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Contra Costa County

To: Board of Supervisors

From: Anna Roth, Health Services Director

Date: May 7, 2019

Subject: Contract Amendment #24–794–9 (11) with BHC Sierra Vista Hospital, Inc.

RECOMMENDATION(S):

APPROVE and AUTHORIZE the Health Services Director, or designee, to execute on behalf of the County Contract Amendment Agreement #24–794–9(11) with BHC Sierra Vista Hospital, Inc., a corporation, to amend Contract #24–794–9(10), effective May 1, 2019, to decrease the payment limit by \$175,000, from \$250,000 to a new payment limit not to exceed \$75,000 and include a six-month automatic extension through December 31, 2019 in an amount not to exceed \$37,500.

FISCAL IMPACT:

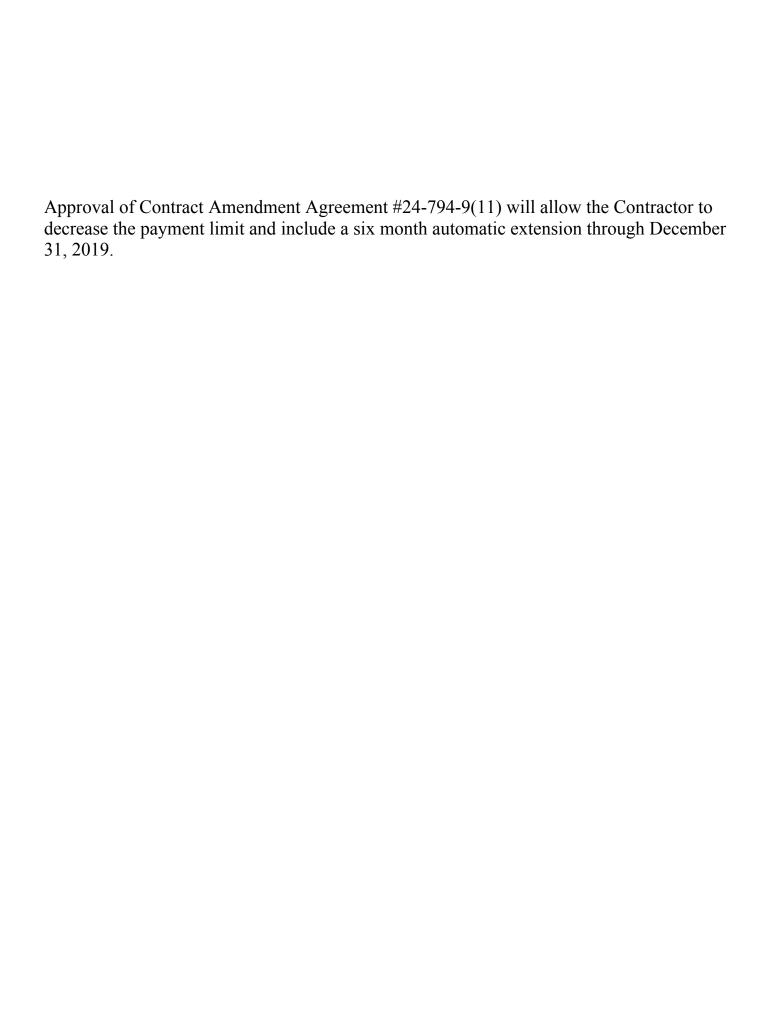
This amendment is funded 100% by Mental Health Realignment funds. (No rate increase)

BACKGROUND:

On July 24, 2018, the Board of Supervisors approved Contract #24–794–9(10) with BHC Sierra Vista Hospital, Inc., for the period from July 1, 2018 through June 30, 2019 for the provision of inpatient psychiatric hospital services to County-referred adults and adolescents. This contract includes mutual indemnification.

DECOMMENDATION OF CNTY	
	RECOMMENDATION OF BOARD MITTEE
Action of Board On: 05/07/2019 APPROVED AS RECOMMENDED OTHER Clerks Notes: VOTE OF SUPERVISORS	
Candace Andersen, District II Supervisor the Board of Supervisors on the date Diane Burgis, District III Supervisor ATTESTED: May 7, 20	nistrator and Clerk of the Board of Supervisors

925-957-5201



CONSEQUENCE OF NEGATIVE ACTION:

If this amendment is not approved, the contract payment limit will not be consistent with the County's utilization of the services provided by the Contractor nor will an automatic extension be available for the County to continue receiving services for inpatient psychiatric services at the Contractor's facility.

CHILDREN'S IMPACT STATEMENT:

This program supports the following Board of Supervisors' community outcome: "Communities that are Safe and Provide a High Quality of Life for Children and Families". Expected program outcomes include a decrease in the need for inpatient care and placement at a lower level of care.