

STATE OF CALIFORNIA  
**STANDARD AGREEMENT AMENDMENT**  
 STD 213 A (DHS Rev 7/04)

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**29090**

AGREEMENT NUMBER <b>04-35117</b>	AMENDMENT NUMBER <b>A01</b>
REGISTRATION NUMBER: <b>42600305666674.1</b>	

1. This Agreement is entered into between the State Agency and Contractor named below:

STATE AGENCY'S NAME (Also referred to as CDHS, DHS, or the State)  
**California Department of Health Services**

CONTRACTOR'S NAME (Also referred to as Contractor)  
**City of Long Beach**

2. The term of this Agreement is **July 1, 2004** through **June 30, 2007**

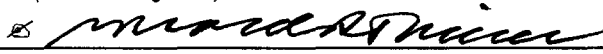
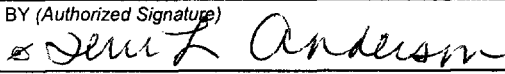
3. The maximum amount of this Agreement is: **\$ 1,950,000.00**  
 One Million Nine Hundred Fifty Thousand Dollars

4. 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:

- I. Amendment effective date: July 1, 2004
- II. Purpose of amendment: The county has made significant effort to optimize MAA compliance and has added new staff and claiming plans.
- III. 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~~).
- IV. Paragraph 3 (maximum amount payable) on the face of the original STD 213 is increased by \$525,000.00 and is amended to read: ~~\$1,425,000.00 (One Million Four Hundred and Twenty Five Thousand Dollars)~~  
**\$1,950,000.00 (One Million Nine Hundred Fifty Thousand Dollars)**.
- V. Provision 4 (Amounts Payable), Paragraph A, of Exhibit B - Budget Detail and Payment Provisions is amended to read:
  - 4. Amounts Payable
    - A. The amounts payable under this agreement shall not exceed:
      - 1) ~~\$475,000.00~~ **\$650,000.00** for the budget period of 07/01/04 through 06/30/05,
      - 2) ~~\$475,000.00~~ **\$650,000.00** for the budget period of 07/01/05 through 06/30/06,
      - 3) ~~\$475,000.00~~ **\$650,000.00** for the budget period of 07/01/06 through 06/30/07.

All other terms and conditions shall remain the same.

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

<b>CONTRACTOR</b>		CALIFORNIA Department of General Services Use Only  <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;">           APR 11 2006            DEPT OF GENERAL SERVICES         </div> <input type="checkbox"/> Exempt per: _____
CONTRACTOR'S NAME (If other than an individual, state whether a corporation, partnership, etc.) <b>City of Long Beach</b>		
BY (Authorized Signature) 	DATE SIGNED (Do not type) <b>2-14-06</b>	
PRINTED NAME AND TITLE OF PERSON SIGNING <b>Gerald R. Miller, City Manager</b>		
ADDRESS <b>2525 Grand Avenue Long Beach, CA 90815</b>		
<b>STATE OF CALIFORNIA</b>		
AGENCY NAME <b>California Department of Health Services</b>		
BY (Authorized Signature) 	DATE SIGNED (Do not type) <b>2-28-06</b>	
PRINTED NAME AND TITLE OF PERSON SIGNING <b>Terri L. Anderson, Chief, Contracts and Purchasing Services Section</b>		
ADDRESS <b>1501 Capitol Avenue, Room 71.2101, MS 1403, P.O. Box 997413 Sacramento, CA 95899-7413</b>		

APPROVED AS TO FORM  
 BY **ROBERT E. SHANNON**, City Attorney  
 2/17/2006  
 SENIOR DEPUTY CITY ATTORNEY