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

SAN BERNARDINO COUNTY

Contract Number

17-426 A-1

SAP Number

10008475

Department of Behavioral Health

Department Contract Representative	Bishoy Bestawros
Telephone Number	(909) 388-0856
Contractor	Canyon Ridge Hospital, Inc. dba Canyon Ridge Hospital
Contractor Representative	Kevin Nolan
Telephone Number	(909) 590-4028
Contract Term	July 1, 2017 – December 31, 2020
Original Aggregate Contract Amount	$12,000,000
Amendment Amount	$2,000,000
Total Aggregate Contract Amount	$14,000,000
Cost Center	9209191000

THIS CONTRACT is entered into in the State of California by and between the County of San Bernardino, hereinafter called the County, and Canyon Ridge Hospital, Inc. dba Canyon Ridge Hospital referenced above, hereinafter called Contractor.

IT IS HEREBY AGREED AS FOLLOWS*:*

WITNESSETH:

IN THAT CERTAIN **Contract No. 17-426** by and between the County of San Bernardino, a political subdivision of the State of California, and Contractor for inpatient psychiatric services, which Contract first became effective July 1, 2017 the following changes are hereby made and agreed to, effective July 1, 2020:

I. REFERENCED CONTRACT PROVISIONS, is hereby amended to read as follows:

REFERENCED CONTRACT PROVISIONS

Term: July 1, 2017 through December 31, 2020, inclusive.

Aggregate Maximum Obligation:

TOTAL AGGREGATE MAXIMUM OBLIGATION:	$14,000,000

Basis for Reimbursement:

Fee For Service

Payment Method:

Fee For Service

Payment/Reimbursement Rate:

Medi-Cal and Indigent Adult Acute Psychiatric Inpatient Day	$743 per bed day
Medi-Cal and Indigent Adolescent/Child Acute Psychiatric Inpatient Day	$853 per bed day
Medi-Cal Administrative Day	Rate established by state DHCS
Indigent Administrative Day	Will not be reimbursed

Notices to County and Contractor:

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

CONTRACTOR: Canyon Ridge Hospital
5353 G Street
Chino, CA 91710

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.

COUNTY OF SAN BERNARDINO

►

Curt Hagman, Chairman, 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 the County of San Bernardino

By

Deputy

Canyon Ridge Hospital, Inc. dba Canyon Ridge Hospital

(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	Veronica Kelley, Director
Date	Date	Date