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

Contract Number

23-1087 A-1

SAP Number
4400023595

Department of Behavioral Health

Department Contract Representative	Rebecca Lombard
Telephone Number	909-383-3978
Contractor	Life Generations Healthcare LLC
Contractor Representative	Thomas Jurbala
Telephone Number	(714) 241-5600
Contract Term	September 26, 2023 through June 30, 2027
Original Contract Amount	$40,904,090 Aggregate
Amendment Amount	
Total Contract Amount	$40,904,090 Aggregate
Cost Center	9209181000

THIS CONTRACT is entered into in the State of California by and between San Bernardino County, hereinafter called the County, and Life Generations Healthcare LLC referenced above, hereinafter called Contractor.

IT IS HEREBY AGREED AS FOLLOWS*:*

WITNESSETH:

IN THAT CERTAIN **Contract No. 23-1087** by and between San Bernardino County, a political subdivision of the State of California, and Contractor for Institution for Mental Disease services, which Contract first became effective September 26, 2023, the following changes are hereby made and agreed to, effective April 1, 2024:

I. The original contractor, Generations Healthcare informed the County that its legal name is “Life Generations Healthcare LLC”. Therefore, all rights, title and interests therein, are assigned to Life Generations Healthcare LLC and Life Generations Healthcare LLC accepts all of Generations Healthcare obligations, responsibilities and duties. All references to “Generations Healthcare” in the contract are replaced with “Life Generations Healthcare LLC”.

II. REFERENCED CONTRACT PROVISIONS are hereby amended to read as follows

REFERENCED CONTRACT PROVISIONS

Term: April 1, 2024 through June 30, 2027, inclusive.

Basis for Reimbursement:
Fee – For – Service

Payment Method:
Fee – For – Service

Payment/Reimbursement Rate:

Long Term Care (LTC):

County Authorized LTC Patch A - Daily	DBH Approved Patch Rate
County Authorized LTC Patch B - Daily	DBH Approved Patch Rate
County Authorized LTC Patch C - Daily	DBH Approved Patch Rate
County Authorized LTC Indigent Rate - Daily	DBH Approved Patch Rate
County Authorized LTC Murcon Patch Rate – Daily	DBH Approved Patch Rate

Special Treatment Program (STP):

County Authorized STP Patch A - Daily	DBH Approved Patch Rate
County Authorized STP Patch B - Daily	DBH Approved Patch Rate
County Authorized STP Patch C - Daily	DBH Approved Patch Rate
County Authorized STP Indigent Rate - Daily	DBH Approved Patch Rate
County Authorized STP Murcon Patch Rate - Daily	DBH Approved Patch Rate

Ancillary Services	DBH Approved Patch Rate

Notices to County and Contractor:

COUNTY: San Bernardino County
Department of Behavioral Health
Contracts Unit
303 East Vanderbilt Way
San Bernardino, CA 92415-0026

CONTRACTOR: Life Generations Healthcare LLC
ATTN: Legal Counsel
6 Hutton Centre Dr., Suite 400
Santa Ana, CA 92707
MarissaBrandel@lifegen.net

PROGRAM SITE: SITES:

GHC of El Cajon, LLC dba Bradley Court
675 E. Bradley Ave.
El Cajon, CA 92021

GHC of Upland, LLC dba Heritage Park Nursing Center
275 Garnet Way A
Upland, CA 91786

GHC of Auburn, LLC dba Siena Skilled Nursing & Rehabilitation Center
11600 Education St.
Auburn, CA 95602

GHC of Fresno, LLC dba Horizon Heath & Subacute Center
3034 E. Herndon Avenue
Fresno, CA 93720

GHC of Anberry, LLC dba Anberry Nursing & Rehabilitation
1685 Shaffer Road
Atwater, CA 95301

GHC of Lakeside, LLC dba Lakeside Special Care Center
11962 Woodside Avenue
Lakeside, CA 92040

II. All other terms, conditions and covenants in the basic agreement remain in full force and effect.

This Agreement 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 Agreement. The parties shall be entitled to sign and transmit an electronic signature of this Agreement (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 Agreement upon request.

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
of San Bernardino County

By _____
Deputy

Life Generations Healthcare LLC
_____
(Print or type name of corporation, company, contractor, etc.)

By ► _____
(Authorized signature - sign in blue ink)

Name _____
(Print or type name of person signing contract)

Title _____
(Print or Type)

Dated: _____

Address _____

_____

FOR COUNTY USE ONLY

Approved as to Legal Form	Reviewed for Contract Compliance	Reviewed/Approved by Department
►	►	►
Dawn Martin, Deputy County Counsel	Natalie Kessee, Contracts Manager	Georgina Yoshioka, Director
Date _____	Date _____	Date _____