



Contract Number

21-629 A-3

SAP Number

Department of Public Health

Department Contract Representative	Rebecca Saucedo
Telephone Number	(909) 725-5426
Contractor	California Health Collaborative
Contractor Representative	Brandi Muro
Telephone Number	(559) 244-4512
Contract Term	August 24, 2021 through August 23, 2024
Original Contract Amount	\$1,346,529
Amendment Amount	\$307,261
Total Contract Amount	\$1,653,790
Cost Center	9300321000

IT IS HEREBY AGREED AS FOLLOWS:

Amendment NO. 3

It is hereby agreed to amend Contract No. 21-629, effective March 12, 2024, as follows:

Section II. Contractor Service Responsibilities

A. Program Requirements

Contractor shall:

2. Perform the activities and achieve the objectives described in the BIH Program Scope of Work (Attachment A). Contractor shall complete the components of in Attachment A in a manner that represents and promotes the interest of County, as expressed by County, throughout the term of the Contract. This includes in-person group facilitation, case management and community outreach services.

a. Target Number of Participants for Group Model:

- A minimum of nine (9) prenatal groups must be offered per year, serving between 72 and 108 participants.
- A minimum of four (4) postpartum groups must be offered per year, serving between 32 and 48 participants.

b. Target Number of Participants for Case Management Model = 35% of total participants or 56

Section V. Fiscal Provisions, Paragraph A is amended to read as follows:

- A. The maximum amount of reimbursement under this Contract shall not exceed \$1,653,790 which may consist of state and/or federal funds and shall be subject to availability of said funds to the County. The consideration to be paid to Contractor, as provided herein, shall be in full payment for all Contractor's services and expenses incurred in the performance hereof, including travel and per diem.

Attachment A is amended as attached.

All other terms and conditions of Contract remain in full force and effect.

This Agreement may be executed in any number of counter parts, each of which so executed shall be deemed to be an original, and such counterparts shall together constitute one and the same Contract. The parties shall be entitled to sign and transmit an electronic signature of the Contract (whether by facsimile, PDF, or other email transmission), which signature agrees to promptly execute and deliver to the other party an original signed Contract upon request.

IN WITNESS WHEREOF, the San Bernardino County and the Contractor have each caused this Contract to be subscribed by its respective duly authorized officers, on its behalf.

SAN BERNARDINO COUNTY

California Health Collaborative

(Print or type name of corporation, company, contractor, etc.)

▶

Dawn Rowe, Chair, Board of Supervisors

By ▶

(Authorized signature - sign in blue ink)

Dated: _____

Name

Stephen Ramirez

SIGNED AND CERTIFIED THAT A COPY OF THIS DOCUMENT HAS BEEN DELIVERED TO THE CHAIRMAN OF THE BOARD

(Print or type name of person signing contract)

Title

Chief Executive Officer

Lynna Monell
Clerk of the Board of Supervisors
San Bernardino County

(Print or Type)

By _____

Deputy

Dated: _____

Address

1680 W. Shaw Ave

Fresno, CA 93711

FOR COUNTY USE ONLY

Approved as to Legal Form

Reviewed for Contract Compliance

Reviewed/Approved by Department

▶

Adam Ebright, County Counsel

▶

▶

Joshua Dugas, Director

Date _____

Date _____

Date _____