

STATE OF CALIFORNIA
STANDARD AGREEMENT AMENDMENT
 STD 213A_DHCS(1/08)

Check here if additional pages are added: 1 Page(s)

31501

Agreement Number 09-86022	Amendment Number A01
Registration Number: <u>ep1042203 change 1</u>	

- This Agreement is entered into between the State Agency and Contractor named below:
 State Agency's Name: Department of Health Care Services (Also known as DHCS, CDHS, DHS or the State)
 Contractor's Name: City of Long Beach (Also referred to as Contractor)
- The term of this Agreement is: July 1, 2009 through June 30, 2012
- The maximum amount of this Agreement is: \$ 4,700,000
 Agreement after this amendment is: Four Million Seven Hundred Thousand Dollars
- The parties mutually agree to this amendment as follows. All actions noted below are by this reference made a part of the Agreement and incorporated herein:

- Amendment effective date:** June 29, 2012
- Purpose of amendment:** This amendment extends the contract term for two years and increases the total budget to compensate the Contractor for performing services in Year 4 and 5. DHCS is obtaining a continuation of services identified in the original agreement
- Certain changes made in this amendment are shown as: Text additions are displayed in **bold and underline**. Text deletions are displayed as strike through text (i.e., ~~Strike~~).
- Paragraph 2 (term) on the face of the original STD 213 is amended to read July 1, 2009 through ~~June 30, 2012~~ **June 30, 2014**. All references to the former contract term of July 1, 2009 through June 30, 2012 in any exhibit incorporated into this agreement is hereinafter deemed to read July 1, 2009 through June 30, 2014.
- Paragraph 3 (maximum amount payable) on the face of the original STD 213 is increased by **\$1,400,000** and is amended to read: ~~\$3,300,000 (Three Million Three Hundred Dollars)~~ **\$4,700,000** (Four Million, Seven Hundred Thousand Dollars).

(Continued on next page)

All other terms and conditions shall remain the same.

IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto.

CONTRACTOR		CALIFORNIA Department of General Services Use Only <div style="border: 1px solid black; padding: 10px; text-align: center;"> APPROVED MAY 21 2012 DEPT OF GENERAL SERVICES </div>	
Contractor's Name (If other than an individual, state whether a corporation, partnership, etc.) City of Long Beach Assistant City Manager			
By (Authorized Signature) 	EXECUTED PURSUANT TO SECTION 301 OF THE CITY CHARTER.		Date Signed (Do not type) 5.1.12
Printed Name and Title of Person Signing Patrick H. West, City Manager			
Address 2525 Grand Avenue Long Beach, CA 90815			
STATE OF CALIFORNIA			
Agency Name Department of Health Care Services		<input type="checkbox"/> Exempt per: 	
By (Authorized Signature) 	Date Signed (Do not type) 5-14-12		
Printed Name and Title of Person Signing Jayna Querin, Chief, Contract Management Unit			
Address 1501 Capitol Avenue, Suite 71.5195, MS 1403, P.O. Box 997413, Sacramento, CA 95899-7413			

VI. Provision 4 (Project Representatives) of Exhibit A-Scope of Work is amended to read as follows:

4. Project Representatives

A. The project representatives during the term of this Agreement will be:

Department of Health Care Services

James "Rob" Williams, Chief
County-Based Administrative Activities Unit
Telephone: (916) 522-9075
Fax: (916) 324-0738
E-Mail: james.williams@dhcs.ca.gov

City of Long Beach

Patrick H. West, City Manager
Telephone: (562) 570-4021
Fax: (562) 570-4049
E-Mail: Patrick.h.west@longbeach.gov

B. Direct all inquires to:

Department of Health Care Services

Administrative Claiming Local & Schools
Services Branch
Attention: **Frank Sullivan**
1501 Capitol Ave., MS 4603
P.O. Box 997436
Sacramento, CA 95899-7436

City of Long Beach

Attention: **Denise Tong, Health Educator II**
2525 Grand Avenue
Long Beach, CA 90815

Telephone: (916) 552-9052
Fax: (916) 324-0738
E-Mail: frank.sullivan@dhcs.ca.gov

Telephone: (562) 570-4278
Fax: (562) 570-4049
E-Mail: denise.tong@longbeach.gov

C. Either party may make changes to the information above by giving written notice to the other party. Said changes shall not require an amendment to this agreement.

VI. Provision 4 (Amounts Payable) of Exhibit B-Budget Detail and Payment Provisions is amended to read as follows:

4. Amounts Payable

A. The amounts payable under this agreement shall not exceed:

- 1) \$1,000,000.00 for the budget period of 07/01/09 through 06/30/10,
- 2) \$1,100,000.00 for the budget period of 07/01/10 through 06/30/11,
- 3) \$1,200,000.00 for the budget period of 07/01/11 through 06/30/12,
- 4) \$700,000.00 for the budget period of 07/01/12 through 06/30/13,
- 5) \$700,000.00 for the budget period of 07/01/13 through 06/30/14,

B. Reimbursement shall be made for allowable expenses up to the amount annually encumbered commensurate with the state fiscal year in which services are performed and/or goods are received.

VII. All other terms and conditions shall remain the same.