

EXHIBIT A: SCOPE OF SERVICES/PAYMENT PROVISIONS

**County of Monterey Standard Agreement
between
County of Monterey
Health Department/Behavioral Health Bureau and
Arlene Guzman Corporation dba Thought Link, Consultant**

Exhibit A 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: The objective of this project is to support the Monterey County Behavioral Health Bureau (MCBH) in the effective implementation of the Behavioral Health Services Act (BHSA). This project aims to deliver a suite of tailored services to address the county's unique priorities while ensuring compliance with state requirements and fostering a sustainable transition to the BHSA framework. Key focus areas include, strategic implementation and guidance, resource and data optimization, stakeholder-centered transition planning, and capacity building and technical assistance.

II. PERIOD OF PERFORMANCE: Subject to other AGREEMENT provisions, the period of performance under this AGREEMENT will be from 01/01/25 through 06/30/26.

III. SCOPE OF WORK

A. PROGRAM GOALS AND OBJECTIVES: The CONTRACTOR shall provide services, and otherwise do all things necessary for or incidental to the performance of work, in that services shall include the following, as set forth below:

I. Contractor to provide Multi-Phase Implementation of the Behavioral Health Services Act (BHSA) - Phase I consists of the following components: 1. Strategic Implementation Guidance: Develop a schedule that aligns with statewide goals and milestones. 2. Resource and Data Optimization: Create an integrated report readiness plan to ensure that funding streams, data assets, and reporting capacities meet the mandates of the BHSA. 3. Stakeholder-Centered Transition Planning: Establish and implement collaboration protocols to effectively engage community members and system partners. 4. Capacity-Building Technical Assistance: Provide targeted training and technical support to MCBH staff and contractors. This component will enhance MCBH's capacity for BHSA compliance, implementing evidence-based practices, and managing challenges related to funding adjustments. This engagement is essential to equip MCBH with the necessary tools, strategies, and insights for a successful transition to the BHSA framework while fostering collaboration and continuous improvement across the behavioral health continuum of care.

IV. SCOPE OF SERVICES

A. Component 1: BHSA Implementation Blueprint

1. Assessment and Prioritization

- a. In collaboration with MCBH, CONTRACTOR will conduct a comprehensive assessment of county priorities associated with BHSA Implementation.
- b. CONTRACTOR will collaboratively identify strategic priorities and actionable goals.

2. Blueprint Development and Maintenance

- a. CONTRACTOR will develop a BHSA Implementation Blueprint, including a schedule with timelines that guide BHSA implementation, ensuring alignment with statewide goals, milestones, and local needs.
- b. CONTRACTOR will maintain alignment with established timelines within the Blueprint throughout the term of the agreement.
- c. In collaboration with MCBH, CONTRACTOR will regularly review and refine the Blueprint to reflect emerging state guidance, stakeholder feedback, and program performance data.

B. Component 2: Integrated Report Readiness Plan

1. Comprehensive Funding Forecast

- a. CONTRACTOR will collect and document all local, state, and federal funding sources contributing to the behavioral health continuum of care within Monterey County.
- b. In collaboration with MCBH, CONTRACTOR will categorize funding streams by service area (e.g., housing interventions, FSPs, BH Services and Supports) and by target service population to ensure alignment with BHSA goals.

- c. CONTRACTOR will identify other sources of local revenues, including partnerships with schools and government agencies providing Behavioral Health Services to the MediCal-eligible population.
- d. In collaboration with MCBH, CONTRACTOR will forecast expected BHSa revenue and provide a schedule for future expected revenue for Behavioral Health Services, inclusive of all potential funding streams.

2. Programming Inventory

- a. CONTRACTOR will identify all Behavioral Health services and programs serving the MediCal-eligible population.
- b. For all services and programs aligned with BHSa mandated services, CONTRACTOR will identify which funding stream under which alignment could occur.
- c. For services and programs not aligned with BHSa mandates, CONTRACTOR will identify conditions under which alignment could occur (see transition plans under Component 4).
- d. CONTRACTOR will develop a Program Inventory Report that includes programs potentially negatively impacted by funding stream adjustments.

3. Data Inventory Report

- a. CONTRACTOR will identify and catalog available data from services funded by BHSa, specifying data types, formats, data sharing capabilities, and reporting capabilities.
- b. CONTRACTOR will highlight overlaps or redundancies in data collection to streamline future reporting efforts.
- c. CONTRACTOR will develop an inventory of existing data to support quick access and adaptation once the state releases measure and outcome requirements.

4. Alignment Analysis and Adjustment Planning

- a. After measure and outcome requirements are released, CONTRACTOR will conduct an alignment analysis to identify which services are not aligned to data requirements.
- b. CONTRACTOR will collaborate with MCBH to create an actionable plan for addressing alignment issues, including adjustments to data collection processes, staff training, and technology systems.

C. Component 3: BHSa Transition Plan

1. Community Collaboration

- a. CONTRACTOR will develop a Community Collaboration Plan, in accordance with BHSa regulations.
- b. In collaboration with MCBH, CONTRACTOR will develop a BHSa Informational Forum Protocol to gather community input on priorities for BHSa funding given the amended funding allocations.
- c. CONTRACTOR will develop data collection tools to understand who attends the BHSa Informational Forums and document input shared regarding funding priorities.

- d. In collaboration with MCBH, CONTRACTOR will plan BHSA Informational Forums throughout Monterey County and each Board of Supervisors (BOS) district, working with host sites to support recruitment efforts.
- e. CONTRACTOR will facilitate BHSA Informational Forums in both English and Spanish.
- f. CONTRACTOR will collect feedback provided at BHSA Informational Forums.
- g. CONTRACTOR will conduct appropriate analysis of collected information.
- h. CONTRACTOR will report community feedback and recommendations within the BHSA Transition Plan.

2. System Partner Collaboration

- a. CONTRACTOR will develop Stakeholder Collaboration Plan, in accordance with BHSA regulations.
- b. In collaboration with MCBH, CONTRACTOR will develop a System Partner Collaboration Protocol to gather input on BHSA priorities from system partners identified in BHSA regulations.
- c. CONTRACTOR will develop data collection tools to understand who attends System Partner Collaboration Sessions and document shared input regarding funding priorities.
- d. In collaboration with MCBH, CONTRACTOR will plan System Partner Collaboration Sessions to align with BHSA requirements for stakeholder collaboration.
- e. CONTRACTOR will facilitate System Partner Collaboration Sessions in Both English and Spanish.
- f. CONTRACTOR will collect input provided at Stakeholder Collaboration Sessions.
- g. CONTRACTOR will conduct appropriate analysis of collected information.
- h. CONTRACTOR will report system partner feedback and recommendations within the Stakeholder Collaboration Report.

3. BHSA Transition Plan

- a. In collaboration with MCBH, CONTRACTOR will develop BH system recommendations for the BOS to consider for funding allocations given the Program Inventory Report (see Component 2 - Programming Inventory), available data, and stakeholder input.
- b. In collaboration with MCBH, CONTRACTOR will develop a BHSA Transition Plan to present to the BOS based on available data and stakeholder input.
- c. In collaboration with MCBH, CONTRACTOR will present the BHSA Transition Plan as needed.

D. Component 4. System Technical Assistance and Training

1. Policy Guidance and Monitoring

- a. CONTRACTOR will track and interpret state guidance, including updates to the Behavioral Health Transformation Policy Manual.
- b. CONTRACTOR will summarize key takeaways from state guidance and public comment periods, integrating key insights into the BHSA Implementation Blueprint (see Component 1).

2. MCBH Technical Assistance and Training

- a. In collaboration with MCBH staff, CONTRACTOR will identify priority training needs for MCBH staff related to BHSA regulations, DHCS policies, amendments to the Welfare and Institutions Code, and reporting processes and tools.
- b. CONTRACTOR will develop training(s) for prioritized needs adapted to the specific roles of targeted MCBH staff.
- c. In collaboration with MCBH, CONTRACTOR will facilitate training(s) with targeted MCBH staff.
- d. CONTRACTOR will develop and disseminate recorded trainings and associated guidance documents related to staff trainings.
- e. CONTRACTOR will provide as-needed technical assistance to MCBH related to BHSA Implementation.
- f. CONTRACTOR will provide training for clinical staff and contract analysts to build capacity and align practices with BHSA priorities and requirements.

3. Contractor Technical Assistance and Training

- a. In collaboration with MCBH staff, CONTRACTOR will identify priority training needs for MCBH Contractors related to BHSA regulations, DHCS updates and policies, amendments to the Welfare and Institutions Code, reporting processes and tools, and implementation of evidence-based practices.
- b. For contracted services that will be negatively impacted by funding changes (see Programming Inventory in Component 2), CONTRACTOR will collaborate with MCBH to develop transition plans to mitigate negative impacts for prioritized contractors.
- c. In coordination with MCBH, CONTRACTOR will schedule and facilitate meetings with impacted contractors to present, discuss, and potentially revise transition plans.
- d. CONTRACTOR will develop training(s) for prioritized Contractor needs.
- e. In collaboration with MCBH, CONTRACTOR will facilitate training(s) with targeted Contractors.
- f. CONTRACTOR will develop and disseminate recorded trainings and associated guidance documents related to Contractor trainings.

V. DESIGNATED CONTRACT MONITOR:

Shannon Castro

Management Analyst III/BHSA Coordinator

Monterey County Health Department/Behavioral Health Bureau

1270 Natividad Road, Salinas, CA 93906
 (831) 755-8941

VI. PAYMENT PROVISIONS

A. COMPENSATION/PAYMENT

COUNTY shall pay an amount not to exceed **\$_254,000_** for the performance of all things necessary for or incidental to the performance of work as set forth in the Scope of Services. CONTRACTOR'S compensation for services rendered shall be based on the following rates or in accordance with the following terms:

Project Budget

Deliverable	Justification	Proposed Budget	Service Date(s)
BHSA Implementation Blueprint (Comp. 1)	Provides a structured, adaptable framework to ensure that Monterey County stays on track with BHSA implementation, meeting both state requirements and local priorities.	\$15,000	01/1/25 - 08/30/25
Comprehensive Funding Forecast (Comp. 2)	Offers a clear and detailed view of available funding, enabling informed decision-making and resource allocation that maximizes service delivery.	\$12,000	01/01/25- 09/30/25
Programming Inventory Report (Comp. 2)	Identifies alignment opportunities and risks, supporting strategic planning to optimize program sustainability under new funding conditions.	\$33,000	01/01/25 - 09/30/25
Data Inventory Report (Comp. 2)	Establishes a foundational understanding of data assets, streamlining compliance with state reporting requirements and enabling evidence-based decision-making.	\$18,000	01/01/25- 09/30/25
Programmatic Alignment Analysis and Action Plan (Comp. 2)	Ensures that data and processes align with state expectations, reducing risk and supporting continuous improvement efforts.	\$25,000	01/01/25 - 09/30/25
Community Collaboration Plan (Comp. 3)	Facilitates inclusive community collaboration, ensuring stakeholder voices inform BHSA funding priorities and fostering trust with residents.	\$12,000	01/01/25 – 12/30/25
Stakeholder Collaboration Plan (Comp. 3)	Strengthens partnerships with system stakeholders, creating alignment across sectors and enhancing the effectiveness of BHSA implementation.	\$12,000	01/01/25 – 12/30/25
BHSA Transition Plan (Comp. 3)	Provides a roadmap for transitioning services, ensuring a balanced approach to funding allocations based on data and stakeholder input.	\$66,000	01/01/25 – 12/30/25
MCBH Staff Trainings (Comp. 4)	Builds staff capacity to implement BHSA effectively, fostering compliance and implementation fidelity.	\$18,000	04/31/25 - 12/30/25

Contractor Trainings (Comp. 4)	Ensures contractors are equipped to align with BHSA regulations and implement evidence-based practices, maintaining service continuity.	\$18,000	04/31/25 - 12/30/25
Transition Plans for Contractors (Comp. 4)	Minimizes disruptions to contracted services, supporting a smooth transition to BHSA-aligned funding and program structures.	\$25,000	04/31/25 – 12/30/25
	Total Budget:	\$254,000	

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’s Behavioral Health Bureau. Specifically, CONTRACTOR shall submit its invoice on Exhibit B– 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 a claim using Exhibit B – 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

OR via regular mail to:

Monterey County Health Department

Behavioral Health Bureau

1270 Natividad Road

Salinas, CA 93906

ATTN: Accounts Payable

VII. CONTRACTORS BILLING PROCEDURES

A. The COUNTY shall not pay any claims 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.

VIII. 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 **\$254,000** for services rendered under this Agreement for the period of **01/01/25 through 06/30/26**.

B. Maximum Liability Amount: \$254,000

FISCAL YEAR LIABILITY	AMOUNT
January 1, 2025 thru June 30, 2025	\$141,000
July 1, 2025 thru June 30, 2026	\$113,000
TOTAL AGREEMENT MAXIMUM LIABILITY	\$254,000