

AMENDMENT TO FISCAL YEARS 2009-2014

AGREEMENT FOR SERVICES OF INDEPENDENT CONTRACTOR

between

SANTA BARBARA COUNTY

and

FOUNDATION OF SANTA BARBARA REGIONAL HEALTH AUTHORITY, INC.  
dba DOORWAY TO HEALTH

for the

HEALTHY KIDS PROGRAM  
(Board Contract No. BC 14050)

THIS AMENDMENT is made by and between the County of Santa Barbara, a political subdivision of the State of California (hereafter COUNTY) and FOUNDATION OF SANTA BARBARA REGIONAL HEALTH AUTHORITY, INC, dba Doorway to Health with an address at 4050 Calle Real (hereafter CONTRACTOR) wherein CONTRACTOR agrees to provide and COUNTY agrees to accept the services specified herein.

WHEREAS, the Board approved an Agreement for Fiscal Years 2009 – 2014 on June 3, 2014 with CONTRACTOR (hereafter Agreement) for the provision of dental, vision and medical insurance for impoverished children residing in Santa Barbara County. A copy of the Agreement is attached and incorporated by reference. This is known as the Healthy Kids Program.

WHEREAS, the Board, on June 11, 2014 at the Fiscal Year 2014-15 Budget Hearings, appropriated \$1,000,000 for the Healthy Kids Program.

WHEREAS, the Board has continuously expressed an interest in producing high-quality professional service contracts that provide mutually agreeable terms and conditions, best price for quality service, clear and measurable results, financial and program monitoring based on risk and reasonable administrative expenditures including the acceptance of a contract monitoring policy on July 9, 2013.

WHEREAS, the current Agreement expires on June 30, 2014 and an extension to September 30, 2014 is needed to arrive at mutually agreeable terms between COUNTY and CONTRACTOR for Fiscal Year 2014-15.

WHEREAS, it is anticipated that additional expenses of up to \$275,000 for insurance premiums and services will be incurred by CONTRACTOR during the contract extension period to September 30, 2014.

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

1. Paragraph 4 of the AGREEMENT, entitled TERM is amended to read as follows:  
CONTRACTOR shall commence performance on July 01, 2009 and end performance upon completion, but no later than September 30, 2014 unless otherwise directed by COUNTY or unless earlier terminated.
  
2. Exhibit A entitled *STATEMENT OF WORK, Section I* is amended by adding the following sentence following the chart:  

This agreement shall be extended to September 30, 2014.
  
3. Exhibit A1 entitled *STATEMENT OF WORK Fiscal Year 2013-2014, Section 1*, first sentence is amended to read as follows:
  - I. Performance Measures  

During the period from July 1, 2013 to September 30, 2014 the contractor will performed the following:
  
4. Exhibit B entitled *PAYMENT ARRANGEMENTS Periodic Compensation* is amended by adding Section E to read as follows:
  - E. For CONTRACTOR services to be rendered under this amended Agreement, between July 01, 2014 and September 30, 2014 CONTRACTOR shall be paid a contract amount, including cost reimbursements, not to exceed \$ 275,000.00 per Exhibit A1. The total contract is not to exceed amount of \$5,275,000.00 for the period of July 01, 2009 to September 30, 2014.
  
5. All other terms and conditions of the AGREEMENT remain in effect.

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

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


**COUNTY OF SANTA BARBARA**

By: \_\_\_\_\_  
STEVE LAVAGNINO, CHAIR  
BOARD OF SUPERVISORS

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

**RECOMMENDED FOR APPROVAL:**

MONA MIYASATO  
COUNTY EXECUTIVE OFFICER

By:   
Dennis Bozovich  
Assistant to the County Executive

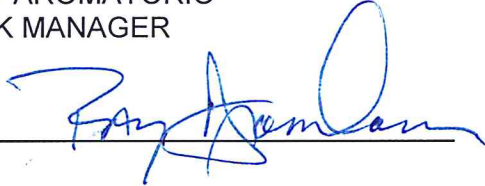
**APPROVED AS TO FORM:**

MICHAEL C. GHIZZONI  
COUNTY COUNSEL

By:   
Deputy County Counsel

**APPROVED AS TO FORM:**

RAY AROMATORIO  
RISK MANAGER

By: 

**CONTRACTOR:**

FOUNDATION OF SANTA BARBARA  
REGIONAL HEALTH AUTHORITY DBA  
DOORWAY TO HEALTH

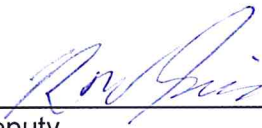
By:   
Authorized Representative

Name: Amy Sim

Title: General Accounting Manager

**APPROVED AS TO ACCOUNTING FORM:**

ROBERT W. GEIS, CPA  
AUDITOR-CONTROLLER

By:   
Deputy