

AGREEMENT FOR SERVICES #657-S0711
AMENDMENT I

This Amendment I to that Agreement for Services #657-S0711, made and entered into by and between the County of El Dorado, a political subdivision of the State of California (hereinafter referred to as "County"), and Crestwood Behavioral Health, Inc., a Delaware Corporation, duly qualified to conduct business in the State of California, whose principal place of business is 7590 Shoreline Drive; (mailing: P.O. Box 7877) Stockton, CA 95219, whose Agent for Service of Process is Maria Stefanou at 520 Capitol Mall, Suite 600, Sacramento, CA 95814; (hereinafter referred to as "Contractor");

WITNESSETH

WHEREAS, Contractor has been engaged by county to provide a long-term 24-hour Special Treatment Program for mentally ill adults (hereinafter referred to as "Clients"), in accordance with Agreement for Services #657-S0711, dated June 26, 2007, incorporated herein and made by reference a part hereof; and

WHEREAS, the parties hereto have mutually agreed to revise the payment rates of said Agreement, hereby amending **ARTICLE III – Compensation for Services**; and

WHEREAS, the parties hereto have mutually agreed to add **ARTICLE XXIX – Cost Report**.

NOW THEREFORE, the parties do hereby agree that Agreement for Services #657-S0711 shall be amended a first time as follows:

ARTICLE III

Compensation for Services: For services provided herein, County agrees to pay Contractor monthly in arrears. Payment shall be made within forty-five (45) days following county receipt and approval of itemized invoice(s) detailing services rendered, including the name of Client for which services were provided. County shall reimburse Contractor in accordance with the approved Supplemental Rate for the level of care provided and in accordance with Section 4075 of the Welfare and Institution Code. The Supplemental Rate is based on Facility size and the level(s) of care for which Contractor is authorized to provide and for which Client is certified. For the purposes hereof, effective upon execution of this Amendment I, the billing rates shall be in accordance with Exhibit "B", marked "Revised IMD Budget", incorporated herein and made by reference a part hereof.

With respect to any additional services provided under this Agreement as specified under "Scope of


Services" hereto, Contractor shall not be paid unless Contractor has received written authorization from County for the additional services prior to incurring the costs associated therewith. Said additional services shall be charged at the rates set forth in Exhibit "B". The total amount of this Agreement shall not exceed \$1,400,000.00 for the two (2) year period.

ARTICLE XXIX

Cost Report: Contractor shall submit an Annual Cost Report to County on or before October 31 of each year. Contractor shall prepare the Cost Report in accordance with all Federal, State, and County requirements and generally accepted accounting principles. Contractor shall allocate direct and indirect costs to and between programs, cost centers, services, and funding sources in accordance with such requirements and consistent with prudent business practice. Such costs and allocations shall be supported by source documentation maintained by Contractor, and available at any time to Administrator upon reasonable notice. Contractor shall document that costs are reasonable and allowable and directly or indirectly related to the services provided hereunder. The Cost Report shall be the final financial record of services rendered under this Agreement for subsequent audits, if any.

Except as herein amended, all other parts and sections of that Agreement for Services #657-S0711 shall remain unchanged and in full force and effect.

REQUESTING DEPARTMENT HEAD CONCURRENCE:

By:  Dated: 12/8/08
Neda West, Director
Health Services Department

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IN WITNESS WHEREOF, the parties hereto have executed this First Amendment to that Agreement for Services #657-S0711 on the dates indicated below.

-- COUNTY OF EL DORADO --

Dated: _____

By: _____
Chairman
Board of Supervisors
"County"

ATTEST:
Suzanne Allen de Sanchez, Clerk
of the Board of Supervisors

By: _____ Date: _____
Deputy Clerk

-- CONTRACTOR --

Dated: _____

CRESTWOOD BEHAVIORAL HEALTH, INC.
A DELAWARE CORPORATION

By: _____
George C. Lytal, President &
Chief Executive Officer
"Contractor"

By: _____
Corporate Secretary

Dated: _____

**EXHIBIT B
Revised IMD Budget**

CRESTWOOD BEHAVIORAL HEALTH, INC.

TOTAL WITH ENHANCED SERVICES

IMD 18-64		BASIC	ENHANCED	TOTAL
VALLEJO	(37 BED)	156.98	17.00	173.98
		156.98	30.00	186.98
		156.98	50.00	206.98
		156.98	80.00	236.98
REDDING GTC		156.98	10.00	166.98
		156.98	20.00	176.98
		156.98	40.00	196.98
		156.98	50.00	206.98
NON IMD 18-64				
STOCKTON		0	25.00	25.00
		0	27.00	27.00
			30.00	30.00
		156.98	14.00	170.98
MODESTO		0.00	25.00	25.00
			27.00	27.00
		156.98	14.00	170.98
FREMONT GTC		181.95	118.00	299.95
	NEURO-BEHAV		118.00	118.00
	CONVERSION (REQUIRES PRIV ROOM)			257.34
CRESTWOOD MANOR FREMONT		0.00	28.00	28.00
		0.00	50.00	50.00
			80.00	80.00
			118.00	118.00
IDYLWOOD CARE CTR				
	NEURO-BEHAV- LOCKED		118.00	118.00
			143.00	143.00
	CONVERSION (REQUIRES PRIV ROOM)			257.34

MENTAL HEALTH REHAB CENTERS

SACRAMENTO	MHRC	166.00
	SUB ACUTE	202.00
SAN JOSE		199.00
	PREGNANT	207.00
VALLEJO	LEVEL 1	245.00
	LEVEL 2	209.00
	LEVEL 3	185.00
	LEVEL 4	174.00
ANGWIN	LEVEL 1	238.00
	LEVEL 2	190.00
	LEVEL 3	155.00
BAKERSFIELD	LEVEL 1	202.00
	LEVEL 2	446.00
SOLANO	MHRC	190.00
	LEVEL 2	214.00
	DAY TREATMENT	110.00
AMERICAN RIVER		173.00
EUREKA		173.00
PLEASANT HILL		214.00

COMMUNITY CARE CENTERS

BRIDGEHOUSE (EUREKA)	120.00
OUR HOUSE	20.00
	30.00
BRIDGE (KERN)	140.00
FRUITRIDGE	122.00

ENGLE HOUSE	122.00
PLEASANT HILL BRIDGE	100.00
PLEASANT HILL PATHWAYS	145.00
FRESNO	130.00

GEROPSYCH 65+

	ENHANCED	TOTAL
STOCKTON	0.00	0.00
	20.00	20.00
	50.00	50.00
	SPECIAL	
SACRAMENTO	0.00	0.00
	20.00	20.00
	50.00	50.00
	SPECIAL	
SAN JOSE	0.00	0.00
	20.00	20.00
	50.00	50.00
	SPECIAL	
EUREKA	0.00	0.00
	20.00	20.00
	50.00	50.00
	SPECIAL	
VALLEJO	0.00	0.00
	20.00	20.00
	50.00	50.00
	SPECIAL	
MODESTO	0.00	0.00
	20.00	20.00
	50.00	50.00
	SPECIAL	
FREMONT GTC	0.00	0.00
	20.00	20.00
	50.00	50.00
	SPECIAL	
REDDING GTC	0.00	0.00
	20.00	20.00
	50.00	50.00
	SPECIAL	
CRESTWOOD MANOR-FREMONT	0.00	0.00
	20.00	20.00
	28.00	28.00
	50.00	50.00