

AGREEMENT FOR SERVICES #7906
AMENDMENT I

This First Amendment to that Agreement for Services #7906, 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 Granite Wellness Centers, a California Domestic Non-Profit Corporation, duly qualified to conduct business in the State of California, whose principal place of business is 406 Sunrise Avenue, Suite 105, Floor 1, Roseville, California 95661 (*Mailing: Post Office Box 6028, Auburn, CA 95604*), (hereinafter referred to as "Contractor");

RECITALS

WHEREAS, Contractor has been engaged by County to provide or arrange for the provision of certain mandated services, including substance use disorder (SUD) services, for Medi-Cal beneficiaries served by the County, pursuant to Agreement for Services #7906, dated August 15, 2023, incorporated herein and made by reference a part hereof (hereinafter referred to as "Agreement");

WHEREAS, the parties hereto desire to amend the Agreement to update billing rates, amending **ARTICLE 2, GENERAL PROVISIONS, 3. COMPENSATION FOR SERVICES, A. Rates**, and replacing **Exhibit B**, marked "Provider Rate Table" with **Amended Exhibit B**, marked "Amended Provider Rates," incorporated herein and made by reference a part hereof.

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 First Amendment to Agreement #7906 on the following terms and conditions:

- 1) **ARTICLE 2, GENERAL PROVISIONS, 3. COMPENSATION FOR SERVICES, A. Rates**, of the Agreement is amended in its entirety to read as follows:

ARTICLE 2, GENERAL PROVISIONS

3. COMPENSATION FOR SERVICES

A. Rates:

For the purposes hereof, for the period beginning August 15, 2023, and continuing until the day before the effective date of this First Amendment to the Agreement, the billing rates shall be in accordance with Exhibit B, marked "Provider Rates," incorporated herein and made by reference a part hereof.


For the period beginning with the effective date of this First Amendment and continuing through the remaining term of the Agreement, the billing rates shall be in accordance with Amended Exhibit B, marked "Amended Provider Rates," incorporated herein and made by reference a part hereof.

- 2) For the purposes of updating contracted services provisions, for the period beginning with the effective date of this First Amendment and continuing through the remaining term of the

Agreement, **Exhibit B**, is hereby replaced in its entirety with **Amended Exhibit B**, marked “Amended Provider Rates.”

Except as herein amended, all other parts and sections of that Agreement #7906 shall remain unchanged and in full force and effect.

Requesting Contract Administrator Concurrence:

By: 
By: [Salina Drennan \(Nov 7, 2023 10:29 PST\)](#)
Salina Drennan
Program Manager, Substance Use Disorder Services
Health and Human Services Agency

Dated: 11/07/2023

Requesting Department Head Concurrence:

By: *Olivia Byron-Cooper*
By: [Olivia Byron-Cooper \(Nov 7, 2023 13:02 PST\)](#)
Olivia Byron-Cooper, MPH
Director
Health and Human Services Agency

Dated: 11/07/2023

IN WITNESS WHEREOF, the parties hereto have executed this First Amendment to Agreement for Services #7906 on the dates indicated below.

-- COUNTY OF EL DORADO --

By: *Olivia Byron-Cooper*
Olivia Byron-Cooper (Nov 7, 2023 13:02 PST)
Olivia Byron-Cooper, MPH
Director
"County"

Dated: 11/07/2023

-- GRANITE WELLNESS CENTERS --

By: *Victoria Blacksmith*
Victoria Blacksmith (Nov 7, 2023 12:37 PST)
Victoria Blacksmith
Chief Executive Officer
"Contractor"

Dated: 11/07/2023

**Granite Wellness Centers
Amended Exhibit B
Amended Provider Rates**

OUTPATIENT (ODF) AND INTENSIVE OUTPATIENT (IOT)			
Description	Unit (Minutes)	Practitioner	Rate
Care Coordination - ODF	15	LPHA	\$ 61.79
		AOD	\$ 60.60
Individual Counseling - ODF	15	LPHA	\$ 61.79
		AOD	\$ 60.60
Group Counseling - ODF	15	LPHA	\$ 13.73
		AOD	\$ 13.47
Patient Education – ODF (Individual)	15	LPHA	\$ 61.79
		AOD	\$ 60.60
Patient Education – ODF (Group)	15	LPHA	\$ 13.73
		AOD	\$ 13.47
IOT Group Counseling	15	LPHA	\$ 13.73
		AOD	\$ 13.47
IOT Individual Counseling	15	LPHA	\$ 61.79
		AOD	\$ 60.60
IOT Care Coordination	15	LPHA	\$ 61.79
		AOD	\$ 60.60
IOT Patient Education (Individual)	15	LPHA	\$ 61.79
		AOD	\$ 60.60
IOT Patient Education (Group)	15	LPHA	\$ 13.73
		AOD	\$ 13.47
Assessment*	5-14	LPHA	\$ 57.68
		AOD	\$ 56.56
Assessment*	15-30	LPHA	\$ 123.58
		AOD	\$ 121.20
Assessment*	30+	LPHA	\$ 247.16
		AOD	\$ 242.40
Crisis Intervention	15	LPHA	\$ 61.79
		AOD	\$ 60.60
Discharge Services	15	LPHA	\$ 61.79
		AOD	\$ 60.60

RECOVERY SERVICES (OUTPATIENT AND INTENSIVE OUTPATIENT)			
Assessment (Recovery Services)	15	LPHA	\$ 61.79
		AOD	\$ 60.60
Individual Counseling (Recovery Services)	15	LPHA	\$ 61.79
		AOD	\$ 60.60
Group Counseling (Recovery Services)	15	LPHA	\$ 13.73
		AOD	\$ 13.47
Patient Education (Recovery Services) - Individual	15	LPHA	\$ 61.79
		AOD	\$ 60.60
Patient Education (Recovery Services) - Group	15	LPHA	\$ 13.73
		AOD	\$ 13.47
ADD-ON CODE			
Interpretation Services (Sign Language, etc)	15	LPHA	\$ 61.79
		AOD	\$ 60.60
RESIDENTIAL			
Description	Units (Daily)	Practitioner	Rate
SUDS Residential 3.1	1	Residential	\$163.00
SUDS Residential 3.1 Perinatal	1	Residential	\$163.00
SUDS Residential 3.2 Withdrawal Management	1	Residential	\$227.00
SUDS Residential 3.5	1	Residential	\$203.00
SUDS Residential 3.5 Perinatal	1	Residential	\$203.00
	Units (Minutes)		
Care Coordination - ODS 3.1 Res	15	LPHA	\$61.79
		AOD	\$60.60
		PA	\$93.90
		RN	85.05
		NP	\$104.12
		LIC PHY	\$209.38
Care Coordination - ODS 3.2 WM	15	LPHA	\$61.79
		AOD	\$60.60
		PA	\$93.90
		RN	85.05
		NP	\$104.12
		LIC PHY	\$209.38
Care Coordination - ODS 3.5 Res	15	LPHA	\$61.79
		AOD	\$60.60

		PA	\$93.90
		RN	85.05
		NP	\$104.12
		LIC PHY	\$209.38

Room and Board	
Description	Daily Rate
Residential Treatment Room and Board	\$36.00
Recovery Residences Room and Board	\$32.50

Provider shall observe and comply with all lockout and non-reimbursable service rules, as outlined in the Drug Medi-Cal Billing Manual.












Agreement #7906 A1

Final Audit Report

2023-11-07

Created:	2023-11-07
By:	Kiera Garcia (Kiera.Garcia@edcgov.us)
Status:	Signed
Transaction ID:	CBJCHBCAABAArNv1FUVEDycGj7RSXD59-7WnFrva7e3f


"Agreement #7906 A1" History

-  Document created by Kiera Garcia (Kiera.Garcia@edcgov.us)
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-  Document emailed to Salina Drennan (salina.drennan@edcgov.us) for signature
2023-11-07 - 6:00:08 PM GMT
-  Email viewed by Salina Drennan (salina.drennan@edcgov.us)
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-  Document e-signed by Salina Drennan (salina.drennan@edcgov.us)
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-  Document emailed to krhames@granitewellness.org for approval
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-  Signer krhames@granitewellness.org entered name at signing as Victoria Blacksmith
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-  Signer vblacksmith@granitewellness.org entered name at signing as Victoria Blacksmith
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 Document e-signed by Victoria Blacksmith (vblacksmith@granitewellness.org)


Signature Date: 2023-11-07 - 8:37:34 PM GMT - Time Source: server

 Document emailed to olivia.byron-cooper@edcgov.us for signature


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 Email viewed by olivia.byron-cooper@edcgov.us


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 Signer olivia.byron-cooper@edcgov.us entered name at signing as Olivia Byron-Cooper

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 Document e-signed by Olivia Byron-Cooper (olivia.byron-cooper@edcgov.us)

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 Agreement completed.

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