



**AMENDMENT NO. 1
TO
MASTER AGREEMENT NO. MA-042-22011537
FOR
MEDI-CAL MENTAL HEALTH MANAGED CARE
PSYCHIATRIC INPATIENT HOSPITAL SERVICES**

This Amendment ("Amendment No. 1") to Contract No. MA-042-22011537 for Medi-Cal Mental Health Managed Care Psychiatric Inpatient Hospital Services is made and entered into on September 9, 2022 ("Effective Date") between [Provider Name] ("Contractor"), with a place of business at [Provider Address], and the County of Orange, a political subdivision of the State of California ("County"), through its Health Care Agency, with a place of business at 405 W. 5th St., Ste. 600, Santa Ana, CA 92701. Contractor and County may sometimes be referred to individually as "Party" or collectively as "Parties".

RECITALS

WHEREAS, the Parties executed Contract No. MA-042-22011537 with various providers for Medi-Cal Mental Health Managed Care Psychiatric Inpatient Hospital Services, effective July 1, 2022 through June 30, 2025, for negotiated rates that are paid directly by the California Department of Health Care Services (DHCS) through the annual state allocations for Orange County, renewable for two additional periods ("Contract"); and

WHEREAS, the Parties now desire to enter into this Amendment No. 1 to amend Exhibit A of the Contract to modify the payment rates.

NOW THEREFORE, Contractor and County agree to amend the Contract as follows:

1. Exhibit A, Paragraph IV. Payments, subparagraph A. (but not including subparagraphs A.1 through A.6), of the Contract is deleted in its entirety and replaced with the following:

"A. CONTRACTOR shall be reimbursed by DHCS for services provided at the following all-inclusive rates per client day for acute Psychiatric Inpatient Hospital Services and based on the following accommodation codes.

<u>Accommodation Code</u>	<u>Description of Facility</u>	<u>Rate</u>		<u>Period Three</u>
		<u>Period One</u>	<u>Period Two</u>	
<u>097</u>	General Acute Care Hospital: <u>Adolescent/Child, Psychiatric</u>	<u>\$1175.00</u>	<u>\$1175.00</u>	<u>\$1175.00</u>
<u>114 - 204</u>	General Acute Care Hospital: <u>Adult, Psychiatric</u>	<u>\$1050.00</u>	<u>\$1050.00</u>	<u>\$1050.00</u>

<u>097</u>	Acute Psychiatric Hospital <u>Adolescent/Child, Psychiatric</u>	<u>\$1025.00</u>	<u>\$1025.00</u>	<u>\$1025.00</u>
<u>114 - 204</u>	Acute Psychiatric Hospital <u>Adult, Psychiatric</u>	<u>\$950.00</u>	<u>\$950.00</u>	<u>\$950.00</u>
<u>169</u>	<u>Administrative Day</u>	<u>Current DHCS Rate</u>	<u>Current DHCS Rate</u>	<u>Current DHCS Rate"</u>

This Amendment No. 1 modifies the Contract only as expressly set forth herein. Wherever there is a conflict in the terms or conditions between this Amendment No. 1 and the Contract, the terms and conditions of this Amendment No. 1 shall prevail. In all other respects, the terms and conditions of the Contract not specifically changed by this Amendment No. 1 remain in full force and effect.

SIGNATURE PAGE FOLLOWS

SIGNATURE PAGE

IN WITNESS WHEREOF, the Parties have executed this Amendment No. 1. If Contractor is a corporation, Contractor shall provide two signatures as follows: 1) the first signature must be that of either the Chairman of the Board, the President, or any Vice President; 2) the second signature must be that of either the Secretary, an Assistant Secretary, the Chief Financial Officer, or any Assistant Treasurer. In the alternative, a single corporate signature is acceptable when accompanied by a corporate resolution or by-laws demonstrating the legal authority of the signature to bind the company.

Contractor: PROVIDER NAME_____
Print Name_____
Title_____
Signature_____
Date

County of Orange, a political subdivision of the State of California

Purchasing Agent/Designee Authorized Signature:

Print Name_____
Title_____
Signature_____
Date**APPROVED AS TO FORM**Office of the County Counsel
Orange County, California

Massoud Shame1

Print Name
DocuSigned by:79055CA571A94F8...
Signature_____
Senior Deputy County Counsel_____
Title

7/6/2022

Date