

- a. The youth's progress toward reducing risk factors and increasing protective factors related to treatment;
- b. Summary of efforts made to address responsivity and criminogenic needs;
- c. Summary of the youth's participation in clinical services provided;
- d. Copy of the youth's treatment plan that summarizes the youth's movement towards completing the objectives stated, participation in services provided, relevant behavior, and barriers identified;
- e. A copy of the revised treatment plan for the next month with revised objectives, strategies, or approaches;
- f. Documentation of all collateral contacts made; and
- g. Copies of either dated and completed weekly sign-in sheets (**Exhibit G**) showing the printed name and signature of each youth and Service Provider conducting the session or copies of TJJD group attendance logs, as determined by program type.
- h. Telehealth session copies must include dates, completed session, and the service provider's name conducting the session.
- i. Telephone session copies must include date, completed session, and service provider's name conducting the session."

3. Pursuant to Section II. Service Provider, D. Referenced in #3 is removed and replaced with

"3. For services provided to TJJD youth for which Service Provider cannot receive payment through Medicaid or insurance, Service Provider shall submit an invoicing cover sheet (**Exhibit F**), monthly invoice, with sign-in sheets (**Exhibit G**) and monthly progress reports (**Exhibit H**) to the designated TJJD billing location (**see Exhibit C**) for services provided, no later than ten (10) working days from the last day of the month for which payment is requested. If a claim is rejected by Medicaid and/or the insurer, Service Provider shall submit an invoice for payment of the claim with the required backup documentation and evidence of claim rejection to the designated TJJD billing location no later than ten (10) working days from the date of notification of rejection. All invoices shall contain the name and TJJD number of the youth for whom services were provided, the date said services were provided, and a description of the services rendered. Completed sign-in sheets (**Exhibit G**) and monthly progress (**Exhibit H**) reports shall be included with the invoice as backup documentation. If the invoice or backup documentation is erroneous or incomplete, it will delay the processing of the invoice. Payment will be made in accordance with Chapter 2251 of the Texas Government Code."

4. Adding Section IV. NOTICES are as follows:

"Required written notices shall be addressed to the Texas Juvenile Justice Department, Office of Business Operations Department, Contracts at mailing address: P.O. Box 12757, Austin, Texas 78711-2757, or physical address: 1801 N Congress Ave., Ste. 13.1400, Austin, TX 78701"

Service Provider Point of Contact:

Name:

Phone:

Email: alwayismore@sapphiretherapy.org

TJJD Point of Contact for Service:

Name: Marqus Butler, Interim Director of Probation & Re-entry Support

Email: marqus.butler@tjjd.texas.gov

And

Name: Amy Dupaty, PS III-Reentry & Parole Aftercare
Email: Amy.dupaty@tjjd.texas.gov

Contracts Point of Contact:

Vickie Griffin, Contract Specialist
Phone: 512-490-7148
Email: Vickie.griffin@tjjd.texas.gov

- 5. Pursuant to Exhibit C, **Service Area and Locations** are revised and attached hereto as **Exhibit C, Service Area and Locations**, and hereby incorporated by reference.
- 6. Pursuant to Exhibit F, **TERMS AND CONDITIONS** are revised and attached hereto as **Exhibit D, TERMS AND CONDITIONS**, and hereby incorporated by reference.
- 7. Pursuant to Exhibit D, the **Sign In sheet** changed to **Exhibit G Sign In sheet**
- 8. Pursuant to Exhibits, Exhibit F, the Invoice Cover Sheet has been added to the contract
- 9. Pursuant to Exhibits, Exhibit H, the Monthly Progress Note has been added to the contract.

IN WITNESS WHEREOF, the parties hereto have made and executed this Amendment as of the day and year last below written.

For Texas Juvenile Justice Department:



Shandra Carter, Executive Director

03/20/2026

Date

For Service Provider:


Signature

Adrian R. Skinner
Printed Name

3/10/26
Date

