

**CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY**  
**“CalMHSA”**  
**PARTICIPATION AGREEMENT AMENDMENT NO. 2**  
**SEMI-STATEWIDE ENTERPRISE HEALTH RECORD**

This Participation Agreement Amendment No. 2 is a contract by and between the California Mental Health Services Authority (“CalMHSA”) and Nevada County (“Participant”).

**WHEREAS**, CalMHSA and Participant entered into Participation Agreement No. 1575-EHR-2022-NC executed on July 20, 2022 (the “Agreement”), and subsequently executed a Participation Agreement Amendment No. 1575-EHR-2022-NC-A1 (“Amendment No. 1”) on April 7, 2023; and

**WHEREAS**, CalMHSA and Participant agree to amend the Agreement and Amendment No. 1 to incorporate the additional purchases and corresponding Committed Funding and Contingency Budget modifications as specified below:

**ADDITIONAL PURCHASES:**

This Participation Agreement Amendment No. 2 incorporates additional component purchases totaling **\$4,600** in additional committed funding.

Pricing and payment terms for each additional component purchased can be found in Exhibit C-2, below. Funding for the additional components purchased has been shifted from Participant’s Contingency Budget, Exhibit D-1, below. Please refer to Exhibit C-2 and Exhibit D-2, below, for Participant’s amended Committed Funding and amended Contingency Budget, respectively.

The additional component purchases include:

1. Purchase of professional services to implement the “Single Sign On (SAML)” solution. This fee is a one-time charge to be invoiced upon execution of this Agreement Amendment.

**NOW THEREFORE**, CalMHSA and Participant hereby agree to amend Amendment No. 1 in the following manner:

1. EXHIBIT C-2 – PARTICIPANT-SPECIFIC COMMITTED FUNDING AND PAYMENT TERMS replaces EXHIBIT C-1 in Amendment No. 1. All references in the Agreement to EXHIBIT C shall be construed to refer to EXHIBIT C-2.

This Participation Agreement Amendment No. 2 adds **\$4,600** in additional committed funding. The revised total maximum amount of committed funding shall not exceed **\$2,014,423**, inclusive of the **\$4,600 increase**, for the agreement term as specified in the Agreement;

2. EXHIBIT D-2 – PARTICIPANT CONTINGENCY BUDGET replaces EXHIBIT D-1 in Amendment No. 1. All references in the Agreement to EXHIBIT D shall be construed to refer to EXHIBIT D-2.

This Participation Agreement Amendment No. 2 reduces participant's Contingency Budget by **\$4,600**. The revised total maximum Participant Contingency Budget shall not exceed **\$267,441**, inclusive of the **\$4,600 decrease**, for the agreement term as specified in the Agreement.

**EXHIBIT C-2– PARTICIPANT-SPECIFIC COMMITTED FUNDING AND PAYMENT TERMS**

**Committed Funding**

1. Exhibit C-1 of Amendment No. 1: The table below reflects the Committed Funding included in Exhibit C-1 of Amendment No. 1, executed on April 7, 2023, for a maximum amount of Participant-Specific Committed Funding not to exceed **\$2,009,823** for the program term, as stated below:

Description	Unit(s)	7/1/22 - 6/30/23	7/1/23 - 6/30/24	7/1/24 - 6/30/25	7/1/25 - 6/30/26	7/1/26 - 6/30/27	7/1/27 - 6/30/28	7/1/28 - 3/18/29
Participant Instance Installation	1	\$ 120,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
System Acquisition Fee	1	\$ 33,380.80	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Initial Development Fee (Customization and Security)	1	\$ 33,380.80	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Discretionary Development Budget	1	\$ 33,380.80	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Professional Services Implementation	1	\$ 498,461.54	\$ 41,538.46	\$ -	\$ -	\$ -	\$ -	\$ -
SmartCare Patient Portal Implementation	1	\$ 2,400.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
SmartCare HIE / MCO Interface via FHIR Implementation	1	\$ 12,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
SmartCare Lab Interface Implementation	1	\$ 15,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Disaster Recovery Implementation	1	\$ 6,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
SmartCare CalMHSA Package	265	\$ 29,203.00	\$ 175,218.00	\$ 175,218.00	\$ 175,218.00	\$ 175,218.00	\$ 175,218.00	\$ 116,812.00
SmartCare Rx Prescribers Subscription	4	\$ 956.80	\$ 5,740.80	\$ 5,740.80	\$ 5,740.80	\$ 5,740.80	\$ 5,740.80	\$ 3,827.20
SmartCare Patient Portal Subscription	450	\$ 82.80	\$ 496.80	\$ 496.80	\$ 496.80	\$ 496.80	\$ 496.80	\$ 331.20
SmartCare HIE / MCO Interface via FHIR Subscription	1	\$ 575.00	\$ 3,450.00	\$ 3,450.00	\$ 3,450.00	\$ 3,450.00	\$ 3,450.00	\$ 2,300.00
SmartCare Lab Interface Subscription	1	\$ 488.76	\$ 2,932.56	\$ 2,932.56	\$ 2,932.56	\$ 2,932.56	\$ 2,932.56	\$ 1,955.04
Disaster Recovery Subscription	1	\$ 1,590.00	\$ 9,540.00	\$ 9,540.00	\$ 9,540.00	\$ 9,540.00	\$ 9,540.00	\$ 6,360.00
Annual %3 Fee Increase - Subscription	1	\$ 986.89	\$ 5,980.56	\$ 6,159.97	\$ 6,344.77	\$ 6,535.12	\$ 6,731.17	\$ 4,576.31
RAND Evaluation	1	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
SMS/Text Notification Reminders -	1	\$ 3,200.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
SMS/Text Notification Reminders - Subscription	1	\$ 592.25	\$ 3,589.04	\$ 3,696.71	\$ 3,807.61	\$ 3,921.84	\$ 4,039.49	\$ 2,746.32
<b>Total Amount by Fiscal Year</b>		\$ 791,679.45	\$ 248,486.21	\$ 207,234.84	\$ 207,530.54	\$ 207,835.11	\$ 208,148.82	\$ 138,908.07
<b>Total Participant-Specific Committed Funds</b>		<b>\$ 2,009,823</b>						

2. Exhibit C-2: The table below reflects the additional purchases and associated **increase of \$4,600** in Committed Funding affected by this Participation Agreement Amendment No. 2, and replaces Exhibit C-1 in Amendment No. 1, effective upon execution of this Participation Agreement Amendment No. 2. The revised maximum amount of Participant-Specific Committed Funding shall not exceed **\$2,014,423** for the program term, as stated below:

Description	Unit(s)	7/1/22 - 6/30/23	7/1/23 - 6/30/24	7/1/24 - 6/30/25	7/1/25 - 6/30/26	7/1/26 - 6/30/27	7/1/27 - 6/30/28	7/1/28 - 3/18/29
Participant Instance Installation	1	\$ 120,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
System Acquisition Fee	1	\$ 33,380.80	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Initial Development Fee (Customization and Security)	1	\$ 33,380.80	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Discretionary Development Budget	1	\$ 33,380.80	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Professional Services Implementation	1	\$ 498,461.54	\$ 41,538.46	\$ -	\$ -	\$ -	\$ -	\$ -
SmartCare Patient Portal Implementation	1	\$ 2,400.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
SmartCare HIE / MCO Interface via FHIR Implementation	1	\$ 12,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
SmartCare Lab Interface Implementation	1	\$ 15,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Disaster Recovery Implementation	1	\$ 6,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
SmartCare CalMHSA Package	265	\$ 29,203.00	\$ 175,218.00	\$ 175,218.00	\$ 175,218.00	\$ 175,218.00	\$ 175,218.00	\$ 116,812.00
SmartCare Rx Prescribers Subscription	4	\$ 956.80	\$ 5,740.80	\$ 5,740.80	\$ 5,740.80	\$ 5,740.80	\$ 5,740.80	\$ 3,827.20
SmartCare Patient Portal Subscription	450	\$ 82.80	\$ 496.80	\$ 496.80	\$ 496.80	\$ 496.80	\$ 496.80	\$ 331.20
SmartCare HIE / MCO Interface via FHIR Subscription	1	\$ 575.00	\$ 3,450.00	\$ 3,450.00	\$ 3,450.00	\$ 3,450.00	\$ 3,450.00	\$ 2,300.00
SmartCare Lab Interface Subscription	1	\$ 488.76	\$ 2,932.56	\$ 2,932.56	\$ 2,932.56	\$ 2,932.56	\$ 2,932.56	\$ 1,955.04
Disaster Recovery Subscription	1	\$ 1,590.00	\$ 9,540.00	\$ 9,540.00	\$ 9,540.00	\$ 9,540.00	\$ 9,540.00	\$ 6,360.00
Annual %3 Fee Increase - Subscription	1	\$ 986.89	\$ 5,980.56	\$ 6,159.97	\$ 6,344.77	\$ 6,535.12	\$ 6,731.17	\$ 4,576.31
RAND Evaluation	1	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
SMS/Text Notification Reminders -	1	\$ 3,200.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
SMS/Text Notification Reminders - Subscription	1	\$ 592.25	\$ 3,589.04	\$ 3,696.71	\$ 3,807.61	\$ 3,921.84	\$ 4,039.49	\$ 2,746.32
Single Sign On (SAML) - Implementation	1	\$ 4,600.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>Total Amount by Fiscal Year</b>		\$ 796,279.45	\$ 248,486.21	\$ 207,234.84	\$ 207,530.54	\$ 207,835.11	\$ 208,148.82	\$ 138,908.07
<b>Total Participant-Specific Committed Funds</b>	<b>\$ 2,014,423</b>							

**Committed Funds Payment Terms For Additional Purchases**

The table below describes the additional component purchases incorporated by this Amendment, effective as of the date of execution of this Participation Agreement Amendment No. 2. The components listed are in addition to those included in Agreement and Amendment No. 1.

<b>Description</b>	<b>Fee Type Description</b>	<b>Payment Term</b>
Single Sign On (SAML) - Implementation	One-Time Fee associated with the implementation efforts to support Single Sign On (SAML).	The fee for this implementation service shall be due upon execution of this Participation Agreement Amendment.

**EXHIBIT D-2 – PARTICIPANT CONTINGENCY BUDGET**

**Participant Contingency Budget**

1. Exhibit D-1 of Amendment No. 1: The table below reflects the Contingency Budget included in Exhibit D-1 of Amendment No. 1, executed on April 7, 2023, for a maximum Participant Contingency Budget Funding not to exceed **\$272,041** for the program term, as stated below:

<b>Description</b>	<b>7/1/22 - 6/30/23</b>	<b>7/1/23 - 6/30/24</b>	<b>7/1/24 - 6/30/25</b>	<b>7/1/25 - 6/30/26</b>	<b>7/1/26 - 6/30/27</b>	<b>7/1/27 - 6/30/28</b>	<b>7/1/28 - 3/18/29</b>
Subscription Costs for Anticipated User Growth (25 additional SmartCare users per year and 5 additional Prescribers)	\$ 7,772.61	\$ 7,772.61	\$ 7,772.61	\$ 7,772.61	\$ 7,772.61	\$ 7,772.61	\$ 7,772.61
Subscription Costs for Additional Modules	\$ 5,182.13	\$ 5,182.13	\$ 5,182.13	\$ 5,182.13	\$ 5,182.13	\$ 5,182.13	\$ 5,182.13
Discretionary Development Budget for Participant Specific Requirements	\$ 12,954.15	\$ 12,954.15	\$ 12,954.15	\$ 12,954.15	\$ 12,954.15	\$ 12,954.15	\$ 12,954.15
Professional Services	\$ 12,954.15	\$ 12,954.15	\$ 12,954.15	\$ 12,954.15	\$ 12,954.15	\$ 12,954.15	\$ 12,954.15
<b>Total Amount by Fiscal Year</b>	<b>\$ 38,863.03</b>	<b>\$ 38,863.03</b>	<b>\$ 38,863.03</b>	<b>\$ 38,863.03</b>	<b>\$ 38,863.03</b>	<b>\$ 38,863.03</b>	<b>\$ 38,863.03</b>
<b>Total Participant Contingency Funds</b>	<b>\$ 272,041</b>						

2. Exhibit D-2: The table below reflects the **reduction of \$4,600** to the Contingency Budget affected by this Participation Agreement Amendment No. 2, and replaces Exhibit D-1 in Amendment No. 1, effective upon execution of this Participation Agreement Amendment No. 2. The revised maximum Contingency Budget Funding shall not exceed **\$267,441** for the program term, as stated below:

Description	7/1/22 - 6/30/23	7/1/23 - 6/30/24	7/1/24 - 6/30/25	7/1/25 - 6/30/26	7/1/26 - 6/30/27	7/1/27 - 6/30/28	7/1/28 - 3/18/29
Subscription Costs for Anticipated User Growth (25 additional SmartCare users per year and 5 additional Prescribers)	\$ 7,641.18	\$ 7,641.18	\$ 7,641.18	\$ 7,641.18	\$ 7,641.18	\$ 7,641.18	\$ 7,641.18
Subscription Costs for Additional Modules	\$ 5,094.08	\$ 5,094.08	\$ 5,094.08	\$ 5,094.08	\$ 5,094.08	\$ 5,094.08	\$ 5,094.08
Discretionary Development Budget for Participant Specific Requirements	\$ 12,735.32	\$ 12,735.32	\$ 12,735.32	\$ 12,735.32	\$ 12,735.32	\$ 12,735.32	\$ 12,735.32
Professional Services	\$ 12,735.32	\$ 12,735.32	\$ 12,735.32	\$ 12,735.32	\$ 12,735.32	\$ 12,735.32	\$ 12,735.32
<b>Total Amount by Fiscal Year</b>	<b>\$ 38,205.89</b>	<b>\$ 38,205.89</b>	<b>\$ 38,205.89</b>	<b>\$ 38,205.89</b>	<b>\$ 38,205.89</b>	<b>\$ 38,205.89</b>	<b>\$ 38,205.89</b>
<b>Total Participant Contingency Funds</b>	<b>\$ 267,441</b>						

All other terms or provisions in the Agreement and Amendment No. 1, not cited in this Participation Agreement Amendment No. 2, shall remain in full force and effect.

**CalMHSA**

Signed: \_\_\_\_\_ Name (Printed): Dr. Amie Miller, Psy.D., MFT

Title: Executive Director Date: \_\_\_\_\_

**Participant:**

Signed: \_\_\_\_\_ Name (Printed): \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_