

CONTRACT AMENDMENT ROUTING SHEET

Date Prepared: 11/05/2024

Need Date: 11/19/2024

PROCESSING DEPARTMENT:

Department: Health and Human Services Agency
Dept. Contact: Kristy Fackrell
Phone: x6919
Department Head Signature: Alisha Bryden
Digitally signed by Alisha Bryden
Date: 2024.09.26 15:31:42 -07'00'
Alisha Bryden
Administrative Analyst Supervisor

CONTRACTOR:

Name: Netsmart Technologies, Inc.
Address: 111000 Nall Avenue
Overland Park, Kansas 66211
Phone: (913) 272-2269
Org Code: 5310150- BH Mental Health MHSA
Project String (if applicable): 53MHSACFTN-5368100EHR-50100-WS, 53TRADADMIN-5311100ADM-50100-WS, 53MHSAWET

CONTRACTING DEPARTMENT: HNSA

Service Requested: Legal Review

Description: Amending Table of Contents, increase quantity of Additional User licenses and add carePOV Clinician to Expenditures. Add Implementation Fees. Increase Maximum Obligation by \$268,617.42 for a total of \$1,945,076.27

Contract Term: 6/1/2024-5/31/2029 Contract Value: \$1,945,076.27

COUNTY COUNSEL: (must approve all contracts and MOU's)

Approved: Disapproved: Date: 11/21/2024 By: Nicole Wright
Digitally signed by Nicole Wright
Date: 2024.11.21 14:47:24 -08'00'
Approved: Disapproved: Date: _____ By: _____

with edits as noted.

COUNSEL -- PLEASE FORWARD TO HR AND RISK MANAGEMENT -- THANKS!

HR APPROVAL:

Compliance with Human Resources requirements? Yes: No:
Compliance verified by: Sera Salmalyan
Digitally signed by Sera Salmalyan
Date: 2024.11.22 14:50:47 -08'00'

RISK MANAGEMENT APPROVAL: (all contracts & MOU's except boilerplate grant funding contracts)

Approved: Disapproved: Date: 11/22/2024 By: Amanda Magnuson
Digitally signed by Amanda Magnuson
Date: 2024.11.22 14:43:20 -08'00'
Approved: Disapproved: Date: _____ By: _____

Approved however their COI needs additional insured to be added please ask for this information.

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).

Departments:
Approved: Disapproved: Date: _____ By: _____
Approved: Disapproved: Date: _____ By: _____

PLEASE EMAIL SIGNED DOCUMENT TO: