

Amendment No. 2 to the Agreement between County of Lake and Crestwood Behavioral Health for Adult Residential Support Services and Specialty Mental Health Services for Fiscal Year 2018-19

This Amendment No.2 to Agreement is made and entered into this 15th day of January, 2019 by and between the County of Lake, a political subdivision of the State of California (hereinafter referred to as "County") and Crestwood Behavioral Health, (hereinafter referred to as "Contractor").

RECITALS

WHEREAS, the parties have entered into an Agreement dated July 1, 2018 under which Contractor will provide adult residential support services and specialty mental health services to County; and

WHEREAS, due to increased utilization, the parties amended the Agreement on or about January 15, 2019 to increase the total compensation payable under the Agreement; and

WHEREAS, in order to meet the financial obligation for services through the end of the Fiscal Year 2018-19 the parties now desire to increase the Agreement a second time in the amount of \$170,000 for a new contract amount of \$1,220,000.

NOW, THEREFORE, the parties hereby agree as follows:

Section 3 – COMPENSATION is hereby amended to read:

"COMPENSATION. Contractor has been selected by County to provide the services described hereunder in **Exhibit A**, titled, **"Scope of Services"**. **Compensation to Contractor shall not exceed One Million Two Hundred Twenty Thousand Dollars (\$1,220,000).**

The County shall compensate Contractor for services rendered, in accordance with the provisions set forth in **Exhibit B**, titled **"Fiscal Provisions"** attached hereto and incorporated herein, provided that Contractor is not in default under any provisions of this Agreement."

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The Parties agree that all other terms and conditions of the original Agreement shall remain in full force and effect.

COUNTY OF LAKE

By: _____
Chair, Board of Supervisors

Date: _____

ATTEST:
CAROL J. HUCHINGSON
Clerk to the Board of Supervisors

By: _____
Date: _____

**CRESTWOOD BEHAVIORAL
HEALTH**

By: _____
Gary Zeyen, Owner *DIRECTOR OF*

Date: *5/28/19 COUNTY CONTRACT*

APPROVED AS TO FORM:
ANITA L. GRANT
County Counsel

By: _____
Date: *5-17-19*