Contra Costa County

To: Board of Supervisors

From: William Walker, M.D., Health Services Director

Date: October 24, 2017

Subject: Amendment #23-523-4 with API Healthcare Corporation

RECOMMENDATION(S):

Approve and authorize the Health Services Director, or his designee, to execute, on behalf of the County, Amendment Agreement #23-523-4 with API Healthcare Corporation, a corporation, effective October 24, 2017, to amend Contract #23-523-2, to increase the payment limit by \$10,800, from \$691,008 to a new payment limit of \$701,808, with no change in the original term of June 30, 2016 through June 29, 2019.

FISCAL IMPACT:

This amendment is funded 100% by Hospital Enterprise fund I. (No rate increase)

BACKGROUND:

On June 21, 2016, the Board of Supervisors approved Contract #23-523-2 with API Healthcare Corporation for the implementation, licensing and hosting of contractor's patient classification software and staffing and scheduling software, for the period from June 30, 2016 through June 29, 2019.

Approval of Contract Amendment Agreement #23-523-4 will allow the contractor to provide additional software consultation and maintenance services with no change in the

✓ APPROVE	OTHER
▼ RECOMMENDATION OF CNTY ADMINISTRATOR	
Action of Board On: 10/24/2017 APPROVED AS RECOMMENDED OTHER	
Clerks Notes:	
VOTE OF SUPERVISORS	
AYE: John Gioia, District I Supervisor	
Candace Andersen, District II Supervisor	I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board
Diane Burgis, District III Supervisor	of Supervisors on the date shown. ATTESTED: October 24, 2017
Karen Mitchoff, District IV Supervisor	David Twa, County Administrator and Clerk of the Board of Supervisors
Federal D. Glover, District V Supervisor	By: June McHuen, Deputy
Contact: David Runt	

cc: Tasha Scott, Marcy Wilhelm

925-335-8700

original term through June 29, 2019.

CONSEQUENCE OF NEGATIVE ACTION:

If this amendment is not approved, the Health Services Department's Information Systems Unit will not receive the consultation and maintenance services needed for patient classification and staffing and scheduling systems.