

STATE OF CONNECTICUT DEPARTMENT OF SOCIAL SERVICES

CONTRACT AMENDMENT

Contractor:

THE ACCESS AGENCY, INC.

Contractor Address:

1315 MAIN STREET, SUITE 2, WILLIMANTIC, CT 06226

Contract Number:

163C-SBG-61 / 14DSS5011ZL

Amendment Number:

A2

Amount as Amended:

\$281,896.50

Contract Term as Amended: 10/01/14 - 03/31/16

The contract between The Access Agency, Inc. and the Department of Social Services, which was last executed by the parties and signed by the Commissioner on 01/08/2015, is hereby amended as follows:

- 1. The term of the contract is extended for an additional 6 months and the end date of the contract is changed from 9/30/15 to 3/31/16.
- 2. The total maximum amount payable under this contract is increased by \$73,965.50 from \$207,931 to \$281,896.50 to support initiatives designed to assist clients during the extended time of the contract.
- 3. The budget on page 4 of amendment 1 is deleted in its entirety and replaced by the budget on page 2 of this amendment.

PART I

FINANCIAL SUMMARY

PROGRAM NUMBER:

(Sum of 1 through 6, minus Line 7)

ACCESS AGENCY 163C-SBG 163C-SBG-61/14DSS50117L A2

PROGRAM NUMBER:		163C-SBG-61/14DSS5011ZL A2			
			Requested	Adjustments	Approved
	Contract Amount		\$ 207,931	\$73,965.50	\$281,896.50
	For Amendments On	lv	\$281,896.50	73965.5	\$281,896.50
	Previously Approved Contract	/ -	\$ 207,931	7 0000.0	Ψ20 1,000.00
	Amount of Amendment	, anount	\$73,965.50		\$
11		Cubaataaan	Line Item Total	Adiustus suts	Revised Total
Line #	Item	Subcategory (a)	(b)	Adjustments (c)	(d)
1	UNIT RATE	(4)	(~)	(0)	(4)
	1a. Bed Days				
	1b. Client Advocate		= = = = = = = = = = = = = = = = = = = =		
	1c. Security Deposit				
	1d. Other Unit Rate Costs		* :		
	TOTAL UNIT RATE				
2	CONTRACTUAL SERVICES				× 3-11
	2a. Accounting	- 0 == =			
	2b. Legal				
	2c. Independent Audit		H-1-1		
	2d. Other Contractual Services	500			
	TOTAL CONTRACTUAL SERVICES	500			*
	ABMINISTRATION				
3	ADMINISTRATION 3a. Admin. Salaries	7,782.69		6,000.00	13,782.69
	3b. Admin. Fringe Benefits	2,317.87		1,800.00	4,117.87
	3c. Admin. Overhead	20,750.00		7,397.00	28,147.00
	TOTAL ADMINISTRATION	30,850.56		15,197.00	46,047.56
				,	33,011,100
	DIRECT PROGRAM STAFF				
	4a. Program Salaries	105,574.25		38,550.00	144,124.25
	4b. Program Fringe Benefits	31,433.12		11,565.00	42,998.12
	TOTAL DIRECT PROGRAM	137,007.37		50,115.00	187,122.37
5	OTHER COSTS				
	5a. Program Rent	16,000.00		6,000.00	22,000.00
	5b. Consumable Supplies	8,077.07		1,653.50	9,730.57
	5c. Travel & Transportation	3,475.00		750.00	4,225.00
	5d. Utilities			4	-
	5e. Repairs & Maintenance			4)	1
	5f. Insurance				
	5g. Food & Related Costs	3,000.00			3,000.00
	5h. Other Project Expenses	9,021.00		250.00	9,271.00
	TOTAL OTHER COSTS	39,573.07		8,653.50	48,226.57
6	EQUIPMENT	<u>-</u> <u>-</u> <u>-</u> -			
	PROGRAM INCOME	— e*			
	7a. Fees				
	7b. Other Income				
	TOTAL PROGRAM INCOME				
8	TOTAL NET PROGRAM COST	207,931.00		73,965.50	281,896.50
U	TOTAL NET TROOKAW OOOT	207,001.00		, 0,000.00	201,000.00

All terms and conditions of the original contract, and any subsequent amendments thereto, which were not modified by this Amendment remain in full force and effect.

SIGNATURES AND APPROVALS 163C-SBG-61 / 14DSS5011ZL A2

The Contractor IS NOT a Business Associate under the Health Insurance Portability and Accountability Act of 1996 as amended.

Documentation necessary to demonstrate the authorization to sign must be attached.

CONTRACTOR - THE ACCESS AGENCY, INC.	
1083-	9/29/15
Peter S. DeBiasi, President/CEO	Date
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DEPARTMENT OF SOCIAL SERVICES	
June 3 By	09/2015 Date
Roderick L. Bremby, Columissioner	Date
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OFFICE OF THE ATTORNEY GENERAL

This Contract Amendment template having been reviewed and approved by the OAG, it is exempt from review pursuant a Memorandum of Agreement between the Agency and the OAG dated March 19, 2009.