

**AGREEMENT FOR SERVICES
AMENDMENT 01**

Amador Calaveras Counseling Services <small>Contractor</small>	Health and Human Services Agency <small>Department</small>		
Counseling Services <small>Description</small>	Human Services <small>Division</small>		
July 1, 2017 through June 30, 2020 <small>Agreement Term</small>	Child Welfare <small>Program/Unit</small>		
1063-0002-A01 <small>Agreement Number</small>	\$50,000 <small>Amount</small>	10300960 <small>Org. Key</small>	5272 <small>Object Code</small>

The following Agreement terms and conditions shall be amended effective December 11, 2018:

1. DESCRIPTION OF SERVICES

1.1. **Contractor's Specified Services:** Contractor shall perform the services described in Exhibit A: Scope of Work attached hereto and incorporated herein by this reference, and within the times or by the dates provided for in Exhibit A: Scope of Work. In the event of any conflict between any provisions of this Agreement and any Exhibit(s) to this Agreement, the provision that requires the highest level of performance from the Contractor for the County's benefit shall prevail.

2. COMPENSATION AND PAYMENT

2.1. **Total Compensation:** For the services described in Section 1 above, and subject to the condition that the specified task has been completed as set forth in Section 1.3 above, For the period of July 1, 2017 through December 10, 2018 the Contractor shall be compensated at the rate of Sixty Dollars (\$60) per hour and the period of December 11, 2018 through June 30, 2020 the Contractor shall be compensated at the rate of Eighty Dollars (\$80) per hour however, the total amount of compensation to be paid to Contractor total not to exceed amount of Fifty Thousand Dollars (\$50,000).

3. TERM

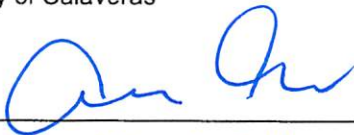
The term of this Agreement shall be from July 1, 2017 through June 30, 2020 unless terminated earlier as set forth in Section 7: Termination and Severability. The term of this Agreement may only

be extended upon written mutual consent of both parties as set forth in Section 28: Amendment.
The above and following addressed terms, conditions and Exhibit A supersede previous versions, while
all other terms and conditions shall remain unchanged.

IN WITNESS THEREOF the parties hereto execute this Agreement this

14th day of January, 2020.

County of Calaveras

By 

~~Board Chair~~ Albert Alt

~~Board of Supervisors~~

County Admin. Officer

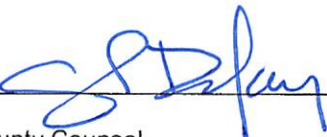
Contractor

By 

Abraham Cerezo

Amador Calaveras Counseling Services

Approved as to Legal Form:

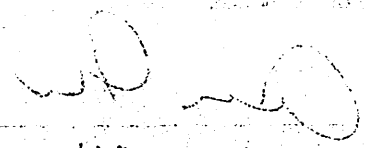
By 

County Counsel

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Handwritten text: *County Admin. Officer*

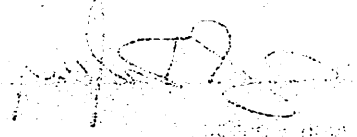


EXHIBIT A: SCOPE OF WORK

Amador Calaveras Counseling Services <small>Contractor</small>	Health and Human Services Agency <small>Department</small>		
Counseling Services <small>Description</small>	Human Services <small>Division</small>		
July 1, 2017 through June 30, 2020 <small>Agreement Term</small>	Child Welfare <small>Program/Unit</small>		
1063-0002-A01 <small>Agreement Number</small>	\$50,000 <small>Amount</small>	10300960 <small>Org. Key</small>	5272 <small>Object Code</small>

The following Agreement terms and conditions shall be amended effective December 11, 2018. All other terms and conditions in Exhibit A: Scope of Work shall remain unchanged:

Responsibilities of Contractor:

1. Contractor shall accept referrals for counseling and/or therapy session for clients referred by County via Attachment A: Child Welfare Service Referral Form.
2. Contractor shall, within five (5) working days from the assessment/screening, send written report with recommendations for the client's treatment services, the client's program assignment, and the client's start date to the referring Child Welfare Services Social Worker. Service provider shall complete bottom section of Child Welfare Service Referral Form for treatment recommendation, duration of treatment, and cost of treatment and identify the periodicity of when progress reports are sent. Once the Service Referral Form is received back from provider with the aforementioned information, the provider will receive from Calaveras County Health and Human Services Agency a signed financial agreement. No treatment may commence until an approved financial agreement is received. The exception to this is intake assessments, which County shall reimburse. No treatment shall be provided or paid for outside of the approved financial agreement. Contractor shall provide an invoice for all services rendered for payment processing.
3. Contractor shall maintain progress notes for each session with clients and will provide to the assigned Social Worker written progress and evaluation reports as requested by the County



Social Worker, but no less frequently than once every month. Initial assessment results and recommendations will be reported to County Social Worker within fourteen (14) days of the completed assessment.

4. Contractor shall not bill County for clients who do not show for or cancel their appointment, or for clients who have other medical insurance or Medi-Cal coverage that would provide reimbursement for the services rendered. County shall be payor of last resort. Service provider should discuss payment options with client and make every effort to accept client's health insurance, Medi-Cal, or Victim of Crime insurance.
5. Contractor may provide consultations on an as needed basis.

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