

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



Contract Number

20-1246 A-2

SAP Number

4400017032

Arrowhead Regional Medical Center

Department Contract Representative Telephone Number	<u>William L. Gilbert</u> <u>(909) 580-6150</u>
Contractor	<u>California Emergency Medical Services Authority</u>
Contractor Representative Telephone Number	<u>Cory Brown</u> <u>(916) 865-8702</u>
Contract Term	<u>12/1/2020 through the end of Governor's emergency declaration declared on 3/4/2020</u>
Original Contract Amount	<u>Aggregate NTE \$3,000,000</u>
Amendment Amount	<u>Aggregate NTE \$2,000,000</u>
Total Contract Amount	<u>Aggregate NTE \$5,000,000</u>
Cost Center	<u>8720</u>

AMENDMENT NO. 2

SAN BERNARDINO COUNTY on behalf of its Arrowhead Regional Medical Center and the STATE OF CALIFORNIA, as represented by the California Emergency Medical Services Authority (hereinafter the "State") agree to amend the terms of the California Contracted Medical Staff Services Agreement fully executed between the parties on or about December 1, 2020 ("Agreement"), as follows, effective on the last date this Amendment No. 2 is executed by the parties:

1. Replace Attachment A to the Agreement with the Attachment A to this Amendment No. 2. Outstanding invoices for services rendered prior to the effective date of this Amendment will be paid at the prior existing rates as set forth in the Agreement.
2. Add the following provision to the Agreement:

The not-to-exceed aggregate contract amount is \$5,000,000.

3. Section 4 is amended as follows:
 - a. The Hourly Rate charged to the Facility by the State will not exceed those set forth in the following Rate Sheet. In addition, costs for overtime or holiday hours will be charged as applicable. Overtime rates and provisions may vary by staffing agency but are generally charged at no less than:
 - i. one and one-half times the regular rate of pay for all hours worked in excess of eight hours in a workday or more than 40 hours in a workweek; and
 - ii. double the regular rate of pay for all hours worked in excess of twelve hours in any workday.
 - b. Contracted medical staff schedules will be a minimum of 48 to 72 hours per week (e.g., six days per week: 12 hours per day).
4. All references to "County of San Bernardino" in the Agreement shall be amended to read "San Bernardino County."
5. **Full Force and Effect.** This Agreement, as amended, remains in full force and effect.
6. **Capitalized Terms.** Any capitalized term used but not defined in this Amendment shall have the meaning given to it in the Agreement.
7. **Counterparts.** 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 Contract. 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

▶ 
 Leonard X. Hernandez, Chief Executive Officer

Dated: 11/10/2021

Facility Name: Arrowhead Regional Medical Center

STATE OF CALIFORNIA, CALIFORNIA
 EMERGENCY MEDICAL SERVICES AUTHORITY

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

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

Title _____
(Print or Type)

Dated: _____

FOR COUNTY USE ONLY

Approved as to Legal Form

▶ 
Scott Runyan, Supervising Deputy County Counsel

Date 11/9/21

Reviewed for Contract Compliance

▶ _____

Date _____

Reviewed/Approved by Department

▶ _____

Date _____

ATTACHMENT A

California Contracted Medical Staff – Rate Sheet

Staff Classification	Amount Paid by Facility
<i>Registered Nurse – Med/Surg</i>	\$150 - \$262
<i>Registered Nurse – ICU</i>	\$185 - \$289
<i>Registered Nurse – Pediatric ICU</i>	\$110 - \$204
<i>Registered Nurse – Pediatrics</i>	\$130 - \$143
<i>Registered Nurse – Tele/Obs</i>	\$170 - \$262
<i>Registered Nurse – ER</i>	\$160 - \$289
<i>Registered Nurse – OR</i>	\$140 - \$154
<i>Registered Nurse – BH</i>	\$140 - \$154
<i>Licensed Vocational Nurse -BH</i>	\$100 - \$110
<i>Licensed Vocational Nurse</i>	\$80 - \$182
<i>Certified Nursing Assistant</i>	\$55 - \$101
<i>Respiratory Therapist</i>	\$175 - \$235
<i>MRI Technician</i>	\$150 - \$165
<i>X-Ray Technician</i>	\$100 - \$130
<i>Pharmacist</i>	\$165 - \$215
<i>Pharmacy Technician</i>	\$110 - \$121
<i>Physical Therapist</i>	\$140 - \$176
<i>Paramedic</i>	\$100 - \$154
<i>Home Care Aide</i>	\$70 - \$88
<i>Environmental Services (EVS)</i>	\$70 - \$77

*Updated 8/11/2021