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



**Contract Number** 

20-1246 A-1

**SAP Number** 

## **Arrowhead Regional Medical Center**

**Department Contract Representative Telephone Number**William L. Gilbert, Director (909) 580-6150

**Contractor** California Emergency Medical

Contractor Representative Megan Krentsa
Telephone Number 916-719-6142

Contract Term 12/1/2020 through end of

Governor's emergency declaration

declared on 3/4/2020

Original Contract Amount
Amendment Amount

NTE \$3,000,000

Total Contract Amount

Onte \$3,000,000

Cost Center

#### AMENDMENT NO. 1

The COUNTY OF SAN BERNARDINO 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. 1 is executed by the parties:

- 1. Attachment A of the Agreement is replaced with Attachment A of this Amendment No. 1.
- 2. This Amendment No. 1 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.

3. All other terms and conditions of the Agreement shall remain in full force and effect.

### STATE OF CALIFORNIA, CALIFORNIA EMERGENCY MEDICAL SERVICES AUTHORITY:

	Date: I	February 25, 2021	Ву:	Richard Trussell	Digitally signed by Richard Trussell Date: 2021.02.25 07:55:03 -08'00'		
	Name:	Richard Trussell			nancours o este a son difficille (A) de marches de sincipale (marches sensen)		
	Title:	Chief of Administration		ggijo, kung ang ngkahiliki kining kangalanan kining kangalan kining kangalan kining kangalan kining kangalan k			
cou	COUNTY OF SAN BERNARDINO:						
	Facility I	Name: Arrowhead Regiona	al Med	dical Center			
	Date:	1/m/sosi B	y: -	Amo x	ply		
	Name:	Leonard X. Hernandez					
	Title:	Chief Executive Officer		nad car og car o	147.00		

FOR COUNTY USE ONLY		( ( ( )
Approved as to Legal Form	Reviewed for Contract Compliance	Reviewed Approved by Dedaytinent
Charles Phan, Deputy County Counsel	_	William L/G/bert/Director
Date1/13/2021	Date	Date

## **EXHIBIT A**

# California State Contracted Staffing Resource Cost Per Hour by Classification

Staffing Resource				
Staff Classification	Max Rates			
Registered Nurse - Med/Surg	\$180.00			
Registered Nurse - ICU	\$200.00			
Registered Nurse - Pediatrics	\$130.00			
Registered Nurse - Tele/Obs	\$180.00			
Registered Nurse - ER	\$180.00			
Registered Nurse - OR	\$140.00			
Licensed Vocational Nurse - BH	\$100.00			
Licensed Vocational Nurse	\$95.00			
Certified Nursing Assistant	\$70.00			
Respiratory Therapist	\$180.00			
MRI Technician	\$150.00			
X-Ray Technician	\$100.00			
Pharmacist	\$165.00			
Physical Therapist	\$140 - \$160			
Paramedic	\$120 -\$140			
Home Care Aide	\$70 - \$80			
Environmental Services (EVS)	\$70.00			

<sup>\*</sup>Updated 1/8/2021