

AGREEMENT FOR SERVICES #8676
AMENDMENT II

This Second Amendment to that Agreement for Services #8676, is 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 Shamanic Living Center, doing business as Recovery in Action, a California Non-Profit Corporation, duly qualified to conduct business in the State of California, whose principal place of business is 484 Pleasant Valley Road, Suite 4, Diamond Springs, California 95619 (hereinafter referred to as "Contractor");

RECITALS

WHEREAS, Contractor has been engaged by County to provide substance abuse assessments, substance abuse treatment services, substance abuse testing, and other related services on an “as requested” basis for clients referred by the County of El Dorado Health and Human Services Agency (HHS), pursuant to Agreement for Services #8676, dated October 8, 2024, and First Amendment to Agreement for Services #8676, dated November 4, 2024, incorporated herein and made by reference a part hereof (hereinafter referred to as “Agreement”);

WHEREAS, the parties hereto desire to amend the Agreement to increase the not-to-exceed compensation amount of the Agreement by \$250,000, and update the Substance Abuse Test rates, hereby amending **ARTICLE III, Compensation for Services**, and **ARTICLE IV, Maximum Obligation**, and adding Amended Exhibit A, marked “Amended Rates 2.0”;

WHEREAS, the parties hereto desire to amend the Agreement to add **ARTICLE XL, Generative Artificial Intelligence** to include updated contract provisions;

WHEREAS, unless otherwise specified herein, the following terms and conditions shall be effective upon final execution by both parties hereto of this Second Amendment to that Agreement #8676;

NOW THEREFORE, in consideration of the foregoing and the mutual promises and covenants hereinafter contained, County and Contractor mutually agree to amend the terms of the Agreement in this Second Amendment to Agreement #8676 on the following terms and conditions:

- 1) **ARTICLE III, Compensation for Services**, of the Agreement is amended in its entirety to read as follows:

ARTICLE III

Compensation for Services: For services provided herein, including any deliverables that may be identified herein, County agrees to pay Contractor upon the satisfactory completion and County’s acceptance of work, in arrears. Payment shall be made within forty-five (45) days following County’s receipt and approval of invoices identifying the services rendered.

- A. **Rates:** For the period beginning November 1, 2024, the effective date of the Agreement, and continuing through the day before the effective date of this Second Amendment to the Agreement, for the services provided herein, the billing rates shall be in accordance with the Exhibit A marked “Amended Rates” incorporated herein and made by reference a part hereof.

For the period beginning on the effective date of this Second Amendment to the Agreement, and continuing through the remaining term of the Agreement, for the services provided herein, the billing rates shall be in accordance with Amended Exhibit A-2 marked “Amended Rates 2.0” incorporated herein and made by reference a part hereof. Rates may be updated annually upon written approval, to include electronic communication, from County’s Contract Administrator or designee. Rate changes are subject to written approval by the County Contract Administrator or designee. County acceptance of rate changes will be submitted to Contractor via written notice in accordance with the Article titled “Notice to Parties”. Contractor shall submit rate change requests in writing to County at least thirty (30) days in advance of a rate change. There is a mutual understanding between Contractor and County that any service(s) that are Medi-Cal billable should be billed to Medi-Cal first and should only be billed to the County as the payor of last resort.

Travel expenses, including, but not limited to travel time, meals, lodging, and mileage shall not be paid by County.

- B. **Invoices:** It is a requirement of this Agreement that Contractor shall submit an original invoice, similar in content and format with the Health and Human Services Agency (HHS) invoice template linked online at <https://ElDoradoCounty.ca.gov/HHSA-Contractor-Resources>, and shall reference this Agreement number on their faces. Invoices shall be sent as follows, or as otherwise directed in writing by County:

<i>Email (preferred method):</i>	<i>U.S. Mail:</i>
SSCWSinvoice@edcgov.us Please include in the subject line: “Contract #, Service Month, Description / Program	County of El Dorado Health and Human Services Agency Attn: Finance Unit 3057 Briw Road, Suite B Placerville, CA 95667-5321

or to such other location or email as County directs.

Supplemental Invoices: For the purpose of this Agreement, supplemental invoices shall be defined as invoices submitted for additional services, previously disallowed services, or inadvertently not submitted services rendered during a month for which a prior invoice has already been submitted to County. Supplemental invoices should include the standard invoice format with description of services rendered. Supplemental Invoices for services provided during the period July 1st through June 30th for each fiscal year of this Agreement and received by County after July 31st of the subsequent fiscal year, shall be neither accepted nor paid by the County. Requests for exceptions to pay an invoice received after July 31st of the subsequent year, must be submitted in writing, and must be approved by the Health and Human Services Agency’s Chief Fiscal Officer.

In the event that Contractor fails to deliver, in the format specified, the deliverables and reports required by this Agreement, County at its sole option may delay the payment for

the period of time of the delay, cease all payments until such time as the required deliverables or reports are received, or proceed as set forth below in the Article titled “Default, Termination, and Cancellation,” herein.

- 2) **ARTICLE IV, Maximum Obligation**, of the Agreement is amended in its entirety to read as follows:

ARTICLE IV

Maximum Obligation: The maximum obligation for services and deliverables provided under this Agreement shall not exceed \$500,000, inclusive of all costs, taxes, and expenses.

- 3) **ARTICLE XL, Generative Artificial Intelligence**, is hereby added to read as follows:


ARTICLE XL

Generative Artificial Intelligence: For the purposes of this provision, “Generative AI (GenAI)” means an artificial intelligence system that can generate derived synthetic content, including text, images, video, and audio that emulates the structure and characteristics of the system's training data. (Gov. Code § 11549.64.)

- A. Contractor shall immediately notify County in writing if it: (1) intends to provide GenAI as a deliverable to County; or (2), intends to utilize GenAI, including GenAI from third parties, to complete all or a portion of any deliverable that materially impacts: (i) functionality of a State or County system (“System”), (ii) risk to the State or County, or (iii) performance of this Agreement. For avoidance of doubt, the term “materially impacts” shall have the meaning set forth in State Administrative Manual (SAM) § 4986.2 Definitions for GenAI.
- B. Notification shall be provided to County’s Contract Administrator identified in this Agreement.
- C. At the direction of County, Contractor shall discontinue the provision to County of any previously unreported GenAI that results in a material impact to the functionality of a System, risk to the State or County, or performance of this Agreement, as determined by County.
- D. If the use of previously undisclosed GenAI is approved by County, the Parties will amend the Agreement accordingly, which may include updating the description of deliverables and incorporating GenAI Special Provisions into the Agreement, at no additional cost to the County.
- E. County, at its sole discretion, may consider Contractor’s failure to disclose or discontinue the provision or use of GenAI as described above, to constitute a material breach of this Agreement when such failure results in a material impact to the functionality of the System, risk to the State or County, or performance of this Agreement. County is entitled to seek any and all remedies available to it under law as a result of such breach, including but not limited to termination of the contract.


Except as herein amended, all other parts and sections of that Agreement #8676 shall remain unchanged and in full force and effect.

Requesting Contract Administrator Concurrence:

By: 
Leslie Griffith (Apr 27, 2026 13:03:27 PDT)
Leslie Griffith, MSW
Assistant Director, Protective Services
Health and Human Services

Dated: 04/27/2026

Requesting Department Head Concurrence:

By: 
Olivia Byron-Cooper (Apr 27, 2026 14:06:30 PDT)
Olivia Byron-Cooper, MPH
Director
Health and Human Services

Dated: 04/27/2026

IN WITNESS WHEREOF, the parties hereto have executed this Second Amendment to Agreement for Services #8676 on the dates indicated below.

-- COUNTY OF EL DORADO --

Dated: _____

By: _____

Chair
Board of Supervisors
"County"

ATTEST:
Kim Dawson
Clerk of the Board of Supervisors

By: _____
Deputy Clerk

Dated: _____

-- SHAMANIC LIVING CENTER
DOING BUSINESS AS
RECOVERY IN ACTION --

By: Michael Shepard
Michael Shepard (Apr 30, 2026 15:59:47 PDT)
Michael Shepard
Chief Executive Officer
"Contractor"

Dated: 04/30/2026

By: Lisa Crosby
Lisa Crosby (Apr 30, 2026 20:28:22 PDT)
Lisa Crosby
Corporate Secretary
"Contractor"

Dated: 04/30/2026

**Shamanic Living Center doing business as Recovery in Action
Amended Exhibit A-2
Amended Rates 2.0**

<u>GENERAL SERVICE RATES</u>				
<u>Service Type</u>	<u>Service Details</u>	<u>County Standardized Rate (Effective 11/4/2024-10/31/2025)</u>	<u>County Standardized Rate (Effective 11/01/2025-10/31/2026)</u>	<u>County Standardized Rate (Effective 11/01/2026-10/31/2027)</u>
<i>Related Case Management</i>	<p><i>Case Management/Care Coordination.</i> For the purpose of helping the Client get referrals to other providers such as medical, dental, and therapy, etc.</p> <p><i>Juvenile Court Appearance.</i> Upon court subpoena and prorated for time actually spent at the pertinent juvenile court appearance. If appearance is cancelled with less than 24-hours' notice, Contractor may invoice for two (2) hours of time. If appearance is cancelled with 24 or more hours' notice, Contractor may not invoice for the appearance.</p> <p><i>Child & Family Team (CFT) Meeting and Multidisciplinary Team (MDT) Meeting.</i> Upon request by County and prorated for time spent at the pertinent CFT/MDT meeting. County shall only pay Contractor when County specifically requests Contractor's attendance. If meeting is cancelled with less than 24 hours' notice, Contractor may invoice for two (2) hours of time. If meeting is cancelled with 24 or more hours' notice, Contractor may not invoice for the meeting.</p>	<p style="text-align: center;">Case Management \$30 Per 15 Minute Increment</p> <p style="text-align: center;">Court Appearance \$30 Per 15 Minute Increment [Maximum of 60 Minutes Per Session]</p> <p style="text-align: center;">CFT/MDT Meeting \$40 Per 15 Minute Increment [Maximum of 120 Minutes Per Session]</p>	<p style="text-align: center;">Case Management \$35 Per 15 Minute Increment</p> <p style="text-align: center;">Court Appearance \$35 Per 15 Minute Increment [Maximum of 60 Minutes Per Session]</p> <p style="text-align: center;">CFT/MDT Meeting \$45 Per 15 Minute Increment [Maximum of 120 Minutes Per Session]</p>	<p style="text-align: center;">Case Management \$40 Per 15 Minute Increment</p> <p style="text-align: center;">Court Appearance \$40 Per 15 Minute Increment [Maximum of 60 Minutes Per Session]</p> <p style="text-align: center;">CFT/MDT Meeting \$50 Per 15 Minute Increment [Maximum of 120 Minutes Per Session]</p>

<p>Substance Abuse Counseling and Assessment</p>	<p>Individual Counseling Session. Upon request by County, minimum of 15 minutes per individual counseling session, per individual. Individual sessions include but are not limited to intake, case management, care coordination and discharge planning.</p> <p>Group Counseling Session. Upon request by County, minimum of 90 minutes per group outpatient session, per group counseling participant. Minimum of 180 minutes per group intensive outpatient session and per group counseling participant. One (1) or more therapists or counselors treat no less than two (2) and no more than twelve (12) group therapy participants at the same time.</p> <p>Initial Alcohol and Other Drug (AOD) Assessment. Upon request by County, minimum of 60 minutes per individual AOD assessment, per individual. Initial AOD assessment includes a face-to-face or telehealth interview by a registered or certified Substance Use Counselor, assessment, review, and letter of recommendation.</p>	<p>Individual Counseling \$30 Per 15 Minute Increment [Minimum of 15 Minutes Per Session]</p> <p>Group Outpatient Counseling \$65 Per Session [Minimum of 90 Minutes Per Session]</p> <p>Group Intensive Outpatient \$130 Per Session [Minimum of 180 Minutes Per Session]</p> <p>Initial AOD Assessment \$195 Per Session [Minimum of 60 Minutes Per Session]</p>	<p>Individual Counseling \$35 Per 15 Minute Increment [Minimum of 15 Minutes Per Session]</p> <p>Group Outpatient Counseling \$67 Per Session [Minimum of 90 Minutes Per Session]</p> <p>Group Intensive Outpatient \$135 Per Session [Minimum of 180 Minutes Per Session]</p> <p>Initial AOD Assessment \$205 Per Session [Minimum of 60 Minutes Per Session]</p>	<p>Individual Counseling \$40 Per 15 Minute Increment [Minimum of 15 Minutes Per Session]</p> <p>Group Outpatient Counseling \$70 Per Session [Minimum of 90 Minutes Per Session]</p> <p>Group Intensive Outpatient \$140 Per Session [Minimum of 180 Minutes Per Session]</p> <p>Initial AOD Assessment \$215 Per Session [Minimum of 60 Minutes Per Session]</p>
<p>Reports</p>	<p>Juvenile Court Document Preparation. Upon request by County and at no charge to the County. Within 30 calendar days of the request, Contractor shall provide HHSA staff with comprehensive written reports for County's use in court. This is separate from the initial AOD assessment report. The 30-day timeframe can be extended by HHSA staff.</p> <p>Initial AOD Assessment Report. Upon request by County and at no charge to the County. Within 30 calendar days of Client's initial AOD assessment, Contractor shall provide HHSA staff with a brief written client initial AOD</p>	<p>No charge for any reports</p>	<p>No charge for any reports</p>	<p>No charge for any reports</p>

	<p>assessment report. The 30-day timeframe can be extended by HHSA staff.</p> <p>Client Progress Report. Contractor provides monthly progress reports to County each month to include progress or lack of progress in treatment and drug test results. Upon request by County and at no charge to the County, Counselors shall provide updates to HHSA staff to communicate concerns on an as needed basis. Within 30 calendar days of the as needed request, Contractor shall provide HHSA staff with an as needed written progress report. The 30-day timeframe can be extended by HHSA staff.</p> <p>Substance Abuse Test Result. Upon request by County and at no charge to the County. Contractor shall provide HHSA staff with positive test results upon receipt from the lab. All other results will be sent to HHSA staff with the monthly progress report.</p>			
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Substance Abuse Testing Services Rates: Includes nail, hair, and/or urinalysis (UA) collection and written analysis of findings. Multiple Units of Service shall be allowed upon approval of appropriate HHSA staff.

<u>SUBSTANCE ABUSE TEST RATES</u>				
<i>Substance Abuse Test Type</i>	<i>Substance Abuse Test Details</i>	<u>County Standardized Rate (Effective 11/4/2024-10/31/2025)</u>	<u>County Standardized Rate (Effective 11/01/2025-10/31/2026)</u>	<u>County Standardized Rate (Effective 11/01/2026-10/31/2027)</u>
<i>Nail Test (5 panel)</i>	<i>On-site test that detects the presence of:</i> <ol style="list-style-type: none"> <i>1. Amphetamines (AMP)</i> <ol style="list-style-type: none"> <i>a. Amphetamine (AMP1000 or AMP300)</i> <i>b. Methamphetamine (M-AMP)</i> 	\$157 per test	\$163 per test	\$170 per test

	<ul style="list-style-type: none"> c. <i>Methylenedioxyamphetamine (MDMA aka Ecstasy)</i> d. <i>Methyldiethanolamine (MDEA)</i> e. <i>Methylenedioxyamphetamine (MDA)</i> <ul style="list-style-type: none"> 2. <i>Cannabinoids</i> <ul style="list-style-type: none"> a. <i>THC (Marijuana/Cannabis)</i> <ul style="list-style-type: none"> 3. <i>Cocaine Metabolites (COC150 or COC300)</i> <ul style="list-style-type: none"> a. <i>Norcocaine</i> b. <i>Benzoylecgonine</i> <ul style="list-style-type: none"> 4. <i>Opiates (OPI2000)</i> <ul style="list-style-type: none"> a. <i>Codeine</i> b. <i>Hydrocodone</i> c. <i>Hydromorphone</i> d. <i>Morphine (MOP300)</i> e. <i>Oxymorphone</i> f. <i>Oxycodone (OXY)</i> <ul style="list-style-type: none"> 5. <i>Phencyclidine (PCP)</i> <ul style="list-style-type: none"> a. <i>Phencyclidine (PCP)</i> 			
Hair Test (5 Panel)	<p><i>Hair test (must be at least 10cm in length) will go back 90 days and provide a positive or negative result/presence of:</i></p> <ul style="list-style-type: none"> 1. <i>Benzodiazepines (BZO)</i> 2. <i>Cocaine Metabolite (COC150 or COC300)</i> 3. <i>Methamphetamines (M-AMP)</i> 4. <i>Opiates (OPI2000)</i> 5. <i>THC (Marijuana/Cannabis)</i> 	\$107 per test	\$113 per test	\$120 per test
Hair/Nail Test (13 panel)	<p><i>On-site test that detects the presence of:</i></p> <ul style="list-style-type: none"> 1. <i>Amphetamines (AMP1000 or APM300)</i> 2. <i>Barbiturates (BAR)</i> 3. <i>Benzodiazepines (BZO)</i> 4. <i>Cannabinoids</i> 5. <i>Cocaine Metabolites (COC150 or COC300)</i> 6. <i>Fentanyl (FTY)</i> 7. <i>Ketamine (KET)</i> 8. <i>Methadone (MTD)</i> 9. <i>Meperidine</i> 10. <i>Opiates (OPI2000)</i> 11. <i>Oxycodone (OXY)</i> 12. <i>Phencyclidine (PCP)</i> 13. <i>Tramadol (TRA)</i> 	N/A	\$300	\$300
Hair/Nail Test (ETG)	<p><i>Stand-alone or add on lab test that detects the presence of:</i></p> <ul style="list-style-type: none"> 1. <i>Ethyl glucuronide (ETG aka alcohol 80 hr)</i> 	\$107 per test	\$113 per test	\$120 per test
Hair/Nail Test (Fentanyl)	<p><i>Stand-alone or add on lab test that detects the presence of:</i></p> <ul style="list-style-type: none"> 1. <i>Fentanyl (FTY)</i> 	\$127 per test	\$133 per test	\$140 per test

Urinalysis (UA) (11 panel)	<i>Lab test that detects the presence of:</i> 1. Amphetamines (AMP1000 or AMP300) 2. Barbiturates (BAR) 3. Benzodiazepines (BZO) 4. Cocaine Metabolites (COC150 or COC300) 5. Creatinine 6. Ethyl Glucuronide (ETG aka alcohol 80 hr) 7. Fentanyl (FTY) 8. Opiates (OPI2000) 9. Oxycodone (OXY) 10. Phencyclidine (PCP) 11. THC (Marijuana/Cannabis)	N/A	\$76 per test	\$76 per test
Instant Urinalysis (UA) (14 panel)	<i>On-site test that detects ONLY the presence of:</i> 1. Amphetamines (AMP1000 or AMP300) 2. Barbiturates (BAR) 3. Benzodiazepines (BZO) 4. Buprenorphine (BUP) 5. Cocaine Metabolites (COC150 or COC300) 6. MDMA (Ecstasy) 7. Methadone (MTD) 8. Methamphetamine (M-AMP) 9. Morphine (MOP300) 10. Opiates (OPI2000) 11. Oxycodone (OXY) 12. Phencyclidine (PCP) 13. Propoxyphene (PPX) & Tricyclic Antidepressants (TCA) 14. THC (Marijuana/Cannabis)	\$43 per test	\$46 per test	\$50 per test
Urinalysis (UA) (ETG)	<i>Lab test (sent to the lab) that detects the presence of:</i> 1. Ethyl Glucuronide (ETG aka alcohol 80 Hour).	\$38 per test	\$41 per test	\$45 per test
Urinalysis (UA) (Xylazine)	<i>Stand-alone or add on (to the 10 panel UA/ETG) lab test that detects the presence of:</i> 1. Xylazine	\$30 per test	\$33 per test	\$35 per test

Lab confirmation	<i>Lab confirmation for positive tests that detect the presence of:</i> <ol style="list-style-type: none"> 1. <i>Amphetamines (AMP1000 or AMP300)</i> 2. <i>Barbiturates (BAR)</i> 3. <i>Benzodiazepines (BZO)</i> 4. <i>Buprenorphine (BUP)</i> 5. <i>Cocaine Metabolites (COC150 or COC300)</i> 6. <i>MDMA (Ecstasy)</i> 7. <i>Methadone (MTD)</i> 8. <i>Methamphetamine (M-AMP)</i> 9. <i>Morphine (MOP300)</i> 10. <i>Opiates (OPI2000)</i> 11. <i>Oxycodone (OXY)</i> 12. <i>Phencyclidine (PCP)</i> 13. <i>Propoxyphene (PPX) and Tricyclic Antidepressants (TCA)</i> 14. <i>THC (Marijuana/Cannabis)</i> 	\$23 per test	\$26 per test	\$30 per test
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RESIDENTIAL SERVICE RATES

<u>Residential Service Type</u>	<u>Residential Service Details</u>	<u>*County Standardized Rate (Effective 11/4/2024-8/27/2025)</u>	<u>*County Standardized Rate (Effective 8/28/2025-10/31/2026)</u>	<u>*County Standardized Rate (Effective 11/01/2026 – 10/31/2027)</u>
<i>Recovery Housing</i>	<p><i>Perinatal Recovery Residence.</i> Upon request by County, per day, per individual. Perinatal Recovery Residence for women which includes accommodations for infants and young children. The individuals in the household are under the supervision of a house manager and will be provided with connections to services throughout the county. Individuals will be assessed to determine needs for treatment and supported to access the appropriate level of treatment they need. This will be a sober placement and random drug testing will be provided as part of the standardized rate.</p> <p><i>On a case-by-case basis, County shall pay for recovery housing with an expectation that Client copays will increase over time while County costs will decrease.</i></p>	\$32.25 per one (1) day per (1) woman [no extra charge for infants/children]	\$38.00 per one (1) day per (1) woman [no extra charge for infants/children]	\$38.00 per one (1) day per (1) woman [no extra charge for infants/children]

**Rates may be updated annually upon written approval, to include electronic communication, from County's Contract Administrator or designee. Recovery Housing rates are dependent upon Contractor's lease agreement which is reviewed annually. Once Contractor has completed their annual lease review, Contractor will provide County with updated recovery housing rates annually.*

Shamanic Living Center dba Recovery in Action
Exhibit D
California Levine Act Statement

California Government Code section 84308, commonly referred to as the "Levine Act," prohibits any officer of El Dorado County from participating in any action related to a contract if he or she accepts, solicits, or directs any political contributions totaling more than five hundred dollars (\$500) within the previous twelve (12) months, and for twelve (12) months following the date a final decision concerning the contract has been made, from the person or company awarded the contract. The Levine Act also requires disclosure of such contribution by a party to be awarded a specific contract. An officer of El Dorado County includes the Board of Supervisors, any elected official, and the chief administrative officer (collectively "Officer"). It is the Contractor's responsibility to confirm the appropriate "Officer" and name the individual(s) in their disclosure.

Have you or your company, or any agent on behalf of you or your company, made any political contribution(s), or been solicited to make a contribution by an Officer or had an Officer direct you to make a contribution of more than \$500 to an Officer of the County of El Dorado in the twelve months preceding the date of the submission of your proposals or the anticipated date of any Officer action related to this contract?

YES NO

If yes, please identify the person(s) by name:

N/A

If no, please type N/A.

Do you or your company, or any agency on behalf of you or your company, anticipate or plan to make any political contribution(s) of more than \$500 to an Officer of the County of El Dorado in the twelve months following any Officer action related to this contract?

YES NO

If yes, please identify the person(s) by name:

N/A

If no, please type N/A.

Answering YES to either of the two questions above does not preclude the County of El Dorado from awarding a contract to your firm or any taking any subsequent action related to the contract. It does, however, preclude the identified Officer(s) from participating in any actions related to this contract.

03/29/2026

Date

Recovery in Action

Type or write name of company

Michael Shepard
Michael Shepard (Mar 29, 2026 20:05:26 PDT)

Signature of authorized individual

Michael Shepard

Type or write name of authorized individual