

RESOLUTION NO. 2016- 3

A RESOLUTION BY THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA, APPROVING THE TERMS, PROVISIONS, CONDITIONS, AND REQUIREMENTS OF AMENDMENT 1 TO THE SERVICES AGREEMENT BETWEEN ST. JOHNS COUNTY AND COMMUNITY BASED CARE INTEGRATED HEALTH, LLC (CBCIH) AND AUTHORIZING THE COUNTY ADMINSTRATOR TO EXECUTE THE AGREEMENTS ON BEHALF OF THE COUNTY AND RECOGNIZING UNANTICIPATED REVENUE IN THE COMMUNITY BASED CARE FUND IN THE AMOUNT OF \$6,000 AND APPROPRIATING TO CBC ADMINISTRATION.

WHEREAS, CBCIH and St. Johns County entered into an agreement for services in connection with the Florida Managed Medical Assistance Program on November 17, 2014; and

WHEREAS, CBCIH and the County wish to amend the agreement to increase CBCIH's compensation to the County from five thousand, five hundred dollars (\$5,500) per month to six thousand (\$6,000) per month for services rendered in accordance with the agreement, effective July 1, 2015; and

WHEREAS, the County has reviewed the terms, provisions, conditions, and requirements of the amendment; and

WHEREAS, the County has determined that amending the agreement will serve the interests of the County.

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA:

Section 1. The above recitals are incorporated into the body of this resolution, and are adopted as findings of fact.

Section 2. The Board of County Commissioners approves the terms, provisions, conditions, and requirements of Amendment 1 between the St. Johns County and Community Based Care Integrated Health, LLC, and authorizes the County Administrator, or his designee, to execute an agreement substantially in the same form as the attached amendment on behalf of the County and recognizing unanticipated revenue in the Community Based Care Fund in the amount of \$6,000 and appropriate to CBC Administration.

Section 3. To the extent that there are typographical or administrative errors or omissions that do not change the tone, tenor, or context of this Resolution, then this Resolution may be revised, without subsequent approval of the Board of County Commissioners.

PASSED AND ADOPTED by the Board of County Commissioners of St. Johns County, Florida, this 19 day of January, 2016.

BOARD OF COUNTY COMMISSIONERS OF
ST. JOHNS COUNTY, FLORIDA

Attest: Hunter S. Conrad, Clerk

Hunter S. Conrad
Deputy Clerk

By:

Jeb S. Smith
Jeb S. Smith, Chair

REVISION DATE 1/21/16

**AMENDMENT TO FLORIDA MANAGED MEDICAL ASSISTANCE PROGRAM
SERVICES AGREEMENT
COMMUNITY BASED CARE INTEGRATED HEALTH, LLC
AMENDMENT #001**

THIS AMENDMENT, entered into between Community Based Care Integrated Health, LLC. hereinafter referred to as "CBCIH" and **St. Johns County** hereinafter referred to as the "CBC", amends said Service Agreement entered into on July 1, 2015.

The parties agree to amend the Agreement by the following additions (indicated by underline) and deletions (indicated by strikethroughs):

1. The Florida Managed Medical Assistance Program Services Agreement, Section 3B, Compensation, page 3, is hereby amended to read:

B. Ongoing Services Commencing January 1, 2015:: CBCIH shall pay five-thousand, five hundred dollars (\$5,500) per month for services rendered in accordance with this agreement.

July 1, 2015 Ongoing:

CBCIH shall pay six-thousand dollars (\$6,000) per month for services rendered in accordance with this agreement.

This amendment shall take effect July 1st, 2015.

All provisions in the operating agreement and any attachments thereto in conflict with this amendment shall be and are hereby changed to conform with this amendment.

All provisions not in conflict with this amendment are still in effect and are to be performed at the level specified in the Service Agreement.

This amendment and all its attachments are hereby made a part of the Service Agreement.

IN WITNESS THEREOF, the Parties hereto have caused this amendment to be executed by their officials their respective officers thereunto duly authorized.

**CBC:
ST. JOHNS COUNTY**

**CBCIH:
COMMUNITY BASED CARE
INTEGRATED HEALTH, LLC.**

Signature

Signature

Michael Wanchick

Len Hartman

Name

Name

County Administrator

CFO

Title

Title

Date

Date