

**AMENDMENT NO. 1
TO STANDARD AGREEMENT A-13961
BETWEEN COUNTY OF MONTEREY AND
MARK WILLIAM STANFORD, Ph.D.**

This **AMENDMENT NO. 1** to the County of Monterey Standard Agreement A-13961 is entered by and between Mark William Stanford, Ph.D. (hereinafter referred to as "CONTRACTOR"), and the County of Monterey, a political subdivision of the State of California, hereinafter referred to as "COUNTY."

WHEREAS, the COUNTY entered into a Standard Agreement with Mark William Stanford, Ph.D. in the amount of \$5,799 for the term from July 1, 2018 to June 30, 2019 for training on the use of the American Society of Addiction Medicine (ASAM) Criteria as applied to the County of Monterey Health Department Behavioral Health Bureau Drug Medi-Cal Organized Delivery System; and

WHEREAS, the COUNTY and CONTRACTOR hereby wish to amend the Standard Agreement to revise Section 2.0 Payment Provisions, Section 3.0 Term of Agreement, EXHIBIT A: SCOPE OF SERVICES/PAYMENT PROVISIONS to add \$19,800 for ASAM and Substance Use Disorder training services, and revise EXHIBIT C: BEHAVIORAL HEALTH INVOICE FORM, accordingly. This Amendment No. 1 revises the Agreement amount for a total of \$25,599 for the term from July 1, 2018 to June 30, 2020.

NOW THEREFORE, the COUNTY and CONTRACTOR hereby agree to amend the Agreement in the following manner:

1. Section 2.01 PAYMENT PROVISIONS shall be amended by removing "*The total amount payable by the County to CONTRACTOR under this Agreement is not to exceed the sum of \$5,799*" and replacing it with "*The total amount payable by County to CONTRACTOR under this Agreement is not to exceed the sum of \$25,599.*"
2. Section 3.01 TERM OF AGREEMENT shall be amended by removing "*The term of this Agreement is from July 1, 2018 to June 30, 2019, unless sooner terminated pursuant to the terms of this Agreement*" and replacing it with "*The term of this Agreement is from July 1, 2018 to June 30, 2020, unless sooner terminated pursuant to the terms of this Agreement*"
3. EXHIBIT A-1: SCOPE OF SERVICES/PAYMENT PROVISIONS replaces EXHIBIT A: SCOPE OF SERVICES/PAYMENT PROVISIONS. All references in the Agreement to EXHIBIT A shall be construed to refer to EXHIBIT A-1 as attached to this Amendment No. 1 and incorporated herein.
4. EXHIBIT C-1: BEHAVIORAL HEALTH INVOICE FORM replaces EXHIBIT C: BEHAVIORAL HEALTH INVOICE FORM. All references in the Agreement to

EXHIBIT C shall be construed to refer to EXHIBIT C-1 as attached to this Amendment No. 1 and incorporated herein.

5. Except as provided herein, all remaining terms, conditions and provisions of the Agreement are unchanged and unaffected by this Amendment and shall continue in full force and effect as set forth in the Agreement.
6. This Amendment No. 1 shall be effective June 1, 2019.
7. A copy of this Amendment shall be attached to the original Agreement executed by the County on June 27, 2018.

(The remainder of this page is intentionally left blank.)

IN WITNESS WHEREOF, COUNTY and CONTRACTOR have executed this AMENDMENT NO. 1 to the AGREEMENT A-13961 as of the day and year written below.

COUNTY OF MONTEREY

By: _____
Contracts/Purchasing Officer

Date: _____

By: _____
Department Head (if applicable)

Date: _____

By: _____
Board of Supervisors (if applicable)

Date: _____

Approved as to Form¹

By: _____
County Counsel

Date: 4/1/19

Approved as to Fiscal Provisions²

By: _____
Auditor/Controller

Date: 4/1/19

Approved as to Liability Provisions³

By: _____
Risk Management

Date: _____

CONTRACTOR

MARK WILLIAM STANFORD,
Ph.D.

By: _____
Contractor's Business Name*

By: _____
(Signature of Chair, President, or Vice-President)*

MARK STANFORD, CONSULTANT
Name and Title

Date: 03/21/2019

By: _____
(Signature of Secretary, Asst. Secretary, CFO, Treasurer or Asst. Treasurer)*

Name and Title

Date: _____

County Board of Supervisors' Agreement Number: A-13961

*INSTRUCTIONS: If CONTRACTOR is a corporation, including limited liability and non-profit corporations, the full legal name of the corporation shall be set forth above together with the signatures of two specified officers. If CONTRACTOR is a partnership, the name of the partnership shall be set forth above together with the signature of a partner who has authority to execute this Agreement on behalf of the partnership. If CONTRACTOR is contracting in an individual capacity, the individual shall set forth the name of the business, if any, and shall personally sign the Agreement.

Mark William Stanford, Ph.D.
Amendment No. 1 to Standard Agreement A-13961
Fiscal Year 2018-19 through Fiscal Year 2019-20

EXHIBIT A-1: SCOPE OF SERVICES/PAYMENT PROVISIONS

**County of Monterey Standard Agreement
between
County of Monterey
Health Department/Behavioral Health Bureau and
Mark William Stanford, Ph.D., Consultant**

Exhibit A-1 shall be incorporated by reference as part of the Standard Agreement governing work to be performed under the above referenced AGREEMENT, the nature of the working relationship between the COUNTY and the CONTRACTOR, and specific obligations of the CONTRACTOR.

I. PURPOSE: To provide four (4) Cohorts each of American Society of Addiction Medicine (ASAM) A, B and C Phase 2 Training Series and one (1) Substance Use Disorder (SUD) training as it relates to Proposition 47, on dates to be scheduled, as requested by COUNTY, to Monterey County SUD treatment providers and the Health Department Behavioral Health Bureau staff.

II. PERIOD OF PERFORMANCE: Subject to other AGREEMENT provisions, the period of performance under this AGREEMENT will be from **July 1, 2018 to June 30, 2020.**

III. SCOPE OF WORK

A. PROGRAM GOALS AND OBJECTIVES: The CONTRACTOR shall provide ASAM A, B and C Phase 2 Training Series emphasizing the ASAM system integration within SUD treatment provider organizations as applied by the County of Monterey Health Department Behavioral Health Bureau's ("MCBHB") Drug Medi-Cal Organized Delivery System (DMC-ODS). The training shall be delivered to SUD treatment providers and selected MCBHB staff and otherwise do all things necessary for, or incidental to, the performance of work, in that training shall consist of goals and objectives, as set forth below:

1. This on-site training shall emphasize the ASAM system integration within treatment provider organizations. The SUD treatment providers (Program Officers and Quality Assurance representatives) shall be the target audience. The training shall consist of four (4) Cohorts: Each of the treatment providers shall receive twenty-four (24) hours, three (3) day specialized training for a total of ninety-six (96) hours.

Learning Objectives for this training shall enable participants to:

- Identify program site ASAM Champions who shall be trained as the lead person for that program's staff on matters related to ASAM implementation;
- Develop and train on the use of an internal self-monitoring tool for internal audits on applied ASAM for patient care and service delivery;
- Develop the consistent ability to create an individual treatment plan based upon the ASAM Adult Level of Care patient assessment;

- Use progress notes to demonstrate movement toward attainment of treatment plan goals and discover new interventions when initial plan goals are not being met; and
 - Develop weekly case consultation at each program site using the ASAM Criteria to present and discuss patient cases.
2. This on-site training shall consist of general research-based SUD information as well as evidence-based practices in the management of SUD in culturally diverse communities. Training shall be provided to Proposition 47 Community Partners in the South County region of Monterey County. Training shall consist of one (1) three (3) hour SUD training.

Learning Objectives for this training shall enable participants to:

- Describe the research-based major features of SUD and explain how a SUD is identified per current research findings and the DSM-5;
- Identify factors that predispose an individual to SUD;
- Explain the evidence-based treatments for SUD including medication-assisted treatment and the principles of recovery;
- Compare recovery outcomes of SUD treatment to the treatment outcomes of other chronic medical conditions; and
- Identify the clinical framework for treating persons with co-occurring disorders.

IV. DESIGNATED CONTRACT MONITOR:

Andrew Heald
Behavioral Health Services Manager
Monterey County Health Department/Behavioral Health Bureau
1270 Natividad Road, Salinas, CA 93906
(831) 755-6383

V. PAYMENT PROVISIONS

A. COMPENSATION/PAYMENT

COUNTY shall pay an amount not to exceed **\$25,599** for the performance of all things necessary for, or incidental to, the performance of work as set forth in the Scope of Work. CONTRACTOR'S compensation for services rendered shall be based on the following rates or in accordance with the following terms:

DESCRIPTION OF SERVICES	ALL-INCLUSIVE RATE OF SERVICE	CONTRACT AMOUNT
ASAM A, B & C Training Series for three (3) Cohorts Rate = one (1) Cohort consisting of three (3)-hour half-days for three (3) days for up to thirty (30) participants per Cohort For the period of July 1, 2018 to May 31, 2019	\$1,933 per Cohort	\$5,799

ASAM A, B & C Phase 2 Training Series for four (4) Cohorts Rate = one (1) Cohort consisting of three (3) eight (8)-hour full days (training dates to be determined) For the period of June 1, 2019 to June 30, 2020	\$4,800 per Cohort	\$19,200
SUD Training for South County Proposition 47 Community Partners Rate = one (1) three (3)-hour half-day (training dates to be determined) For the period of June 1, 2019 to June 30, 2020	\$600	\$600
Total County Obligation		\$25,599

- B.** There shall be no travel reimbursement allowed during this Agreement.
- C.** To receive any payment under this Agreement, CONTRACTOR shall submit reports and invoices in such form as may be required by the County of Monterey Behavioral Health Bureau. Specifically, CONTRACTOR shall submit its invoice on Exhibit C-1 – Invoice Form to COUNTY to reach the Behavioral Health Bureau no later than the 30th day of the month following the month of service.
- D.** CONTRACTOR shall submit via email an Invoice using Exhibit C-1 – Invoice Form in Excel format with electronic signature(s) along with supporting documentation, as may be required by the COUNTY for services rendered to:
MCHDBHFinance@co.monterey.ca.us

VI. CONTRACTORS BILLING PROCEDURES

- A.** The COUNTY shall not pay any Invoices for payment for services submitted more than twelve (12) months after the calendar month in which the services were completed.
- B.** COUNTY shall review and certify CONTRACTOR's Invoice either in the requested amount or in such other amount as COUNTY approves in conformity with this Agreement and shall promptly submit such Invoice to the COUNTY Auditor-Controller for payment. The COUNTY Auditor-Controller shall pay the amount certified within thirty (30) days of receiving the certified Invoice.
- C.** If COUNTY certifies payment at a lesser amount than the amount requested, COUNTY shall immediately notify the CONTRACTOR in writing of such certification and shall specify the reason for it. If the CONTRACTOR desires to contest the certification, the CONTRACTOR must submit a written notice of protest to the COUNTY within twenty (20) days after the CONTRACTOR's receipt of the COUNTY notice. The parties shall thereafter promptly meet to review the dispute and resolve it on a mutually acceptable basis. No court action may be taken on such a dispute until the parties have met and attempted to resolve the dispute in person.

VII. MAXIMUM OBLIGATION OF COUNTY

A. Subject to the limitations set forth herein, COUNTY shall pay to CONTRACTOR during the term of this Agreement a maximum amount not to exceed **\$25,599** for services rendered under this Agreement for the period of **July 1, 2018 to June 30, 2020**.

B. Maximum Liability Amount:

TERM	AMOUNT
July 1, 2018 to June 30, 2020	\$25,599
MAXIMUM COUNTY OBLIGATION	\$25,599

EXHIBIT C-1: Monterey County Behavioral Health - Invoice Form

Invoice Number :

Contractor : Mark William Stanford, Ph.D., Consultant

County PO No.:

Address Line 1 233 John St.
Address Line 2 Santa Cruz, CA 95060

Invoice Period :

Tel. No.: 408-234-2858
Fax No.:

Final Invoice : (Check if Yes)

Contract Term: July 1, 2018 to June 30, 2020

BH Control Number

BH Division : Behavioral Health

	Service Description	Total Contract Amount	Dollar Amount Requested this Period	Dollar Amount Requested to Date	Dollar Amount Remaining	% of Total Contract Amount
1	ASAM A, B & C Training Series for three (3) half-day Cohorts for 3 hours each day for 3 days each @ \$1,933 per Cohort for the period of 7/1/2018 to 5/31/2019	\$5,799				
2	ASAM A, B & C Phase 2 Training Series for four (4) full-day Cohorts for 8 hours each day for 3 days each @ \$4,800 per Cohort for the period of 6/1/2019 to 6/30/2020	\$19,200				
3	Substance Use Disorder Training for South County Proposition 47 Training one (1) three (3) hour half-day @ \$600 for the period of 6/1/2019 to 6/30/2020	\$600				
TOTALS		\$25,599				

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the contract approved for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____
Title: _____

Date: _____
Telephone: _____

Email to:	MCHDBHFinance@co.monterey.ca.us	
	Behavioral Health Authorization for Payment	
	Authorized Signatory	Date