THE INFORMATION IN THIS BOX IS NOT A PART OF THE CONTRACT AND IS FOR COUNTY USE ONLY



Contract Number 24-1510

SAP Number

Arrowhead Regional Medical Center

Department Contract Representative William L. Gilbert **Telephone Number** (909) 580-6150 Contractor Careport Health, LLC **Contractor Representative** Chris Sojka **Telephone Number** (913) 378-8610 Contract Term July 1, 2024 - June 30, 2029 **Original Contract Amount** \$500,000 Amendment Amount **Total Contract Amount** \$500,000 **Cost Center**

Briefly describe the general nature of the contract: Order Form with Careport Health, LLC, an affiliate of WellSky Corporation, subject to the terms of the Agreement with WellSky Corporation, for the patient placement referral system, in the amount of \$100,000 annually for the contract period of July 1, 2024 through June 30, 2029.

FOR COUNTY USE ONLY		
Approved as to Legal Form	Reviewed for Contract Compliance	Reviewed/Approved by Department
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Bonnie Uphold, Supervising Deputy County Counsel		William V Gilbert, Director
Date 3/1/2024	Date	Date 3/5/24

Non-Standard Contract Coversheet

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Revised 3/14/19

CAREPORT HEALTH, LLC ORDER FORM

This Order Form ("Order") is dated as of last signature below ("Effective Date") between SAN BERNARDINO COUNTY on behalf of Arrowhead Regional Medical Center with offices at 400 N Pepper Ave, COLTON CA 92324 ("Client") and CarePort Health, LLC, an Affiliate of WellSky Corporation, with offices at 11300 Switzer Road Overland Park, KS 66210 ("CarePort") for the products and services set forth herein. Order is subject to and hereby incorporates the terms and conditions of the Master License and Services Agreement entered into between Client and WellSky Corporation and Affiliates, dated February 27, 2024 ("Agreement"), except to the extent explicitly identified in this Order.

This Order consists of the following Attachments:

- Attachment 1 Scope of Use, Term, Pricing, and Payment Terms
- Attachment 2 Additional Terms

Any questions or changes to this Order, please contact Chris Sojka at chris.sojka@wellsky.com.

Ordering Procedure:

Scan or fax this signed Order to CarePort's Corporate Contracts Department as follows:

LegalContracts@wellsky.com Fax: (913) 871-9571 or 9138719571@fax2mail.com

SAN BERNARDINO COUNTY on behalf of ARROWHEAD REGIONAL MEDICAL CENTER:	CAREPORT HEALTH, LLC:
Signature: all no Kolle	Signature: Marc Camm
Name: Dawn Rowe	Name: Marc Camm
Title: Chair, Board of Supervisors	Title: SVP Connected Networks
Date: FEB 2 7 2024	Date: 2/15/2024



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ORDER FORM ATTACHMENT 1 SCOPE OF USE, TERM, PRICING, AND PAYMENT TERMS

1. <u>Cloud Services Pricing</u>. The Cloud Services are subject to the following pricing and maximum scope of use limits:

Cloud Services	Facility	PID	Quantity	Total Annual Fees
CarePort Discharge - Standard (SUB22049)	ARROWHEAD REGIONAL MEDICAL CENTER	N/A	1	\$98,176
Unified Workflow (Epic SSO) (SUB22017)	ARROWHEAD REGIONAL MEDICAL CENTER	N/A	1	\$1,824
			TOTAL	\$100,000

Client's license for the Cloud Services covers Organic Growth during the initial term, provided that Client timely pays CarePort the associated fee increases specified herein. "Organic Growth" means increases in the volume at the Client Licensed Sites above that are due solely to internal growth of Client's ordinary business activities and transactions at the Client Licensed Sites. Notwithstanding the foregoing, Client shall not use the Cloud Services in connection with any of the following (each of which constitutes "Non-Organic Growth"): (i) Any construction of any new facility (beyond the Client Licensed Sites); (ii) the physical expansion of any Client Licensed Site; and/or (iii) the addition of any new facility by acquisition, merger, or otherwise. With respect to Client Licensed Sites acquired through Non-Organic Growth, Client shall not use the Cloud Services with respect to such newly acquired Client Licensed Sites unless and until the Parties have so agreed to a new Order Form for such additional scope of use.

2. <u>Sites</u>. The Client Licensed Sites for this Order are as listed below:

ARROWHEAD REGIONAL MEDICAL CENTER 400 N Pepper Ave COLTON, CA 92324

- 3. <u>Cloud Services Term</u>. The Cloud Services are provided for a 60 month term, beginning on July 1, 2024 through June 30, 2029.
- 4. <u>Payment Terms</u>. Client shall pay 100% of the applicable Cloud Services fees annually in advance beginning on July 1, 2024 through June 30, 2029.

ORDER FORM ATTACHMENT 1 SCOPE OF USE, TERM, PRICING, AND PAYMENT TERMS

Please provide your accounts payable or billing contact information.

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	Address:
	E-mail:
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Please select one of the options below regarding your sales tax status:

	Exempt
<u> </u>	Non-Exempt

If "Exempt" is checked above; Client is required to provide the appropriate certificate to WellSky upon Execution of this Order. Failure to provide could result in sales tax charges.

CN-0000017048 / Q-17053

ORDER FORM ATTACHMENT 2 ADDITIONAL TERMS

Client acknowledges and agrees the Cloud Services acquired hereunder are care coordination solutions and each product cross-references Client's data ("Client Data") against data retained by the CarePort subscriber network. The Cloud Services use Client Data within the CarePort subscriber network to provide various Services that may include but are not limited to benchmarking, analytics, and data aggregation ("Reports"). Client may access and use Reports for Client's internal business purposes only. Client may not publish Reports, provided that Client may share or use Reports with its contractors, agents, and facilities used by its patients in furtherance of Client's business. Client acknowledges and agrees that revoking the foregoing license grant shall terminate Client's right to access or use any care coordination, benchmarking, and/or data aggregation reports and features available through the Cloud Services or any successor solution(s) requiring data sharing within the CarePort subscriber network.