



**Contract Number**

19-414 A-4

**SAP Number**

4400013059

**Arrowhead Regional Medical Center**

<b>Department Contract Representative</b>	<u>William L. Gilbert</u>
<b>Telephone Number</b>	<u>(909) 580-6150</u>
<b>Contractor</b>	<u>AMN Workforce, LLC</u>
<b>Contractor Representative</b>	<u>Shane Plantz</u>
<b>Telephone Number</b>	<u>(888) 465-2182</u>
<b>Contract Term</b>	<u>July 1, 2019 through June 30, 2023</u>
<b>Original Contract Amount</b>	<u>NTE \$1,300,000</u>
<b>Amendment Amount</b>	<u>NTE \$700,000</u>
<b>Total Contract Amount</b>	<u>NTE \$2,000,000</u>
<b>Cost Center</b>	<u>8700</u>

**AMENDMENT NO. 4**

San Bernardino County and AMN Workforce, LLC agree to amend the terms of Contract #19-414 ("Contract") for medical coding and clinical documentation improvement specialist (fully executed on June 25, 2019) as follows, effective on the date this Amendment No. 4 (Amendment) is fully executed:

1. Section F.1 in the Contract is deleted in its entirety and replaced with the following:

**F.1** Contractor will be reimbursed on a fee for service basis in accordance with the rates listed in Attachment A, not to exceed a total of \$2,000,000 for the term of the Contract.

2. Section D in the Contract is deleted in its entirety and replaced with the following:

**D. TERM OF CONTRACT**

This Contract is effective July 1, 2019 through June 30, 2023, but may be terminated earlier in accordance with the provisions of this Contract.

3. All references to "County of San Bernardino" in the Contract shall be amended to read as "San Bernardino County".

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

5. 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.

SAN BERNARDINO COUNTY

AMN Workforce Solutions, LLC

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

▶ Dawn M. Rowe

By [Signature]  
(Authorized signature - sign in blue ink)

~~Curt Hagman, Chairman, Board of Supervisors~~  
Dawn M. Rowe, vice chair,

Name Linda Murphy  
(Print or type name of person signing contract)

Dated: JUN 28 2022  
SIGNED AND CERTIFIED THAT A COPY OF THIS DOCUMENT HAS BEEN DELIVERED TO THE CHAIRMAN OF THE BOARD

Title SVP  
(Print or Type)



By [Signature]  
Lynna Monell  
Clerk of the Board of Supervisors  
San Bernardino County  
Deputy

Dated: 3/22/22

Address 302 Knights Run Avenue, Suite 1025  
Tampa, FL 33602

**FOR COUNTY USE ONLY**

Approved as to Legal Form  
▶ [Signature]  
Charles Phan, Deputy County Counsel  
Date 6/15/2022

Reviewed for Contract Compliance  
▶ \_\_\_\_\_  
Date \_\_\_\_\_

Reviewed/Approved by Department  
▶ [Signature]  
William L. Gilbert, Director  
Date [Signature]