

**FIRST AMENDMENT  
TO THE AGREEMENT FOR SERVICES OF INDEPENDENT CONTRACTOR**

**THIS FIRST AMENDMENT** to the Agreement for Services of Independent Contractor referenced as **BC #21-060** (hereafter First Amended Agreement), is made by and between the **County of Santa Barbara** (County or Department) and **Aegis Treatment Centers, LLC** (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 herein set forth;

**WHEREAS**, on June 22, 2021, the County Board of Supervisors authorized the County to enter into an Agreement for Services of Independent Contractor with Contractor, referred to as BC 21-060, for the provision of substance use disorder services for adult clients, for a total Maximum Contract Amount not to exceed **\$12,600,000**, inclusive of \$4,200,000 for FY 2021-2022, \$4,200,000 for FY 2022-2023, and \$4,200,000 for FY 2023-2024, for the period of July 1, 2021 through June 30, 2024; and

**WHEREAS**, this First Amended Agreement adds adolescent services to the Agreement and updates the Drug Medi-Cal (DMC) rates for Narcotic Treatment Program (NTP) and Medication-Assisted Treatment (MAT) in Exhibit B-1 (Schedule of Rates and Contract Maximum) in accordance with Department of Health Care Services (DHCS) Information Notice #21-049, with no change to the Maximum Contract Amount, and incorporates the terms and conditions set forth in the original Agreement approved by the County Board of Supervisors on June 22, 2021, except as modified by this First Amended Agreement.

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

- I. Delete Exhibit A-2 – Statement of Work: Opioid Treatment in its entirety and replace with the following:**


A-4/A

**SIGNATURE PAGE**

First Amended Agreement for Services of Independent Contractor between the **County of Santa Barbara and Aegis Treatment Centers, LLC.**

**IN WITNESS WHEREOF**, the parties have executed this First Amended Agreement to be effective on July 1, 2021.

**COUNTY OF SANTA BARBARA:**

By:   
BOB NELSON, CHAIR  
BOARD OF SUPERVISORS

Date: 11-16-2021

**ATTEST:**

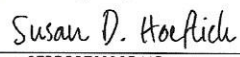
MONA MIYASATO  
COUNTY EXECUTIVE OFFICER  
CLERK OF THE BOARD

By:   
Deputy Clerk

Date: 11-16-21

**CONTRACTOR:**

**Aegis Treatment Centers, LLC**

DocuSigned by:  
By:   
Authorized Representative

Name: Susan D. Hoeflich

Title: Vice President, Managed Care

Date: 11/3/2021

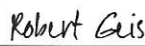
**APPROVED AS TO FORM:**

RACHEL VAN MULLEM  
COUNTY COUNSEL

DocuSigned by:  
By:   
Deputy County Counsel

**APPROVED AS TO ACCOUNTING FORM:**

BETSY M. SCHAFFER, CPA  
AUDITOR-CONTROLLER

DocuSigned by:  
By:   
Deputy

**RECOMMENDED FOR APPROVAL:**

PAM FISHER, PSY.D., ACTING DIRECTOR  
DEPARTMENT OF BEHAVIORAL  
WELLNESS

DocuSigned by:  
By:   
Acting Director

**APPROVED AS TO INSURANCE FORM:**

RAY AROMATORIO, RISK MANAGER  
DEPARTMENT OF RISK MANAGEMENT

DocuSigned by:  
By:   
Risk Manager

---

**EXHIBIT A-2**  
**STATEMENT OF WORK: ADP**  
**OPIOID TREATMENT**

---

**1. PROGRAM SUMMARY.**

Contractor shall provide Opioid Treatment Program (OTP) services for adult (age 18 and over) and adolescent (ages 12 through 17) narcotic dependent individuals (hereafter, “the Program”). Contractor will also provide buprenorphine as a detoxification or maintenance medication, as clinically appropriate. Opioid Treatment Programs (OTP) are medical model services, and clinically supervised by board certified medical doctors. OTP services include methadone dosing and counseling services that are not necessarily time limited. Counseling services can be either individual and/or group services. OTP programs have specific treatment assessment and planning criteria that must be followed. The Program shall be licensed as a Narcotic Treatment Program and Drug Medi-Cal certified.

The Program will be located at:

- A. 4129 State St., Suite B, D, E and F Santa Barbara, CA 93110; and
- B. 115 E. Fesler St. Santa Maria, CA 93454.

**2. PROGRAM GOALS.**

- A. Promote self-sufficiency and empower substance users to become productive and responsible members of the community;
- B. Reduce recidivism and increase community safety;
- C. For Detoxification services:
  - 1. The purpose of detoxification is to provide a safe withdrawal from the drug(s) of dependence and enable the individual to become drug free;
  - 2, Detoxification services support a smooth transition for individuals from detoxification to community support services with the development and documentation of a referral plan appropriate for each individual.

**3. SERVICES.**

The Contractor shall provide:

- A. **Opioid Treatment Program (OTP) Services.** OTP includes the following services:
  - 1. **OTP Detoxification Treatment - Dosing and Counseling Services** - for the sole purpose of detoxification and the planned withdrawal from narcotic drug dependence. In OTP Detoxification Treatment, replacement narcotic therapy is used in decreasing, medically determined dosage levels for a period not more than 21 days, to reduce or eliminate opiate addiction, while the client is provided treatment services.



2. **OTP Maintenance Treatment - Dosing and Counseling Services** – includes methadone or buprenorphine, group and individual counseling. OTP Maintenance is used in sustained, stable, medically determined dosage levels for a period in excess of 21 days, to reduce or eliminate chronic opiate addiction, while the client is provided a comprehensive range of treatment services.
  3. **OTP Prescription Medications** - Opioid Treatment Programs are required to offer and prescribe medication to clients, covered under the DMC-ODS formulary including:
    - i. **Methadone.** Contractor shall provide Methadone as a replacement therapy or for a planned detoxification.
    - ii. **Buprenorphine** - an opioid agonist-antagonist medication (Suboxone) or a pure opioid agonist (Subutex) used to treat opioid use disorders. Buprenorphine can be indicated for opioid detox or as a maintenance medication. Suboxone has a “ceiling effect” that can mitigate excessive use or overconsumption and does not require observed daily dosing in an OTP clinic. Subutex is commonly restricted to pregnant clients.
    - iii. **Disulfiram** – a medication used to treat alcohol use disorder. Disulfiram prevents the metabolism of alcohol, thus discouraging drinking making a client sick when alcohol is consumed
    - iv. **Naloxone** – a fast-acting opioid antagonist, administered as a nasal spray or injectable, to reverse opioid overdose. Naloxone administration immediately reverses the agonist effects of opioid intoxication, respiratory depression, throwing a client into immediate life-saving withdrawal.
- B. Medical Necessity Determination.** Contractor shall provide OTP services to clients if determined medically necessary in accordance with the Intergovernmental Agreement, Agreement Number 18-95148, and Title 22 California Code of Regulations (C.C.R.) Sections 51303 and 51341.1. Services shall be prescribed by a physician, and are subject to utilization controls, as specified in Title 22 C.C.R. Section 51159. The OTP services shall be directed at stabilization, rehabilitation, and detoxification of persons who are opiate addicted and have substance abuse diagnoses.
- C. Intake, Assessment and Diagnosis.**
- Contractor shall provide:
1. Client intake;
  2. Initial and periodic assessment by qualified personnel, as defined in Title 42 Code of Federal Regulations (C.F.R.) Section 8.12 (d), to determine the most appropriate combination of services and treatment (42 C.F.R. § 8.12 (f)(4)); and
  3. Diagnosis by qualified personnel who have determined, using accepted medical criteria, that the client is currently addicted to an opioid drug, and that the person became addicted at least one (1) year before admission for treatment (42 C.F.R. § 8.12).

4. The intake and service assessment shall be conducted face-to-face on the same day that the client is admitted. Due to the COVID-19 pandemic, Contractor may conduct the intake and service assessment virtually by video conference or telephonically to the extent and for the duration authorized by the Department of Health Care Services.
- D. **Medical Supervision.** Contractor shall provide all medical supervision, including an initial full medical examination completed within fourteen (14) days following admission, supervision of Methadone administration (42 C.F.R. § 8.12), laboratory tests, and medical direction (22 C.C.R. § 51341.1).
- E. **Drug Screening.** Contractor shall provide random urine drug screening at least monthly for every client in maintenance treatment, in accordance with Title 9 C.C.R. Section 10310.
- F. **Group Counseling.** Contractor shall provide group counseling – discussion in which one or more therapists or counselors treating two or more clients at the same time, focusing on the needs of the individuals served, as specified in Title 9 C.C.R. Section 10345. For DMC reimbursement, groups must have a minimum of two (2) and a maximum of twelve (12) persons; at least one (1) must be a Medi-Cal beneficiary. A unit of service is reimbursed in 10-minute increments for group counseling sessions. Group counseling services shall be provided in compliance with all relevant county, state, and federal requirements that are now in force or that may hereafter be in force including, but not limited to, DHCS Behavioral Health Information Notice No: 20-009.
- G. **Individual Counseling.** Contractor shall provide individual counseling – discussion between a beneficiary and a therapist or counselor, as specified in Title 9 C.C.R. Section 10125, on issues identified in the client’s treatment plan. Telephone contacts, home visits and hospital visits do not qualify as Medi-Cal reimbursable units of service. A unit of service is reimbursed in 10-minute increments for individual counseling sessions. Individual counseling services shall be provided in compliance with all relevant county, state, and federal requirements that are now in force or that may hereafter be in force including, but not limited to, DHCS Behavioral Health Information Notice No: 20-009.
- H. **Counseling.** Beneficiaries shall receive between 50 and 200 minutes of counseling per calendar month with a therapist or counselor, and, when medically necessary, additional services may be provided.
- I. **Medical Psychotherapy.** Contractor may provide medical psychotherapy – counseling services consisting of a discussion conducted by the Medical Director of the OTP on a one-on-one basis with the patient. Medical psychotherapy services shall be provided in compliance with all relevant county, state, and federal requirements that are now in force or that may hereafter be in force including, but not limited to, DHCS Behavioral Health Information Notice No: 20-009.
- J. **Medi-Cal Eligibility Verification.** Contractor shall be responsible for verifying client’s Drug Medi-Cal eligibility status and will take steps to reactivate or establish eligibility where none exists.



**K. Courtesy Dosing.** An OTP/NTP provider may provide replacement narcotic therapy to visiting beneficiaries approved to receive services on a temporary basis (less than 30 days) in accordance with Title 9, C.C.R. Section 10295. Prior to providing replacement narcotic therapy to a visiting beneficiary, an OTP/NTP provider must comply with Title 9, C.C.R. Section 10210(d).

**L. Fee-For-Service.** (Applicable to OTP/NTP providers enrolled as Medi-Cal fee-for-service providers). Contractor shall not seek reimbursement from a beneficiary for SUD treatment services, if the OTP/NTP provider bills the services for treatment of concurrent health conditions to the Medi-Cal fee-for-service program.

**M. Perinatal Services.**

Contractor shall provide perinatal substance use disorder treatment services to pregnant and postpartum women and their children. Contractor will provide perinatal services in a “perinatal certified substance use disorder program”, meaning a Medi-Cal certified program which provides substance use disorder services to pregnant and postpartum women with substance use disorder diagnoses. Medical documentation that substantiates the client’s pregnancy and the last day of pregnancy shall be maintained in the client record. Perinatal clients are eligible for longer stays based on medical necessity. Perinatal clients may receive lengths of stay up to the length of the pregnancy and postpartum period (i.e. up to the last day of the month in which the 60th day after the end of pregnancy occurs). Perinatal Services will include:

1. Individual, group counseling and drug testing that is in alignment with the current State of California Perinatal Practice Guidelines, and any updates thereto:  
[https://www.dhcs.ca.gov/Documents/CSD\\_KS/CSD%20Perinatal%20Services/Perinatal-Practice-Guidelines.pdf](https://www.dhcs.ca.gov/Documents/CSD_KS/CSD%20Perinatal%20Services/Perinatal-Practice-Guidelines.pdf);
2. Services shall address treatment and recovery issues specific to pregnant and postpartum women, such as relationships, sexual and physical abuse, and development of parenting skills;
3. Mother/child habilitative and rehabilitative services, such as parenting skills and training in child development;
4. Access to services, such as arrangement for transportation;
5. Education to reduce harmful effects of alcohol and drugs on the mother and fetus or the mother and infant; and
6. Coordination of ancillary services, such as medical/dental, education, social services, and community services.

**N. Adolescent Services.**

Aegis Treatment Centers (Contractor or ATC) will provide the following services with County ADP to any adolescent (ages 12 through 17) client who meets medical necessity for OTP/NTP services:

1. Each case will be considered on a case-by-case basis;

2. Any consideration of adolescent OTP/NTP service delivery must comply with requirements of Title 9 of the CA Health and Safety Code;
3. Contractor will comply with providing the U.S. Food and Drug Administration (FDA)-approved medications listed in DHCS Behavioral Health Information Notice (IN) #21-024 and in the County of Santa Barbara's DMC-ODS Intergovernmental Agreement (IA);
4. Any adolescent client considered for OTP/NTP treatment services will be assessed and triaged by LPMH/LPHA County ADP staff;
5. Any adolescent client considered for OTP/NTP treatment services must be oriented to and agree to OTP/NTP services;
6. Evidenced-based-practices will usually indicate buprenorphine as the most appropriate medication for adolescents within an OTP/NTP, but this does not preclude the need for the other FDA approved medications if indicated;
7. Because it is clinically contraindicated to mix adult and adolescent clients for long term care within an OTP/NTP, Contractor will provide initial assessment, medical clearance, induction services (if buprenorphine is used), initial and ongoing medication prescription and medical management of the medications;
8. Because the County ADP adolescent substance use disorder (SUD) system of care provides more appropriate and specialized behavioral treatment services than current OTP/NTP behavioral services within ATC, all adolescents receiving OTP/NTP treatment services will receive behavioral treatment in the County SUD system of care outside of ATC; and
9. Individual care coordination services will be provided by County ADP staff to all adolescents receiving OTP/NTP services with ATC to ensure seamless integration between County ADP and ATC for client Treatment/Recovery success.

**4. CLIENTS.**

- A. Contractor shall provide services as described in Section 3 (Services) to adult (ages 18 and over) and adolescent (ages 12 through 17) clients, up to the funding levels projected in Exhibit B-1 ADP for this Program.
- B. Contractor shall admit clients with co-occurring disorders as appropriate.

**5. REFERRALS.**

- A. **Referrals.** Contractor shall receive referrals from the Department of Behavioral Wellness, Parole, Probation, Courts, CalWORKs staff, other County agencies, other Substance Use Disorder (SUD) providers, and self-referrals.
  1. Contractor shall receive referral via phone, written referral, or walk in.
  2. Referrals (other than self-referrals), shall be accompanied by written documentation.



- B. Notice to Referral Source.** Contractor shall notify the referral source, within 7 days of being informed by the client of his or her being referred for treatment, to confirm that the client has been scheduled for an intake appointment, pending Contractor's determination that substance use disorder services are medically necessary, consistent with Title 22 C.C.R. Sections 51303 and 51341.1.
- C. Walk-Ins.** Contractor shall immediately screen a walk-in beneficiary to determine the necessity for OTP services. If the screening determines OTP services, the subcontracted OTP provider shall ensure the beneficiary receives an ASAM assessment the same day. If OTP services are not indicated, the Contractor shall refer the beneficiary to the Access Line for screening. The Access Line is a centralized screening and referral center for all treatment services with the exception of Opioid Treatment Programs (OTP) such as Aegis TC. Clients can either call the Access Line directly or with contracted program staff at (888) 868-1649.

## **6. ADMISSION PROCESS.**

- A. Client Interview.** Contractor shall interview client to determine client's appropriateness for the Program using required ASAM criteria at intake. Contractor shall ensure a face-to-face appointment within 3 business days of a request for service.
- B. Admit Referred Clients.** Contractor shall admit clients referred by sources described in Section 5 (Referrals) unless the client meets one or more conditions specified in Section 8 (Exclusion Criteria), or if space is not available in the Program.
- C. Admission Packet.** At Contractor's intake meeting with client, Contractor shall complete an admission packet with the following information:

  - 1. Consent to Treatment form, Program rules and guidelines, signed by client;
  - 2. Release of Information form, signed by client;
  - 3. Financial assessment and contract for fees;
  - 4. Personal/ demographic information of client, as described in State of California Standards for Drug Treatment Programs, including:
    - i. Social, economic and family background;
    - ii. Education;
    - iii. Vocational achievements;
    - iv. Criminal history,
    - v. Legal status;
    - vi. Medical history;
    - vii. Psychiatric/psychological history;
    - viii. Drug history; and
    - ix. Previous treatment.
  - 5. Emergency contact information for client.



- D. **Notify Referring Party if Client Not Accepted.** Contractor shall notify referring party if client is not accepted into the Program, based on Section 8 (Exclusion Criteria), within one business day of receiving the initial referral.
- E. **Waiting List.** Should space not be available in the Program, Contractor shall place client on a waiting list, and refer client to interim services.

7. **DOCUMENTATION REQUIREMENTS.**

A. **Data Entry Into County's MIS System.** Contractor shall enter all California Outcomes Measurement System (CalOMS) treatment data and all other client data required by County into the County's Management Information System (MIS) no later than seven (7) days after client entry into Program. Contractor shall complete an annual update of CalOMS treatment data on the anniversary of client's admission to the Program (for clients in the same treatment service for one year or more), and when the client is discharged from the treatment service. The client must be discharged from treatment if there has been no client contact within thirty (30) days. The date of discharge shall be the last face to face contact.

B. **Needs Assessment.**

Prior to developing a client's initial OTP Maintenance treatment plan, as required in Section 7.C (Treatment Plans) below, the primary counselor shall complete and document in the client's record a needs assessment for the client, which shall include:

1. A summary of the client's psychological and sociological background, including his or her educational and vocational experience.
2. An assessment of the client's needs for:
  - i. Health care as recorded within the overall impression portion of the physical examination;
  - ii. Employment;
  - iii. Education; and
  - iv. Psychosocial, vocational rehabilitation, economic, and legal services.

C. **Treatment Plans.**

1. **Initial and Updated Treatment Plans.**

Contractor shall complete initial and updated treatment plans in accordance with Title 22, California Code of Regulations (C.C.R.), Section 51341.1 for all OTP clients.

2. **OTP Detoxification Treatment Plan Requirements.**

OTP Detoxification Treatment Plan Requirements. Contractor shall develop an individualized treatment plan for each client which shall include:

- i. Provisions to assist the client to understand illicit drug addictions and how to deal with them.

- ii. Provisions for furnishing services to the client as needed when the period of detoxification treatment is completed.
- iii. The treatment services required and a description of the role they play in achieving the stated goals.
- iv. The type and frequency of scheduled counseling services.

**3. OTP Maintenance Treatment Plan Requirements.**

Contractor shall develop an individualized treatment plan for each client, as specified in Title 9 C.C.R. Section 10305(b). The treatment plan shall include:

- i. **Counselor's Name.** The primary counselor's name and the date the client was assigned to the counselor.
- ii. **Goals.** Goals to be achieved by the client based on the needs identified in the Needs Assessment and with estimated target dates for attainment in accordance with the following:
  - a. **Short-term goals:** those which are estimated to require ninety (90) days or less for the client to achieve; and
  - b. **Long-terms goals:** those which are estimated to require a specified time exceeding ninety (90) days for the client to achieve.
  - c. **Specific behavioral tasks** the client must accomplish to complete each short-term and long-term goal.
- iii. **Counseling Services to Be Provided.** A description of the type and frequency of counseling services that are to be provided to the client, as required in Title 9 C.C.R. Section 10345.
- iv. **Effective Date.** An effective date based on the date the primary counselor signed the initial treatment plan.

**8. EXCLUSION CRITERIA.**

On a case-by-case basis, clients may be excluded from receiving services. Clients must be informed of exclusion from the program in compliance with *Department Policy #4.010 Notice of Adverse Benefit Determination*. The following may be cause for client exclusion from the program:

- A. Client threat of or actual violence toward staff or other clients;
- B. Rude or disruptive behavior that cannot be redirected.
- C. Client does not meet medical necessity criteria, consistent with Title 22 C.C.R. Sections 51303 and 51341.1.

**9. DISCHARGES.**

- A. **Discharge Planning Required.** Contractor shall develop a Discharge Plan for clients prior to discharge, in coordination with the referring party and client, as detailed in the State of California Alcohol and/or Other Drug Program Certification Standards.



- B. Contents of Discharge Plan.** The Discharge Plan shall include:
1. Recommendations for post-discharge, including a comprehensive discharge plan in accordance with Title 22 C.C.R. Section 51341.1(i)(h)(iii)(c)(B)(6), that shall include, but are not limited to, all of the following: a description of each of the beneficiary's relapse triggers, a plan to assist the beneficiary to avoid relapse when confronted with each trigger, and a support plan;
  2. Linkages to other services, where appropriate;
  3. Reason for discharge; and
  4. Clinical discharge summary.
- C. Provide Client with Discharge Plan.** Contractor shall give client one copy of the Discharge Plan, and place one copy in the client's file.
- D. Document Discharge Information in Department MIS System.** Contractor shall document discharge information in CalOMS via the Behavioral Wellness MIS system no later than thirty (30) days following discharge.
- E. Discharge Client if No Services Received Within 30 Day Period.** Any client that does not receive any service within a thirty (30) day period shall be discharged, as of the date of last service, per CalOMS guidelines.

**II. Delete Exhibit B-1 – Schedule of Rates and Contract Maximum in its entirety and replace with the following:**

**EXHIBIT B-1 – ADP  
SCHEDULE OF RATES AND CONTRACT MAXIMUM  
FY 21-24**

(Applicable to programs described in Exhibits A-2 and A-3)

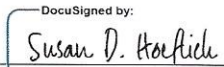
CONTRACTOR NAME: Aegis

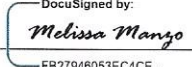
FISCAL YEAR: 2021-24

Drug Medi-Cal /Non Drug Medi-Cal	Service Type	Mode	Service Description	Unit of Service	DMC Service Function Code	Ad Cost Report Service Code	UOS Rate Regular DMC*	UOS Rate Perinatal DMC*
Drug Medi-Cal Billable Services	Outpatient	15	ODS NTP Methadone - Dosing	Daily	120	120	\$14.65	\$15.78
			ODS NTP Methadone - Individual Counseling	10 minutes	120	120	\$17.18	\$24.60
			ODS NTP Methadone - Group Counseling	10 minutes	120	120	\$4.06	\$8.22
			ODS NTP Buprenorphine - Mono	Daily	117	117	\$30.02	\$35.20
			ODS NTP Buprenorphine - Naloxone Combinat	Daily	117	117	\$30.81	\$35.98
			ODS NTP Disulfiram	Daily	118	118	\$10.88	\$11.05
			ODS NTP Naloxone: 2-pack Nasal Spray	Dispensed according to need	119	119	\$144.66	\$144.66

	PROGRAM Narcotic Treatment Program	TOTAL
GROSS COST:	\$ 4,200,000	\$ 4,200,000
LESS REVENUES COLLECTED BY CONTRACTOR:		
PATIENT FEES		\$ -
CONTRIBUTIONS		\$ -
OTHER (LIST):		\$ -
TOTAL CONTRACTOR REVENUES	\$ -	\$ -
MAXIMUM CONTRACT AMOUNT PAYABLE:	\$ 4,200,000	\$ 4,200,000

SOURCES OF BEHAVIORAL WELLNESS FUNDING FOR MAXIMUM CONTRACT AMOUNT**		
Drug Medi-Cal	\$ 4,200,000	\$ 4,200,000
Realignment/SAPT - Discretionary		\$ -
Realignment/SAPT - Perinatal		\$ -
Realignment/SAPT - Adolescent Treatment		\$ -
Realignment/SAPT - Primary Prevention		\$ -
CalWORKS		\$ -
Other County Funds		\$ -
<b>FY21-22 TOTAL (SOURCES OF BEHAVIORAL WELLNESS FUNDING)</b>	<b>\$ 4,200,000</b>	<b>\$ 4,200,000</b>
<b>FY22-23 TOTAL (SOURCES OF BEHAVIORAL WELLNESS FUNDING)</b>	<b>\$ 4,200,000</b>	<b>\$ 4,200,000</b>
<b>FY23-24 TOTAL (SOURCES OF BEHAVIORAL WELLNESS FUNDING)</b>	<b>\$ 4,200,000</b>	<b>\$ 4,200,000</b>
<b>TOTAL CONTRACT AMOUNT PAYABLE:</b>	<b>\$ 12,600,000</b>	<b>\$ 12,600,000</b>

CONTRACTOR SIGNATURE:    
DocuSigned by: Susan D. Hoeflich  
3FB05CE622CD415...

FISCAL SERVICES SIGNATURE:    
DocuSigned by: Melissa Mango  
FB27946053EC4CE...

\*\*\*Funding sources are estimated at the time of contract execution and may be reallocated at Behavioral Wellness' discretion based on available funding Rate schedule is based on FY 21-22 rates. Rates will automatically be updated when the State issues the approved rate schedule for the specific Fiscal Year. Rate changes do not require an amendment.



**III.** This First Amended Agreement may be executed in any number of counterparts, and each of such counterparts shall for all purposes be deemed to be an original; and all such counterparts, or as many of them as shall be preserved undestroyed, shall together constitute one and the same instrument.

**IV.** All other terms shall remain in full force and effect.