



RESOLUTION No. 17-249

OF THE BOARD OF SUPERVISORS OF THE COUNTY OF NEVADA

RESOLUTION APPROVING EXECUTION OF AMENDMENT NO. 1 TO THE RENEWAL CONTRACT WITH WILLOW GLEN CARE CENTER AND AUTHORIZING AND DIRECTING THE AUDITOR-CONTROLLER TO AMEND BEHAVIORAL HEALTH DEPARTMENT'S BUDGET FOR FISCAL YEAR 2016/17 (RES. 17-170) (4/5 AFFIRMATIVE VOTE REQUIRED)

WHEREAS, the County entered into a renewal contract with Willow Glen Care Center for the provision of long term mental health and residential care to adults with mental health conditions on April 25, 2017 per Resolution 17-170 for the contract term of July 1, 2016 through June 30, 2017; and

WHEREAS, the parties desire to renew and amend their Agreement to: increase the Maximum Contract Price; extend the Contract Termination date; and revise Exhibit "B" Schedule of Charges and Payments to reflect the increase in maximum price.

NOW, THEREFORE, BE IT HEREBY RESOLVED by the Board of Supervisors of the County of Nevada, State of California, that Amendment No. 1 by and between the County and Willow Glen Care Center pertaining to the provision of long-term mental health and residential care to adult clients with mental health conditions which increases the Maximum Contract Price from \$63,600 to \$134,500 (an increase of \$70,900), not to exceed \$109,500 for Fiscal Year 2016/17 and \$25,000 for Fiscal Year 2017/18; extends the Contract Termination Date from June 30, 2017 to June 30, 2018; and revises Exhibit "B" Schedule of Charges and Payments to reflect the increase in the maximum contract price, be and hereby is approved, and that the Chair of the Board of Supervisors be and is hereby authorized to execute the Amendment on behalf of the County of Nevada and authorizes and directs the Auditor-Controller to release fund balance from fund 1480 and amend Behavioral Health Department's Budget for Fiscal Year 2016/17 as follows:

Fiscal Year 2016/17

Revenue:	1589-40110-493-8201/446250	\$86,550
	1589-40110-493-8201/474001	\$22,950
Expenditure:	1589-40110-493-8201/521520	\$109,500
	1480-40119-493-1000/550701	\$22,950

PASSED AND ADOPTED by the Board of Supervisors of the County of Nevada at a regular meeting of said Board, held on the 13th day of June, 2017, by the following vote of said Board:

Ayes: Supervisors Heidi Hall, Edward Scofield, Dan Miller, Hank Weston and Richard Anderson.

Noes: None.

Absent: None.

Abstain: None.

ATTEST:

JULIE PATTERSON HUNTER
Clerk of the Board of Supervisors

By:  _____



Hank Weston, Chair

6/13/2017 cc: BH*
AC*
WGCC

**AMENDMENT #1 TO THE RENEWAL CONTRACT WITH
WILLOW GLEN CARE CENTER (RESO 17-170)**

THIS AMENDMENT is dated this 4th day of May, 2017 by and between WILLOW GLEN CARE CENTER, hereinafter referred to as "Contractor" and COUNTY OF NEVADA, hereinafter referred to as "County". Said Amendment will renew and amend the prior Agreement between the parties entitled Personal Services Contract, as approved on April 25th, 2017, per Resolution No. 17-170.

WHEREAS, the County has contracted with Contractor to provide long term mental health and residential care to adult clients with mental health conditions, for the contract term of July 1, 2016 through June 30, 2017; and

WHEREAS, the parties desire to renew and amend their agreement to: 1) increase the Maximum Contract Price from \$63,600 to \$134,500 (an increase of \$70,900) due to an unanticipated increase in services; 2) extend the Contract Termination Date from June 30, 2017 to June 30, 2018; and 3) revise Exhibit "B" Schedule of Charges and Payments to reflect the increase in the maximum contract price.

NOW, THEREFORE, the parties hereto agree as follows:

1. That Amendment #1 shall be effective as of February 1, 2017.
2. That Section (§2) Maximum Contract Price, shall be changed to the following: \$134,500.
3. That Section (§3) Contract Termination Date, shall be changed to the following: 06/30/2018.
4. That Exhibit "B", "Schedule of Charges and Payments", shall be revised to the amended Exhibit "B" as attached hereto and incorporated herein.
5. That in all other respects the prior Agreement of the parties shall remain in full force and effect.

COUNTY OF NEVADA:

By: Hank Weston
Honorable Hank Weston
Chair of the Board of Supervisors

CONTRACTOR:

By: Jeff Payne
Jeff Payne, Executive Director
Willow Glen Care Center
1547 Plumas Court
Yuba City, California 95991

ATTEST:

By: Julie Patterson-Hunter
Julie Patterson-Hunter
Clerk of the Board of Supervisors

EXHIBIT "B"
SCHEDULE OF CHARGES AND PAYMENTS
WILLOW GLEN CARE CENTER

The maximum amount of this contract shall not exceed \$134,500 for the entire contract term of July 1, 2016 through June 30, 2018. The contract amount shall not exceed \$109,500 for Fiscal Year 2016/17 and \$25,000 for Fiscal Year 2017/18.

Contractor shall submit to County, no later than the tenth day of each month following the month in which services are provided, a monthly patient billing invoice for each client receiving services during that month. If more than one county client received services then Contractor shall also submit a summary statement of the total amount due. The Monthly Patient Billing Statement is attached hereto and by this reference incorporated herein.

Payment for services shall be made by County Auditor's Office according to County Auditor's payment schedule, provided there is an Admission Agreement signed by County's Director of Behavioral Health or the Director's designee and the contract amount has not been exceeded.

The rate of reimbursement for Day Rehabilitation Services shall be:

Sequoia Psychiatric Treatment Center

Rate Schedule:	7/1/16 - 12/31/16	1/1/17 - 6/30/17	7/1/17-6/30/2018
Board and Care Monthly Contract Rate:	\$800.00	\$810.00	\$810.00
Daily Contract Rate:	\$300.00	\$300.00	\$300.00

Willow Glen Care Center

Rate Schedule:	7/1/16 - 12/31/16	1/1/17 - 6/30/17	7/1/17-6/30/2018
Board and Care Monthly Contract Rate:	\$1014.00 / \$1034.00*	\$1026.37 / \$1046.37*	\$1026.37 / \$1046.37*
Daily Contract Rate:			
1-59 clients:	\$155.00	\$155.00	\$160.00
60-79 clients:	\$135.00	\$135.00	\$140.00
80-100 clients:	\$115.00	\$115.00	\$120.00
*SSI/SSP recipients who receive one paycheck per month / two paychecks per month			

Should the County be notified in writing that an adjustment to the rates has been made and the effective date of such adjustment, then County shall pay Contractor the adjusted rate.

County shall bill clients according to their liability as established by County and/or any third party payors (e.g. Medi-Cal, Medicare, private insurance) identified by County.

Contractor shall remit invoices to:

HHSA Administration
 Attn: BH Fiscal
 950 Maidu Avenue
 Nevada City, CA 95959

