THIS AMENDMENT, entered into between the State of Florida, Department of Children and Families, hereinafter referred to as the "Department" and Southeast Florida Behavioral Health Network, Inc., hereinafter referred to as the "Provider," amends Contract # IH611.

Amendment #0034 incorporated the Schedule of Funds as of 10/11/2017 and restated the CF Standard Integrated Contract 2016, EXHIBITS A – F2, dated 10/12/2017. The Schedule of Funds added \$255,000 non-recurring funds for targeted opioid response and added \$316,128 non-recurring funds for Disaster Behavioral Health Services (DHS) for Crisis Counseling Immediate Response Programs (ISP) in response to Hurricane Irma.

Amendment #0035 incorporated the Schedule of Funds as of 10/25/2017 which added \$600,000 non-recurring funds for FIT; \$493,688 non-recurring funds for Care Coordination, and \$1,000,000 recurring funds for CAT. This SOF added \$2,093,688 to FY 17-18 and \$1,000,000 to FY 18-19.

Amendment #0036 incorporated the Schedule of Funds as of 12/18/2017, corrected the format of Exhibits A2, B, and C1 and updated Exhibit C2 and C3. The Schedule of Funds moved \$63,083 from MH State Funded for Profit Sub-recipients to Mental Health Service and Support and moved \$270,000 SA Funded for Profit Sub-Recipients to Substance Abuse Services and Support.

The purpose of Amendment **#0037** is to incorporate the Schedule of Funds as of 4/19/2018. This Amendment removes \$160,000 from OCA MHESP, adds \$44,736 in OCA MH0SK for a part-time coordinator position and travel, adds \$48,612 to Substance Abuse TANF, and adds \$184,844 non-recurring funds to cover medication assisted treatment for May and June 2018 of the Year 2 State Targeted Response (STR) to the Opioid Crisis. The total amount of funding added to FY 2017-2018 is \$118,192 and \$66,652 is removed from FY 2018-2019.

1. Page 1, CF Standard Integrated Contract 2016, Section 1.1., Purpose and Contract Amount, is hereby amended to read:

Section 1.1. Purpose and Contract Amount

The Department is engaging the Provider for the purpose of serving as a Regional Managing Entity, pursuant to s.394.9082, F.S., to manage the day-to-day operational delivery of behavioral health services through an organized system of care, pursuant to state and federal law, within the annual appropriation, as further described in Section 2, payable as provided in Section 3, in an amount not to exceed \$370,695,148.00.

- 2. Pages 73-76, CF Standard Integrated Contract 2016, REVISED EXIHIBIT F-METHOD OF PAYMENT, dated 11/01/2017, is hereby deleted in its entirety and Pages 73-76, REVISED EXIHIBIT F-METHOD OF PAYMENT, dated 04/24/2018, is inserted in lieu thereof and attached hereto.
- 3. Page 77, EXHIBIT F1, ME SCHEDULE OF FUNDS, dated 1/10/2018, is hereby deleted in its entirety and Page 77, REVISED EXHIBIT F1, ME SCHEDLE OF FUNDS, dated 04/24/2018, is inserted in lieu thereof and attached hereto.

4. Pages 78-79, CF Standard Integrated Contract 2016, REVISED EXIHIBIT F2-SCHEDULE OF PAYMENTS, dated 11/01/2017, is hereby deleted in its entirety and Pages 78-79, REVISED EXHIBIT F2, SCHEDULE OF PAYMENTS, dated 04/24/2018, is inserted in lieu thereof and attached hereto.

This amendment shall begin on April 24, 2018 or the date on which the amendment has been signed by both Parties, whichever is later.

All provisions in the contract and any attachments thereto in conflict with this amendment shall be and are hereby changed to conform to this amendment.

All provisions not in conflict with this amendment are still in effect and are to be performed at the level specified in the contract.

This amendment and all its attachments are hereby made a part of the contract. IN WITNESS THEREOF, the Parties hereto have caused this nine (9) page amendment to be executed by their officials' thereunto duly authorized.

PROVIDER: SOUTHEAST FLORIDA BEHAVIORAL HEALTH

NETWORK, INC. SIGNE S E

FLORIDA DEPARTMENT OF CHILDREN AND FAMILIES

NAME: Vern Melvin

TITLE: Regional Managing Director

DATE: 5-22-18

CF 1127 Effective July 2015 (CF-1127-1516)

BY:

DATE:

NAME: Ann Berner

TITLE: Chief Executive Officer

Federal ID Number: 27-1871869

REVISED EXHIBIT F – METHOD OF PAYMENT

F-1 Funding

F-1.1 This advance fixed price, fixed payment Contract is comprised of federal and state funds, subject to reconciliation. **Exhibit F1** identifies the type and amount of funding provided. At the beginning of each fiscal year, the **Exhibit F1** will be amended into this Contract, and the total Contract amount in **Table 6** will be adjusted accordingly.

F-1.2 The contract total dollar amount shall not exceed the amount specified in Section 1.1, subject to the availability of funds, as specified in Table 6.

Table 6 – Contract Funding								
State Fiscal Year	Managing Entity Operational Cost	Direct Services Cost	Supplemental DBH Funds	Total Value of Contract				
2012-2013	\$9,034,641.00	\$29,574,934.00		\$38,609,575.00				
2013-2014	\$9,706,825.00	\$41,381,729.00		\$51,088,554.00				
2014-2015	\$7,550,111.00	\$43,464,154.00		\$51,014,265.00				
2015-2016	\$2,558,940.00	\$52,899,199.00		\$55,458,139.00				
2016-2017	\$2,937,445.00	\$53,853,589.00		\$56,791,034.00				
2017-2018	\$2,835,609.00	\$58,293,658.00	\$316,128.00	\$61,445,395.00				
2018-2019	\$2,561,345.00	\$53,726,841.00		\$56,288,186.00				
Total	\$37,184,916.00	\$333,194,104.00		\$370,695,148.00				

F-2 Payment

F-2.1 The Department will pay the Managing Entity an operational cost for the management of the Network in accordance with the terms and conditions of this Contract. The direct service cost is defined as the annual value of the Contract less the total value of both the Managing Entity operational cost and the Supplemental DBH Funds.

F-2.2 In accordance with s. 394.9082, F.S., the Department will pay the Managing Entity a two-month advance at the beginning of each fiscal year. Thereafter, the Managing Entity shall request monthly fixed payments equal to the fiscal year contract balance divided by the number of months remaining in the fiscal year. The advance and payment amounts for each fiscal year are specified in **Exhibit F2**. The payment request may be subject to financial consequences, pursuant to **Section E-5.2**.

F-2.3 The Managing Entity shall temporarily invest surplus advance funds in an insured interest bearing account, in accordance with s. 216.181(16)(b), F.S. The Managing Entity shall remit to the Department, on a quarterly basis, any interest earned on advance funds via check. The Managing Entity must submit documentation from the financial entity where said funds are invested, evidencing the Annual Percentage Rate and actual interest income for each month.

F-2.4 The Managing Entity shall expend any advance in accordance with the General Appropriations Act.

F-2.5 The Managing Entity shall request payment in accordance with Section F-3.

F-3 Invoice Requirements

F-3.1 In accordance with Exhibit F2, the Managing Entity shall:

F-3.1.1 Request payment monthly through the submission of a properly completed **Template 10 – Managing Entity Monthly Fixed Payment Invoice**;

F-3.1.2 Submit a properly completed **Template 11 – Managing Entity Monthly Progress Report**, for the month that payment is requested;

F-3.1.3 Submit a properly completed **Template 12 – Managing Entity Monthly Expenditure Report**, detailing actual costs incurred by the Managing Entity for the month that payment is requested. The SAMH Managing Entity Monthly Expenditure Report shall be certified by an authorized representative; and

F-3.1.4 Submit a properly completed **Template 13 – Managing Entity Monthly Carry Forward Expenditure Report**, detailing the expenditure of approved carry forward funds, until said funds are fully expended.

F-3.2 Failure to submit the properly completed required documentation shall cause payment to be delayed until such documentation is received. Submission and approval of the elements in **Sections F-3.1** for the invoice period shall be considered the deliverables necessary for payment.

F-3.3 Within five business days of receipt of a properly completed invoice and **Template 11 – Managing Entity Monthly Progress Report**, the Contract Manager will either approve the invoice for payment or notify the Managing Entity in writing of any deficiencies that must be corrected by the Managing Entity before resubmission of the invoice.

F-3.4 The Department and the state's Chief Financial Officer reserve the right to request supporting documentation at any time, prior to the authorization of payment.

F-4 Cost Allocation Plan

F-4.1 The Managing Entity shall submit an initial **Template 14 – Cost Allocation Plan** within 30 days of execution and a revised Cost Allocation Plan to the Contract Manager annually by August 31, unless otherwise extended in writing by the Department.

F-4.2 The Department will review the Cost Allocation Plan and provide any comments within 15 days of submission. Revisions required by the Department shall be submitted by the date of the payment request for September. Failure to have an approved Cost Allocation Plan by September 20, unless extended in writing by the Department, will result in no further payment being made to the Managing Entity until the Department approves the Cost Allocation Plan.

F-4.3 The Managing Entity shall submit a revised Cost Allocation Plan whenever the Managing Entity:

F-4.3.1 Experiences a change in the type of funding it receives, whether under this Contract or an outside funding source; for example, when a new OCA is added, when a new outside funding source contributes to the Managing Entity's operational revenue or when an existing funding source is discontinued;

F-4.3.2 Makes internal organizational changes that affect the cost allocation methodology; or

F-4.3.3 Makes any changes in the allocation of costs relative to funds provided under this Contract and other outside sources.

F-4.4 The Managing Entity may request to amend or revise their Cost Allocation Plan at any time during the state fiscal year, in writing to the Contract Manager. The Managing Entity shall submit the amended or revised Cost Allocation Plan within 20 days of providing written notification. The Department will review and provide written comments within 15 days of submission. The Managing Entity must submit a revised Cost Allocation Plan addressing any revisions required by the Department, within 15 days of the date of the Department's written response.

F-5 Carry Forward Funding

F-5.1 In accordance with s. 394.9082, F.S., the Managing Entity may carry forward documented unexpended state funds from one fiscal year to the next fiscal year, unless the following fiscal year falls outside the contract period, subject to the following conditions.

F-5.1.1 Any funds carried forward shall be expended in accordance with the General Appropriations Act in effect when the funds were allocated to the Managing Entity

F-5.1.2 The cumulative amount carried forward may not exceed eight percent of the contract total. Any unexpended state funds in excess of eight percent must be returned to the Department.

F-5.1.3 The funds carried forward may not be used in any way that would create increased recurring future obligations, and such funds may not be used for any type of program or service that is not currently authorized by this contract.

F-5.1.4 Any unexpended funds that remain at the end of the contract period shall be returned to the Department.

F-5.2 Within 30 days after receiving confirmation of the approved carried forward amount from the Department, The Managing Entity shall submit a properly completed **Template 15 – Managing Entity Spending Plan for Carry Forward Report**.

F-6 Allowable Costs

F-6.1 All costs associated with performance of the services contemplated by this contract must be both reasonable and necessary and in compliance with the cost principles pursuant to 2 CFR Part 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards - Subpart E, 45 CFR Part 75 - Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards - Subpart E, The Reference Guide for State Expenditures, and Ch. 65E-14, F.A.C.

F-6.2 None of the funds provided under the following grants may be used to pay the salary of an individual at a rate in excess of Level II of the Executive Schedule: Block Grants for Community Mental Health Services, Substance Abuse Prevention and Treatment Block Grant, Projects for Assistance in Transition from Homelessness, Project Launch, Florida Youth Transition to Adulthood; and Florida Children's Mental Health System of Care Expansion Implementation Project

F-6.3 Any compensation paid for an expenditure subsequently disallowed as a result of the Managing Entity's or any Network Service Providers' non-compliance with state or federal funding regulations shall be repaid to the Department upon discovery.

F-6.4 Invoices must be dated, signed by an authorized representative of the Managing Entity and submitted in accordance with the submission schedule in this contract, with appropriate service utilization and Individuals Served data accepted into the SAMH Data System, in accordance with PAM 155-2.

F-6.5 The Managing Entity is expressly prohibited from expending funds specified as "Direct Services Costs" in **Table 6**, for anything other than a subcontract with a Network Service Provider.

F-7 Financial Reconciliation

F-7.1 The Managing Entity shall submit reports that reflect the Managing Entity's actual operational cost and the actual service cost of the Network in accordance with **Exhibit F2**. The Managing Entity shall submit a final Managing Entity Monthly Expenditure Report annually no later than August 15. Payment for the final month of the fiscal year and carry forward shall not be approved until final reconciliation has been completed by the Department.

F-7.2 The Department will reconcile actual expenditures reported to the funds disbursed to the Managing Entity based on the properly completed Managing Entity Monthly Expenditure Reports and the Managing Entity Monthly Carry Forward Expenditure Reports, according to the following schedule:

F-7.2.1 Quarterly, after September, 30, December 31, March 31, and June 30 each state fiscal year during desk reviews; and

F-7.2.2 Annually, after June 30 each state fiscal year during year end reconciliation.

F-7.3 Any funds disbursed to the Managing Entity that are not expended or were determined to have been expended for unallowable costs shall be considered overpayment to the Managing Entity. The Department shall recoup such overpayments pursuant to **Section 3.5**. In the event an overpayment is identified after the end of a fiscal year and no further invoice is due, the Managing Entity shall remit the overpayment to the Department via check.

F-8 Supplemental Disaster Behavioral Health Provisions

Whenever the Department authorizes Disaster Behavioral Health (DBH) response services, pursuant to **Section C-1.7**, the following provisions shall apply, notwithstanding any provisions in this Contract to the contrary.

F-8.1 Supplemental Payments

F-8.1.1 The terms of **Section F-2** notwithstanding, the Department will pay the Managing Entity each month for the amount of actual expenditures incurred by the Managing Entity or its Network Service Providers in the course of providing FEMA Crisis Counseling Program (CCP) services or other authorized DBH services.

F-8.1.2 Funds designated In **Exhibit F1** for CCP or other DBH services shall be excluded from the fixed payment calculations specified in **Section F2-2**.

F-8.2 Supplemental Allowable Costs

F-8.2.1 The terms of **Section F-6** notwithstanding, allowable costs for DBH response services is expressly limited to the extent such expenditures are allowable under the terms and conditions of any funds awarded to the Department for the purpose of responding to a specific disaster event.

F-8.2.2 In response to each event, the Notice of Award, the Department's DBH application, plan of service, and budget narratives identifying allowable costs shall be incorporated by reference into **Exhibit C2**.

F-8.3 Supplemental Invoices

F-8.3.1 The terms of **Section F-3** notwithstanding, the Managing Entity shall request payment for DBH response services through submission of **Template 24 - Disaster Behavioral Health Managing Entity Supplemental Invoice and Expenditure Report**.

F-8.3.2 The Managing Entity shall submit supplemental invoices on or before the 20th of each month for services provided during the preceding month, unless the Department approves a request for an alternative invoicing schedule in writing.

F-8.4 Supplemental Financial Reconciliations

The terms of **Section F-7** notwithstanding, the Managing Entity shall submit financial reports reflecting actual DBH service expenses of the Managing Entity and its Network Service Providers as scheduled by and using templates distributed by the Department's Disaster Behavioral Health Coordinator. Actual DBH expenses may not include any Managing Entity allocated, administrative, overhead or indirect expenses without express advance written authorization by the Department's Disaster Behavioral Health Coordinator.

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Contract #<u>IH611</u>

Other Cost Accoundiators Title	Other Cost Accumulators	Federal	State	Total	The Amount of Non-Recurring Funds included in Total Amount
ME Operational Costs Managing Entity Administrative Costs	MHSOO	192,519	2,200,826	2,393,345	-
ME Mental Health System of Care	MHOSK	168,000	-	168,000	
ME Housing Coordination ME Care Coordination	MHSHG MHSCD	101.800	103,245 69,219	103,245 171,019	103.245
Mantal Health					
ME Mental Health Services & Support ME Care Coordination (Mental Health)	MH000 MH0CN	2,288,534	21.163.543 345.581	23,452,077 345,581	345.581
ME Stewart-Marchman Behavioral Healthcare	MH011	-	-	-	
ME Apalachee Center - Forensic Treatment Services	MH012 MH013	-	-		-
ME MH UCF-PTSD Clinic for Florida Veterans and First Responders ME MH Starting Point Behaveral Healthcare	MH013 MH014	-	-	-	
ME MH Jewish Family and Children's Services of the Suncoast	MH015	-	-	-	-
ME MH Personal Enrichment MH CSU ME MH John Hopkins All Children's Hospital	MH016 MH017	-			-
ME MH Bridgeway Center Emergency Mobile Access Team	MH019			-	-
ME MH Healthcare Network of Southwest Florida Integrated Behavioral Health Program	MH022	-	-	-	-
ME Early intervention Svs - Psychotic Disorders ME Directions for Living	MH026 MH027	722,894	-	722,894	-
ME David Lawrence Center-Behavloral Health Services	MH031	-		-	-
ME Veterans and Families Pilot Program	MH032 MH037	-	-	-	-
ME Fort Myers Salvation Army-Behavioral Health Services ME Centerstone Florida	MH046	-	-	-	-
ME Specialized Treatment, Education and Prevention Services	MH050	-	-		-
ME Veterans Alternative Retreat Program ME Northside Mental Health Center	MH060 MH061				-
ME Purchase of Residential Treatment Services for Emotionally Disturbed Children and Yout	MH071	-	310.617	310,617	-
ME Community Forensic Beds	MH072	-	67,441	67,441	
ME Florida Assertive Community Treatment (FACT) ME Indigent Psychiatric Medication Program	MH073 MH076	1,197,198	2,353,301 259,382	3,550,497 259,382	
ME Clay Behavioral Health Center - Crisis Prevention	MHOBS	-	-	*	-
ME Citrus Health Network ME Jerome Golden Center	MH094 MH096	-	500,000	500,000	500.000
ME Gracepoint Center	MH819	-	-	-	-
ME MH Community Action Treatment (CAT) Teams	MHCAT	-	1,000,000	1.000,000	-
ME Orlando Emergency Crisis Counseling Services ME Disability Rights Florida Mental Health	MHOER	-			-
ME MH Supported Employment Services	MHEMP		-	-	-
NE MH Forensic Transitional Beds		-	148,210	148.210	-
WE Transition Vouchers Mental Health WE MH Transitional Beds for MH Institution	MHTMH	-	1,156,781	1,156,781	
ME Lifestream Center	MHS50	-	-	~	
ME Centralized Receiving Facilities ME Meridian Behavioral Healthcare	MHSCR MHSMB		*		-
ME FL SOC Expansion and Sustainability Project	MHESP	408,000	-	408,000	-
ME MH State Funded For Profit Sub-recipients	MHSFP	-	892,774	892,774	-
ME Renaissance Center ME Clictes of Care - Cedar Village	MHRM5 MHS51				-
ME Circles of Care - Crisis Stabilization	MHS52	<i>x</i> .	-	-	-
ME Circles of Care - Geropsychiatric Care Center Services ME Grants PATH	MHS55 MH0PG	460,000		460,000	-
AE Florida Youth Transition of Adulthood	MHOTA	-	-	400,000	-
VE MH FL Youth Transition to Adulthood - Year 4	MHTA4			-	-
ME Temporary Assistance for Needy Families (TANF) ME Title XXI Children's Health Insurance Program (Behavioral Health Network)	MHOTB	767,926 802,649	32,313	767,926	-
ME Grant Mlami-Dade County Wraparound FACES	MHOFA	-	-	-	-
ME Community Forensic Multidisciplinary Teams for Hospital Diversion ME Grants Project Launch	MHOFH			-	-
Subtotal Mantal Health	MHOPL	8,687,198	28,229,943	34,897,142	848.581
Substance Abuse					
ME Substance Abuse Senices and Support ME Care Coordination (Substance Abuse)	MS000 MS0CN	6.448,054	6,836,582 148,107	13,284,636 148,107	148.107
ME HIV Services	MS023	516,557	140,107	516,557	140,107
ME Prevention Services ME Projects Expansion of Substance Abuse Services for Prognant Women and their	MS025	2,066,227		2,066,227	
iffected families	MS081		994,374	994,374	-
AE Family Intensive Treatment (FIT)	MS091	-	1,200,000	1,200,000	600,000
ME Temporary Assistance for Needy Families (TANF) ME Special Services for Jerome Golden Center	MSOTB MSOJG	608,275	1,040,584	608.275 1,040.584	-
ME Drug Abuse Comprehensive Coordinating Treatment (DACCO)	MS095				-
AE Here's Help AE SA Memorial Regional Hospital - Matemal Addition Treatment Regram	MS903	-			
ME SA Memorial Regional Hospital - Matemal Addition Treatment Program ME SA Opioid Abuse Pilot Project - Palm Beach	MS904 MS905	-	500,000	500,000	500,000
AE SA Menatee County - Opioid Addiction Recovery Peer Pilot Program	MS906		-		-
ME St. Johns County Sheriff's Office - Detox Program ME SA New Hope Residential SAMH Treatment Project	MS907 MS908		-		
AE FL Partnerships for Success	MSOFS	35,000	-	35,000	35,000
AE FL Partnership for Success - Hospital Pilot	MSOFH MSOPP	450,000	-	450.000	-
AE Prevention Partnership Grant (PPG) ME State Epidemiology Outcomes Workgroup Local	MSOPP	18,385	-	450,000	-
AE FL Targeted Response Opioid Crisis-Hospital	MSOPH	150,000	-	150,000	150,000
AE FL Response to the Opioid Crisis MAT	MSOPM	2,218,129		2,218,129	2,218,129
ME FL Response to the Opipid Crisis School ME SA State Funded For Profit Sub-recipients	MSOP5 MSSFP	70,000		70,000	70,000
AE Transition Vouchers Substance Abuse	MSTRV	-	96,242	96,242	-
Subrets) Subranee Abuse fetal Ali Fund Sources		12,680,827 19,710,145	10,816,899 41,419,122	61,129,267	3,723,349 4,841,081
Supplemental Disceler Behaviorsi Health (DBH) Response Funds JE Hurricano Irma Immediate Services Program	MHHIP	316,128	- 1	316,128	316,128
DR 4337 Humicane Irma Regular Services Program	MHHIR		-	-	-
AE Hurricane Marie Crisis Counseling	MHHMI	+	-	-	<u>ب</u>
Iotal DBH Response Funds		316,128	-	316,128	316,128
Total FY Contract Amount					

CF Standard Integrated Contract 2016

77 (Revised 04/24/2018) Southeast Florida Behavioral Health Network, Inc.

REVISED EXHIBIT F2 – SCHEDULE OF PAYMENTS

F2-1 Table 7 specifies the schedule of payments for the current fiscal year of this Contract, exclusive of Supplemental Disaster Behavioral Health payments as specified in **Section F-8**.

				Tab	e 7 - Schedule of Payments for Fiscal Year 2017-18						
Month of Services	в	FY Contract alance Prior to Payment	Fixed Payment Amount		FY Contract Balance after this Payment		Invoice Packet Due Date	Progress and Expenditure Report Period		Funding mendments After This Payment	Notes
Annual Advance	\$	56,791,034.00	\$	9,465,172.33	\$	47,325,861.67	7/1/2017	N/A			
Jul-17	\$	47,325,861.67	\$	3,943,821.80	\$	43,382,039.87	8/20/2017	July	\$	714,572.00	Amend 32
Aug-17	\$	44,096,611.87	\$	4,008,782.89	\$	40,087,828.98	9/20/2017	August	\$	1,156,781.00	Amend 33
Sep-17	\$	41,244,609.98	\$	4,124,460.99	\$	37,120,148.99	10/20/2017	September	\$	255,000.00	Amend 34
Oct-17	\$	37,375,148.99	\$	4,152,794.33	\$	33,222,354.66	11/20/2017	October	\$	2,093,688.00	Amend 35
Nov-17	\$	35,316,042.66	\$	4,414,505.33	\$	30,901,537.33	12/20/2017	November			
Dec-17	\$	30,901,537.33	\$	4,414,505.33	\$	26,487,032.00	1/20/2018	December			
Jan-18	\$	26,487,032.00	\$	4,414,505.33	\$	22,072,526.67	2/20/2018	January			
Feb-18	\$	22,072,526.67	\$	4,414,505.33	\$	17,658,021.34	3/20/2018	February			
Mar-18	\$	17,658,021.34	\$	4,414,505.33	\$	13,243,516.01	4/20/2018	March			
Apr-18	\$	13,243,516.01	\$	4,414,505.33	\$	8,829,010.68	5/20/2018	April			
May-18	\$	8,829,010.68	\$	4,414,505.34	\$	4,414,505.34	6/20/2018	May	\$	118,192.00	Amend 37
Jun-18	\$	4,532,697.34	\$	4,532,697.34	\$		7/20/2018	June			
Total FY Payments		\$	61,129,267.00								
Supplemental Disaster		\$	316,128.00								
Total Contract Funding		\$	61,445,395.00								

AMENDMENT #0037

F2-2 Table 8 details the schedule of payments for the next Fiscal Year of this Contract, exclusive of Supplemental Disaster Behavioral Health payments as specified in Section F-8.

				Tab	e 8 - 1	Schedule of Payme	ents for Fiscal Yea	r 2018-19		
Month of Services	B	FY Contract alance Prior to Payment	Fixed Payment Amount		FY Contract Balance after this Payment		Invoice Packet Due Date	Progress and Expenditure Report Period	Funding Amendments After This Payment	Notes
Annual Advance	\$	56,288,186.00	\$	9,381,364.33	\$	46,906,821.67	7/20/2018	N/A		
Jul-18	\$	46,906,821.67	\$	3,908,901.80	\$	42,997,919.87	8/20/2018	July		
Aug-18	\$	42,997,919.87	\$	3,908,901.80	\$	39,089,018.07	9/20/2018	August		
Sep-18	\$	39,089,018.07	\$	3,908,901.80	\$	35,180,116.27	10/20/2018	September		
Oct-18	\$	35,180,116.27	\$	3,908,901.80	\$	31,271,214.47	11/20/2018	October		
Nov-18	\$	31,271,214.47	\$	3,908,901.80	\$	27,362,312.67	12/20/2018	November		
Dec-18	\$	27,362,312.67	\$	3,908,901.81	\$	23,453,410.86	1/20/2019	December		
Jan-19	\$	23,453,410.86	\$	3,908,901.81	\$	19,544,509.05	2/20/2019	January		
Feb-19	\$	19,544,509.05	\$	3,908,901.81	\$	15,635,607.24	3/20/2019	February		
Mar-19	\$	15,635,607.24	\$	3,908,901.81	\$	11,726,705.43	4/20/2019	March		
Apr-19	\$	11,726,705.43	\$	3,908,901.81	\$	7,817,803.62	5/20/2019	April		
May-19	\$	7,817,803.62	\$	3,908,901.81	\$	3,908,901.81	6/20/2019	May		
Jun-19	\$	3,908,901.81	\$	3,908,901.81	\$	-	7/20/2019	June		
Total	Total FY Payments		\$	56,288,186.00						