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



### **Contract Number**

17-429 A-1

SAP Number

# **Department of Behavioral Health**

Department Contract Representative Telephone Number Contractor

Contractor Representative
Telephone Number
Contract Term
Original Aggregate Contract Amount
Amendment Amount
Total Aggregate Contract Amount
Cost Center

Bishoy Bestawros
(909) 388-0856
Vista Behavioral Hospital, LLC dba
Pacific Grove Hospital
Saad Niazi
(951) 275-8400
July 1, 2017 - December 31, 2020
\$12,000,000
\$2,000,000
\$14,000,000
9209191000

THIS CONTRACT is entered into in the State of California by and between the County of San Bernardino, hereinafter called the County, and Vista Behavioral Hospital, LLC dba Pacific Grove Hospital referenced above, hereinafter called Contractor.

## IT IS HEREBY AGREED AS FOLLOWS:

#### WITNESSETH:

IN THAT CERTAIN Contract No. 17-429 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. <u>REFERENCED CONTRACT PROVISIONS</u>, 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 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:

Pacific Grove Hospital 5900 Brockton Ave.

Riverside, CA 92506

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			benavioral hospital, LLC doa Pacific	
			e Hospital	
1 11		(Print pr	or type vitane of corporation, company, contractor, etc.)	-
1 4 66				
- WI How		By 🕻		
Curt Hagman, Chairman, Board Super	visors	-	(Authorized signature - sign in blue ink)	-
JUN 2 3 2020			Saad Niazi	
Dated:		Name	Sadu NIAZI	
SIGNED AND CERTIFIED THAT A COP	Y OF THIS		(Print or type name of person signing contract)	-
DOCUMENT HAS BEEN DELIVERED TO	) THE			
CHAIRMAN OF THE BOARD		T:41-	CEO	
Lynna Monell		Title	(Duint ou Time)	2
Clerk of the Board of S	unenvisore		(Print or Type)	
of the County of San E				
			6/15/2020	
By		Dated:	·	_
Deputy	3		5900 Brockton ave Riverside o	a
		Address	ss 92506	
		5900	Brockton ave Riverside ca	
	in A	<del>925(</del>	81.8	
A Comment	B	- 5230	700	
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FOR COUNTY USE ONLY Approved as to Legal Form	Reviewed for Commack Com	nliones	Dec Docublaned by	
The state of the s	Natalie Kessee	ipiiarice	Reviewed Approved by Department	
Vawn Martin	Natatit Kesset		Veronica kelley	
Dawn Martin, Deputy County Counsel	Natalie Kessee, Contracts	Vlanager	Veronica Kelley, Director	
6/3/2020	6/15/2020	•	6/15/2020	
Date	Date		Date	
	N=			

Vista Behavioral Hospital, LLC dba Pacific