordination on behalf of client	250	1,600	1,600
Unduplicated clients	275	275	275
Eligibility Screening			
15-min Face-to-Face contacts	1,600	1,600	1,600
15-min Service Coordination	250	250	250
on behalf of client	230	230	230
Unduplicated clients	600	600	600

MENTAL HEALTH SERVICES

1. CONTRACTOR shall, at minimum, provide the following units of service:

	PERIOD ONE	PERIOD TWO	PERIOD THREE
	<u>Units of Service</u>	<u>Units of Service</u>	<u>Units of Service</u>
Psychosocial Assessments			
Individual Counseling Units			
15-min session	1,300	1,300	1,300
Unduplicated Clients	90	90	90
Couples Counseling Units			
15-min session	150	150	150
Unduplicated Clients	90	0	0
Group Counseling Units			
15-min session	1,800	1,800	1,800
Unduplicated Clients	200	200	200

2. A group counseling session shall consist of face-to-face contact between one or more 37 | therapists and a group of no fewer than two (2) Ryan White eligible clients.

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4. Based on a client's therapeutic need, the therapist may increase the number of visits to twenty-five (25) with prior written approval using the prior authorization for Mental Health Services form.

J. HEALTH INSURANCE PREMIUM/COST SHARING AND EMERGENCY FINANCIAL ASSISTANCE FOR MEDICATIONS

1. CONTRACTOR shall, at minimum, provide the following units of service:

	PERIOD ONE	PERIOD TWO	PERIOD THREE
	Units of Service	Units of Service	<u>Units of Service</u>
Insurance Premium and Cost Sharing			
Insurance Premium Payments	250	475	475
One Payment	230	4/3	473
Unduplicated Clients	90	130	130
Co-Payments			
Medical/Dental Co-Payments	5	350	350
One Payment	3	330	330
Mental Health Co-Payments	160	125	125
One Payment	100	123	123
Unduplicated Clients	12		
Emergency Financial Assistance			
for Medication			
Medication Payments One Payment	40	80	80
Unduplicated Clients	13	10	10

K. HOME HEALTH CARE AND HOME COMMUNITY-BASED SERVICES

1. CONTRACTOR shall, at minimum, provide the following units of service:

	PERIOD ONE	PERIOD TWO	PERIOD THREE
	Units of Service	<u>Units of Service</u>	Units of Service
Skilled Nursing Visits	10	10	10
One-hour of Care by RN	10	10	10
Unduplicated Clients	3	3	3
Specialized Care Visits	20	20	20
One Visit	20	20	20

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Ш	Unduplicated Clients	4	4	4
	Certified Nursing Assistant Visit			
	One-hour of Care by			
	CNA	1,100	1,100	1,100
	Unduplicated Clients	10	10	10
	Homemaker Visits			
	One-hour of Care by	1,175	1,900	1,900
	Homemaker			
	Unduplicated Clients	10	10	10
	DME Items	150	150	150
	One DME Item	130	130	130
	Unduplicated Clients	24	24	24
П				

L. MEDICAL NUTRITION THERAPY SERVICES

1. CONTRACTOR shall, at a minimum, provide the following units of service

	PERIOD ONE	PERIOD TWO	PERIOD THREE
	Units of Service	Units of Service	Units of Service
Medical Nutrition Therapy	950	950	950
15-min Face-to-Face contacts	750	750	750
15-min Service Coordination	100	100	100
Unduplicated clients	150	150	150

M. FOOD BANK SERVICES - CONTRACTOR shall, at minimum, provide the following units of service:

	PERIOD ONE	<u>PERIOD TWO</u>	PERIOD THREE
	<u>Units of Service</u>	Units of Service	Units of Service
Food Orders One Food Order	4,945	6,310	6,310
Unduplicated clients	559	693	693

N. NUTRITIONAL SUPPLEMENTS

CONTRACTOR shall, at a minimum, provide the following units of service:

35 | /. 36 | /.

	PERIOD ONE	PERIOD TWO	PERIOD THREE
	Units of Service	Units of Service	Units of Service
Nutritional Supplements			
30 Cans or 30 day supply of	1,905	1,900	1,900
Supplements			
Unduplicated clients	233	220	220

O. HOME DELIVERED MEALS SERVICES - CONTRACTOR shall, at minimum, provide the following units of service:

	PERIOD ONE	PERIOD TWO	PERIOD THREE
	Units of Service	Units of Service	Units of Service
Home-Delivered Meals One Meal	3,775	1,600	1,600
Unduplicated clients	17	15	15

P. MEDICAL TRANSPORTATION SERVICES - CONTRACTOR shall provide the following services:

	PERIOD ONE	PERIOD TWO	PERIOD THREE
	Units of Service	Units of Service	Units of Service
Reduced fare daily bus passes	1,200	1,200	1,200
Regular fare daily bus passes	202	202	202
Reduced fare monthly bus passes	350	350	350
Regular fare monthly bus passes	55	55	55
ACCESS Coupons	3,000	3,143	3,143
Unduplicated clients	305	205	205
One –Way Taxi Trips	577	577	577
Unduplicated clients	53	53	53
One-Way Van Trips	1,563	1,563	1,563
Unduplicated clients	93	93	93

Q. CONTRACTOR and ADMINISTRATOR may mutually agree, in writing, to modify the Units of Service Paragraph of this Exhibit A to the Agreement."

In all other respects, the terms of the original Agreement as previously modified by the First Amendment, and the Second Amendment, which are not specifically changed by this Third 37 | Amendment, shall remain in full force and effect and are incorporated herein by this reference.

1	IN WITNESS WHEREOF, the Parties have executed this Third Amendment to Agreement, in the			
2	County of Orange, State of California.			
3				
4	AIDS SERVICES FOUNDATION ORANGE COUNTY			
5	DocuSigned by:	9 /20 /2017		
6	BY: Philip Yaeger	DATED: 8/29/2017		
7	194AF2B791284D5			
8	TITLE: Executive Director/CEO			
9				
10				
11				
12				
13	COUNTY OF ORANGE			
14				
15				
16	BY:	DATED:		
17	HEALTH CARE AGENCY			
18				
19				
20				
21	A POP OVER A SITO FORM			
22	APPROVED AS TO FORM			
23	OFFICE OF THE COUNTY COUNSEL			
24	ORANGE COUNTY, CALIFORNIA			
25				
26	BY: EN DIMW	DATED: 8/29/2017		
27	C4E3886C1E6D4FD	DATED:		
28	DEPUTY			
29				
30				
31				
32				
33				
34	If the contracting party is a corporation, two (2) signatures are required: one (1) signature by the Chairman of the Board, the President or		
35	any Vice President; and one (1) signature by the Secretary, any Assistant Secre	etary, the Chief Financial Officer or any Assistant Treasurer.		
36	If the contract is signed by one (1) authorized individual only, a copy of the collaboration has empowered said authorized individual to act on its behalf by his or her sign			
37				

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