



Contract Number

21-474 A-4

SAP Number

Department of Behavioral Health

Department Contract Representative	Melissa Malcom
Telephone Number	(909) 388-0951
Contractor	Victor Community Support Services, Inc.
Contractor Representative	Edward Hackett
Telephone Number	(530) 230-1218
Contract Term	July 1, 2021, through December 31, 2026
Original Contract Amount	\$11,050,000
Amendment Amount	\$ 221,000
Total Contract Amount	\$11,271,000
Cost Center	9206302200
Grant Number (if applicable)	N/A

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO. 4:

San Bernardino County (County) and Victor Community Support Services, Inc. (Contractor) hereby agree to amend **Contract No. 21-474** as follows:

- I. ARTICLE V Funding and Budgetary Restrictions, paragraph I and paragraph J are hereby amended to read as follows:
 - I. The maximum financial obligation under this contract shall not exceed \$11,271,000 for the contract term.
 - J. Contractor shall adhere to the Schedules A and B which will be submitted to, and approved by, the Director of DBH or designee for FY 2025-26 and FY 2026-27.

- II. ARTICLE VI Provisional Payment, Section V, paragraph a is hereby amended to read as follows:
- a. For the period of January 1, 2026 through December 31, 2026, DBH will reconcile monthly payments for SD/MC billable mode of services, mode 5, 10 and/or 15, to ensure provider payments are made at a minimum of 1/12th of the maximum allocations for the Medi-Cal billable services.
- III. SCHEDULE A Planning Estimate and SCHEDULE B Program Budget are hereby removed for FY 2025-26 and FY 2026-2027. All previously approved Schedules remain in effect.
- IV. All other terms, conditions and covenants of Contract No. 21-474 remain in full force and effect.
- This Amendment may be executed in any number of counterparts, each of which so executed shall be deemed to be an original, and such counterparts shall together constitute one and the same Amendment. The parties shall be entitled to sign and transmit an electronic signature of this Amendment (whether by facsimile, PDF or other email transmission), which signature shall be binding on the party whose name is contained therein. Each party providing an electronic signature agrees to promptly execute and deliver to the other party an original signed Amendment upon request.

[SIGNATURE PAGE FOLLOWS]

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

SAN BERNARDINO COUNTY

►

Dawn Rowe, Chair, Board of Supervisors

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

Lynna Monell
Clerk of the Board of Supervisors
San Bernardino County

By: _____

Deputy

Victor Community Support Services, Inc.

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

By:

►

(Authorized signature - sign in blue ink)

Name: Edward Hackett

(Print or type name of person signing contract)

Title: Chief Financial Officer

(Print or Type)

Dated: _____

Address: 1360 E. Lassen Avenue
Chico, CA 95973

FOR COUNTY USE ONLY

Approved as to Legal Form

►

Dawn Martin, Deputy County Counsel

Date _____

Reviewed for Contract Compliance

►

Michael Shin, Administrative Manager

Date _____

Reviewed/Approved by Department

►

Joshua Dugas, Acting Director

Date _____