

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



Contract Number
19-200 A-1

SAP Number
4400010781

Arrowhead Regional Medical Center

Department Contract Representative	William L. Gilbert
Telephone Number	(909) 580-6150
Contractor	CalStar Air Medical Services LLC
Contractor Representative	Lynne Smith- Kinniburgh
Telephone Number	(916) 921-4092
Contract Term	April 2, 2019 through April 30, 2024
Original Contract Amount	\$1,229,000
Amendment Amount	\$1,704,000
Total Contract Amount	\$2,933,000
Cost Center	8720

Briefly describe the general nature of the contract: Amendment No. 1 to Agreement No. 19-200 with CalStar Air Medical Services LLC, for patient transfer call center services, increasing the total not-to-exceed amount by \$1,704,000, from \$1,229,000 to \$2,933,000, and extending the term by two years, for a total contract period of April 2, 2019 through April 30, 2024.

FOR COUNTY USE ONLY

Approved as to Legal Form

Charles Phan, Deputy County Counsel

Date 2/16/2022

Reviewed for Contract Compliance

►

Date

Reviewed/Approved by Department

William L. Gilbert, Director

Date

2/16/22

FIRST AMENDMENT TO AGREEMENT
FOR PATIENT TRANSFER AND RELATED SERVICES

THIS FIRST AMENDMENT TO AGREEMENT FOR PATIENT TRANSFER AND RELATED SERVICES ("***Amendment***") is entered into effective as of the date this Amendment is fully executed, by and between San Bernardino County on behalf of Arrowhead Regional Medical Center ("***Hospital***"), and CALSTAR Air Medical Services, LLC f/k/a California Shock Trauma Air Rescue ("***CALSTAR***"), a Delaware limited liability company, through its All-Access Center ("***A-ATC***") amending that certain Agreement for Patient Transfer and Related Services entered into by the parties effective April 2, 2019 (the "***Agreement***").

THE PARTIES agree as follows:

1. The parties amend in full the provision Term of the Agreement of the Agreement to read as follows:

"Notwithstanding the initial term, this Agreement shall expire on April 30, 2024 (the "***Expiration Date***")."

2. The parties hereby delete Appendix A in its entirety and replace it with the new Appendix A set forth immediately below.

APPENDIX A
FEE SCHEDULE

- a) Fee Schedule
 - 0-350 transfer and transport request \$34,000 a month
 - 351-425 transfer and transport request \$39,500 a month
 - 426-500 transfer and transport request \$48,000 a month
- b) Each request after 500 during a month shall be billed at \$90.00 per request.
- c) Custom reports outside of those described in this Agreement shall be billed at \$150.00 per hour. An estimate shall be provided to Hospital upon receipt of a customer report request.
- d) Fees are subject to adjustment by CALSTAR on each anniversary of the Effective Date with ninety (90) days' prior written notice to Hospital.

3. All references to "County of San Bernardino" in the Agreement are amended to read as "San Bernardino County".

4. The parties agree that the total contract amount under the Agreement shall not exceed \$2,933,000.

5. All other terms and conditions of the Agreement remain unchanged, and except as expressly modified by this Amendment, the Agreement shall remain in full force and effect. This Amendment may be executed by the Parties in any number of separate counterparts and all of said counterparts taken together shall be deemed to constitute one and the same instrument. 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. Capitalized terms not otherwise defined herein shall have the meaning set forth in the Agreement.

[SIGNATURE PAGE FOLLOWS]

IN WITNESS WHEREOF, this Amendment has been executed by and on behalf of the parties.

HOSPITAL

CALSTAR Air Medical Services, LLC f/k/a
California Shock Trauma Air Rescue



Curt Hagman, Chairman Board of Supervisors
San Bernardino County on
behalf of Arrowhead Regional Medical Center

Date: **MAR 01 2022**

DocuSigned by:

21B157F641824D6

Eric Freed, Vice President – Pacific Region

2/3/2022

Date: _____

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

By _____

