

**AMENDMENT #2 TO THE RENEWAL CONTRACT WITH  
AEGIS TREATMENT CENTERS, LLC. (RES. 19-472; RES. 19-610)**

**THIS AMENDMENT** is dated this 28<sup>th</sup> day of April 2020 by and between AEGIS TREATMENT CENTERS, LLC., hereinafter referred to as “Contractor” and COUNTY OF NEVADA, hereinafter referred to as “County”. Said Amendment will amend the prior Agreement between the parties entitled Personal Services Contract, as approved on August 27, 2019, per Resolution No. 19-472, and subsequently amended on December 17, 2019, per Resolution No. 19-610.

**WHEREAS**, the County has contracted with Contractor to provide Drug Medi-Cal (DMC) outpatient Narcotic Treatment Program (NTP) for referred clients of the Nevada County Behavioral Health Department, for the contract term of July 1, 2019 through June 30, 2020; and

**WHEREAS**, the parties desire to amend their agreement to increase the maximum contract price from \$300,000 to \$367,000 (an increase of \$67,000); 2) and 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 April 1, 2020.
2. That Section (§2) Maximum Contract Price shall be changed to the following: \$367,000.
3. That Exhibit “B”, “Schedule of Charges and Payments”, shall be revised to the amended Exhibit “B” as attached hereto and incorporated herein.
4. That in all other respects, the prior Agreement of the parties shall remain in full force and effect.

COUNTY OF NEVADA:

By: \_\_\_\_\_  
Heidi Hall  
Chair of the Board of Supervisors

ATTEST:

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

CONTRACTOR:

By: \_\_\_\_\_  
Alex Dodd  
CEO  
7246 Remmet Avenue  
Canoga Park, California 91303

**EXHIBIT “B”**  
**SCHEDULE OF CHARGES AND PAYMENTS**  
**AEGIS TREATMENT CENTERS, LLC.**

Subject to the satisfactory performance of services required of Contractor pursuant to this Contract, and the terms and conditions set forth, the maximum obligation of this Agreement shall not exceed \$367,000 for the contract term. The payment obligation of this Contract is contingent and dependent upon final approval of State budget and County receipt of anticipated funding to support program expenses. Only services for Nevada County Medi-Cal beneficiaries who maintain residency in Nevada County shall be billed through this Agreement.

**Rates:**

Urinalysis (UA) testing: \$15 for each specimen collection. Requires prior approval from County Program Manager or designee.

Medi-Cal Rates for Services: (\*)

Non-Perinatal

- NTP Methadone: \$13.93 per daily dose
- NTP Individual Counseling: \$15.74 per 10-minute increment
- NTP Group Counseling: \$3.36 per 10-minute increment
- NTP Buprenorphine-Generic: \$21.65 per daily dose

Perinatal

- NTP Methadone: \$15.00 per daily dose
- NTP Individual Counseling: \$23.39 per 10-minute increment
- NTP Group Counseling: \$5.37 per 10-minute increment
- NTP Buprenorphine-Generic: \$26.57 per daily dose

(\*) Rates in effect at the time this Agreement were developed, subject to periodic revision by Medi-Cal.

**BILLING AND PAYMENT**

To expedite payment, Contractor shall reference on their invoice the County Purchase Order or Resolution Number, which has been assigned to their approved contract. Contractor shall submit to County, for services rendered in the prior month, and in accordance with the reimbursement rate, a statement of services rendered to County and costs incurred that includes documentation to support all expenses claimed by the 20<sup>th</sup> of each month. County shall review the billing and notify the Contractor within fifteen (15) working days if an individual item or group of costs is being questioned. Contractor has the option of delaying the entire claim pending resolution of the cost(s). Payment of approved billing shall be made within thirty (30) days of receipt of a complete, correct and approved billing. Payments shall be made in the amount of the total Contractor’s claim minus amount of denied services that are not Drug Medi-Cal eligible. County shall not be responsible for reimbursement of invoices submitted by Contractor that do not meet State and/or Federal submission timeliness requirements. Contractor shall prepare, in the form and manner required by County and the State Department of Health Care Services, a financial

statement and a cost report verifying the total number of service units actually provided and covering the costs that are actually incurred in the provision of services under this Contract no later than 60 days following the termination or expiration of this Contract, whichever comes first.

Contractor shall submit quarterly fiscal reports, including a detailed list of costs for the prior quarter and cumulatively during the contract period.

Contractor shall submit invoices to:

Nevada County Behavioral Health Department  
Attn: Fiscal Staff  
500 Crown Point Circle, Suite 120  
Grass Valley, CA 95945