CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY "CaIMHSA" TRI-PARTY PARTICIPATION/SERVICE AGREEMENT - 1st AMENDMENT

This Agreement Amendment is a contract by and between the California Mental Health Services Authority ("CalMHSA") and Telecare Corporation, Inc. ("Contractor") and Nevada County Behavioral Health ("County"). This Agreement Amendment modifies the following terms of the initial Agreement No. Early Psychosis Intervention Tri-Party Agreement Telecare, CalMHSA, Nevada County 9.23.24. This Amendment shall be effective upon Amendment execution.

This Agreement hereby amends the following terms:

- A. To increase the Total Funding amount (Up to) Not to be Exceeded by \$60,000 from \$250,000 to (Up to) Not to be Exceeded amount: \$310,000.
- B. Modify SECTION 1. Scope of Work, Item D, No. 1. Compensation for Contractor as follows: Contractor shall be compensated at a fixed fee amount of \$130,000 for the completion of the Grant Deliverables and fidelity monitoring activities over the course of the Project Agreement for all MCC counties. Of this amount, \$60,000 will be compensated to support the completion of a Coordinated Specialty Care (CSC) fidelity assessment through UC Davis. The remaining \$180,000 will be billed based on the hourly rates set out in Exhibit A as applied to units of billed time (as described in section D.2.b. below) which represents full compensation for all Services and shall be inclusive of all of Contractor's out-of-pocket expenses incurred in the performance of this Agreement, including travel, unless otherwise agreed to herein. Contractor can invoice CalMHSA for Grant Deliverables and Services, not to exceed \$180,000 over the Agreement Term.
- C. Modify SECTION 1. Scope of Work, Item D, No. 2. Invoices for Contractor, Item b. Invoices for Services as follows:
 - i. Email to: <u>accountspayable@calmhsa.org</u>
 - ii. Each invoice shall contain the following information, at a minimum: Contractor name, invoice number and date; remittance address and phone number; Agreement account number (provided by CalMHSA); , the Agreement rate for the Service, the total charge, and a copy of the county's invoice generator output reflecting charges for services provided by month. Contractor shall sign all invoices.
 - iii. Invoices shall be rendered in arrears.

All other terms or provisions in the initial Agreement No. Early Psychosis Intervention Tri-Party Agreement Telecare, CalMHSA, Nevada County 9.23.24 not cited in this Agreement Amendment shall remain in full force and effect.

Contractor:

Signed:	Name (printed): Dawan Utecht	
Title: SVP/Chief Development Officer	Date:	
Address: 1080 Marina Village Parkway, Suite 100, Alameda, CA 94501		
Phone: (559) 374-4439	Email: dutecht@telecarecorp.com	

Nevada County:

Signed:	Name (printed): Phebe Bell
Title: Director	Date:
Address: 500 Crown Point Circle, Grass Valley,	CA 95945
Phone: (530) 470-2784	Email: phebe.bell@nevadacounty.gov

CalMHSA

Signed:	Name (printed): Dr. Amie Miller, Psy.D., MFT	
Title: Executive Director	Date:	
Address: 1610 Arden Way, Suite 175, Sacramento, CA 95815		
Phone: 279-234-0701	Email: amie.miller@calmhsa.org	