

## FIRST AMENDMENT 2014-2015

### TO AGREEMENT FOR SERVICES OF INDEPENDENT CONTRACTOR

This is an amendment (hereafter referred to as the "First Amended Contract") to the Agreement for Services of Independent Contractor, referenced as number **BC 15-028**, by and between the **County of Santa Barbara** (County) and **Sylmar Health & Rehabilitation Center** (Contractor), for the continued provision of services specified herein.

Whereas, Contractor represents that it is specially trained, skilled, experienced and competent to perform the special services required by County and County desires to retain the services of Contractor pursuant to the terms, covenants, and conditions referenced herein.

Whereas, this First Amended Contract incorporates the terms and conditions set forth in the contract approved by the County Board of Supervisors in July 2014.

Whereas, County anticipates that Contractor will provide, at the request of County, a greater number of services than contemplated by the original Agreement, and will incur expenses beyond the value of this Agreement. This amendment adds funds in the amount of \$400,000 for Fiscal Year 14-15 to the prior Agreement maximum of \$600,000, so as to compensate Contractor for additional services to be rendered under this Agreement.

NOW, THEREFORE, in consideration of the mutual covenants and conditions contained herein, County and Contractor agree as follows:

I. Delete Section II, **Maximum Contract Amount**, from Exhibit B, **Financial Provisions**, and replace with the following:

**II. MAXIMUM CONTRACT AMOUNT.**

The Maximum Contract Amount shall not exceed **\$1,000,000** for Fiscal Year 14-15, for a total contract amount during the term of this agreement of **\$2,200,000**. Notwithstanding any other provision of this Agreement, in no event shall County pay Contractor more than this Maximum Contract Amount for Contractor's performance hereunder without a properly executed amendment.

II. Delete Exhibit B-1, **Schedule of Rates and Contract Maximum**, and replace with the following:

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## EXHIBIT B-1 ALCOHOL, DRUG AND MENTAL HEALTH SERVICES SCHEDULE OF RATES AND CONTRACT MAXIMUM

**CONTRACTOR NAME:** Sylmar Health and Rehabilitation Center

**FISCAL YEAR:** 2014-15, 2015-16, 2016-17

Facility	Program	Maximum Daily Rate*
Sylmar	Basic IMD/STP	\$166.78
	Augmented/ Dual-Diagnosis	\$26.84
	Subacute "A"	\$59.67
	Subacute "B"	\$86.40
	Bed Hold	(\$6.65)
<b>Maximum Contract Amount FY 14-15</b>		<b>\$1,000,000</b>
<b>Maximum Contract Amount FY 15-16</b>		<b>\$600,000</b>
<b>Maximum Contract Amount FY 16-17</b>		<b>\$600,000</b>
<b>Total Contract Maximum for July 1, 2014 to June 30, 2017</b>		<b>\$2,200,000</b>

\*Or as otherwise published by the State Department of Healthcare Services. Upon notification of updated rates from DHCS, Contractor shall notify County of the new rates and its intent to adopt the new rates.

CONTRACTOR SIGNATURE: \_\_\_\_\_

STAFF ANALYST SIGNATURE: \_\_\_\_\_

FISCAL SERVICES SIGNATURE: \_\_\_\_\_

**FIRST AMENDMENT 2014-2015**

**SIGNATURE PAGE**

Amendment to Agreement for Services of Independent Contractor between the County of Santa Barbara and Sylmar Health & Rehabilitation Center.

**IN WITNESS WHEREOF**, the parties have executed this Amendment to be effective on the date executed by County.

**ATTEST:**  
MONA MIYASATO, COUNTY EXECUTIVE OFFICER  
CLERK OF THE BOARD

**COUNTY OF SANTA BARBARA**

By: \_\_\_\_\_  
Deputy

By: \_\_\_\_\_  
JANET WOLF, CHAIR  
BOARD OF SUPERVISORS

Date: \_\_\_\_\_

Date: \_\_\_\_\_

**RECOMMENDED FOR APPROVAL:**  
ALCOHOL, DRUG, AND MENTAL HEALTH  
SERVICES  
ALICE GLEGHORN, PH.D., DIRECTOR

**CONTRACTOR:**  
SYLMAR HEALTH & REHABILITATION CENTER

By \_\_\_\_\_  
Director

By: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

**APPROVED AS TO FORM:**  
MICHAEL C. GHIZZONI  
COUNTY COUNSEL

**APPROVED AS TO ACCOUNTING FORM:**  
ROBERT W. GEIS, CPA  
AUDITOR-CONTROLLER

By \_\_\_\_\_  
Deputy County Counsel

By \_\_\_\_\_  
Deputy

**APPROVED AS TO FORM:**  
RAY AROMATORIO  
RISK MANAGER

By: \_\_\_\_\_