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Contract Number
21-148 A-1

SAP Number

Arrowhead Regional Medical Center

Department Contract Representative	<u>William L. Gilbert</u>
Telephone Number	<u>(909) 580-6150</u>
Contractor	<u>Hyland Software, Inc.</u>
Contractor Representative	<u>Noreen Kilbane</u>
Telephone Number	<u>(440) 788-5000</u>
Contract Term	<u>March 2, 2021 through march 1, 2026</u>
Original Contract Amount	<u>\$2,067,788.44</u>
Amendment Amount	<u>-\$100,000.00</u>
Total Contract Amount	<u>\$1,967,788.44</u>
Cost Center	<u>9184834200</u>

Briefly describe the general nature of the contract: Ameridment No. 1 to Agreement No. 21-148 with Hyland Software, Inc. to decrease the contract amount by \$100,000 from \$2,067,788.44 to \$1,967,788.44 for the total fixed fee cost of the Statement of Work with no change to the contract period of March 2, 2021 through March 1, 2026

FOR COUNTY USE ONLY

Approved as to Legal Form

Bonnie Uphold
Bonnie Uphold, Deputy County Counsel

Date 3-7-2022

Reviewed for Contract Compliance

Date _____

Reviewed/Approved by Department

William L. Gilbert
William L. Gilbert, Director

Date 3/8/22



CHANGE ORDER

San Bernardino
County on Behalf of
Arrowhead Regional
Medical Center

Signed Proposal Dated:
2-Mar-2021

Document Version: 2

Document Date: 4-Jan-2022

THIS PROPOSAL WILL EXPIRE **90**
DAYS FROM THE ABOVE DATE
UNLESS SIGNED BY BOTH PARTIES.

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Details in this document are based on information given to Hyland Software Inc. and its affiliates and, therefore, subject to change. This document does not represent a commitment on the part of Hyland Software Inc. and its affiliates until executed by both parties and incorporated by reference into a services contract in accordance with the terms of such services contract.

The information contained in this document is confidential and proprietary to Hyland Software Inc. and its affiliates. It is provided solely for the use of San Bernardino County on Behalf of Arrowhead Regional Medical Center to describe the approach and work being proposed. This information may not be used for any other purpose and may not be further distributed. Any recipient of this document who is unwilling to agree to these conditions should return the document to Hyland Software Inc. and its affiliates without reviewing the contents or making further distribution. Review of this document shall constitute agreement to the restrictions stated above.

RFS# 42674518 (Hyland internal request tracking number)
HSI#: 39663 (Hyland internal Customer number)
FF Project ID: PR-021808 (Hyland internal project tracking number)

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OVERVIEW OF CHANGED CONTRACT

The purpose of this Change Order is to define the goals, scope, fees, and other important details supporting the delivery of Professional Services for one or more projects defined within.

Hyland Software Inc. ("Hyland") and San Bernardino County on Behalf of Arrowhead Regional Medical Center ("Customer") have entered into Professional Services Proposal #EU-0000-22836200; the parties now desire to revise the services described in the aforementioned agreement and by executing this Change Order agree to the changes specified herein to the aforementioned agreement. Upon execution of this Change Order, the parties mutually agree that this Change Order shall be and become an amendment to the aforementioned agreement.

DESCRIPTION OF CHANGE(S)

In replacement of services provided under the aforementioned agreement, Hyland will provide the following services:

Reduce Fixed Fee cost of the SOW by \$100,000 due to reduced work effort in the un-stubbing and temporary storage of files before being shipped to Hyland GCS.

Assumptions

Except as amended herein, all scope, terms and pricing remain the same.

The Fixed Fee cost reduction will be applied to Milestone 7 - Delivery of Production (Bulk Load) Reconciliation Report.

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PRICING

Customer acknowledges that the Professional Services pricing is based solely on the information provided to Hyland and referenced in the above Description of Changes.

Arrowhead RMC: Meditech Comprehensive Conversion - EU-0000-22836200	Totals (USD)
Original Contract	\$466,000.00
Change Order dated 4-Jan-2022	-\$100,000.00
Revised Contract	\$366,000.00

Payment Milestones		
This Change Order represents fixed price Professional Services Payment milestones for this Change Order will be invoiced as listed below.		
Milestone	Description	Amount
Change Order dated 4-Jan-2022		
7	Delivery of Production (Bulk Load) Reconciliation Report	\$16,500.00

The Change Order Amount specified above is an estimate only. The parties agree that any Services described in this Change Order that have been performed prior to the execution of this Change Order by the parties nevertheless shall be covered by all terms and conditions of this Change Order.

The fixed price was determined based on information provided to Hyland by Customer and assumptions developed by the parties based upon that information. In the event that (a) any such information is inaccurate or necessary information was not provided to Hyland, (b) Customer fails to fulfill its obligations during this Work Agreement, or (c) reasonably unforeseen technical or system limitations exist or arise, and any of such causes materially and adversely affect the performance of the services, this fixed price shall be adjusted equitably to reflect the impacts of such circumstances.

SIGNATURES

San Bernardino County on Behalf of
Arrowhead Regional Medical Center

By:



Name: (Print) **Curt Hagman**

Title: **Chairman, Board of Supervisors**

Title:

Date:

MAR 15 2022

Hyland Software, Inc.

By:

DocuSigned by:
John Rice
C64272617B154G7..

Name: (Print) John Rice

Title: VP, Global Services

Date: January 31, 2022 | 09:11:40 EST

SIGNED AND CERTIFIED THAT A COPY OF THIS DOCUMENT HAS BEEN DELIVERED TO THE CHAIRMAN OF THE BOARD LYNIA MONEILL
Clerk of the Board of Supervisors of the County of San Bernardino

END OF DOCUMENT ***

By _____



Deputy