



AGREEMENT SUMMARY

NAME OF OTHER CONTRACTING PARTY
BROWARD BEHAVIORAL HEALTH COALITION, INC. ("BBHC")

PROPOSED ACTION: AMENDMENT, NUMBER 1
DOCUMENT TYPE: Grant Agreement

PURPOSE: The First Amendment to Contract 34346-18 provides additional funding for BARC to provide substance abuse treatment services including medically supervised residential detoxification, intensive residential treatment, non-residential day treatment and outpatient counseling services to eligible Broward County residents age 18 years and older.

SPECIAL PROVISIONS (select if applicable):
LIVING WAGE PROGRAM, SBE SHELTERED MARKET PROGRAM, FEDERAL DBE/ACDBE PROGRAM, CDBE PROGRAM, CBE PROGRAM, M/WBE PROGRAM, REQUIRES IN-KIND MATCH: \$ 470,816 OR %, REQUIRES CASH MATCH: OR %

EFFECTIVE DATES (new agreements only): START, END
EFFECTIVE DATES (amendments only): NO CHANGE, END DATE HAS CHANGED FROM TO, TERM HAS FROM TO

CONTRACT ADMINISTRATOR: NAME: Jack Feinberg, PHONE: 954-357-4830
CONTRACT TYPE: FIRM FIXED PRICE

CONTRACT VALUE (new contracts): ACTUAL, ESTIMATED
CONTRACT VALUE (amendments only): NO CHANGE, ACTUAL, ESTIMATED
Original approved contract value \$4,938,037
Approved previous adjustments
Value of this action \$411,377
Amended total contract value \$5,349,414

PAYMENT METHOD: SCHEDULED OR TIME-BASED
PAYMENT TERMS: BBHC reimburses County for the delivery of service units provided at a maximum monthly prorated amount equal to 1/12th of the total contract amount.

COST ADJUSTMENT: NOT APPLICABLE, FIXED PERCENTAGE %, ACTUAL COST, CPI OR OTHER INDEX, FIXED COST \$, OTHER

EQUITY PROGRAM PARTICIPATION SUMMARY:
Total County established M/WBE, SBE, CDBE, CBE, DBE or ACDBE participation goal for this action or project: N/A
Total contractor-committed M/WBE, SBE, CDBE, CBE, DBE or ACDBE participation goal planned for this action or project: N/A
M/WBE, SBE, CDBE, CBE, DBE or ACDBE participation to date: N/A

RENEWAL OR EXTENSION TERMS: NON-RENEWABLE
TERMINATION AND CANCELLATION PROVISIONS: FOR CAUSE: BY BBHC UPON NO LESS THAN 24 HOURS WRITTEN NOTICE IF NECESSARY FUNDS BECOME UNAVAILABLE. BY BROWARD COUNTY UPON 30 DAYS WRITTEN NOTICE IF MATERIAL BREACH BY BBHC. FOR CONVENIENCE: BY BBHC WITHOUT CAUSE UPON WRITTEN NOTICE OF NO LESS THAN THIRTY (30) CALENDAR DAYS. BY BROWARD COUNTY UPON 90 DAYS WRITTEN NOTICE IF NECESSARY FUNDS BECOME UNAVAILABLE.

DELIVERABLES, MILESTONES OR SCOPE OF THIS ACTION: Monthly provision of substance abuse services eligible for reimbursement.

LIST TERMS, CONSIDERATIONS OR DEVIATIONS FROM STANDARD COUNTY FORM: This Contract is in the BBHC standard contract format. BBHC will sign last following County's approval and signature.