

AMENDMENT NO. 1

**RESOLUTION TO GRANT FUNDS TO
WELL CARE SERVICES BEHAVIORAL AND MEDICAL CLINIC
FOR NON-CONGREGATE SHELTER SERVICES**

This AGREEMENT formed by acceptance of this Resolution, is made and entered into this _____ day, of _____ 2021, by and between CLARK COUNTY, NEVADA (hereinafter referred to as "County"), and Well Care Services Behavioral and Medical Clinic (hereinafter referred to as "Provider") for the use of funds for non-congregate shelter services collectively hereinafter referred to as project.

WITNESSETH:

WHEREAS, the parties entered into an agreement entitled "RESOLUTION TO GRANT FUNDS TO WELL CARE SERVICES BEHAVIORAL AND MEDICAL CLINIC FOR NON-CONGREGATE SHELTER SERVICES" dated January 13, 2021.

NOW, THEREFORE, the parties agree to amend the RESOLUTION as follows:

1. I. Scope of Services, Page 2.

CURRENTLY READS:

- A. The County will provide forty two thousand dollars (**\$42,000**) per month for 14 beds, not to exceed **\$252,000**, to Provider to provide financial assistance for the emergency non-congregate shelter project, during the period from January 1, 2021, through June 30, 2021, as outlined in Exhibit "A", "Expenditures Eligible for Reimbursement".

SHALL NOW READ:

- A. The County will provide forty-two thousand dollars (**\$42,000**) per month for 14 beds through August 31, 2021 not to exceed **\$336,000**. After August 31, 2021 the County will provide fifty-seven thousand dollars (**\$57,000**) per month for 19 beds and \$100 per bed per day for each additional bed used after 19, for no more than 36 total beds not to exceed **\$972,000**, to Provider to provide financial assistance for the emergency non-congregate shelter project, during the period from January 1, 2021, through February 28, 2021, as outlined in Exhibit "A", "Expenditures Eligible for Reimbursement".

2. EXHIBIT A – ELIGIBLE EXPENDITURES BY WELLCARE SERVICES BEHAVIORAL AND MEDICAL CLINIC FOR NON-CONGREGATE SHELTER SERVICES

CURRENTLY READS:

The following items may be paid with Non-Congregate Shelter Funds, for **\$42,000** per month for 14 beds not to exceed **\$252,000**:

- Secure isolated rooms

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- 24-hour nursing services
- History and physical assessment
- Medical assessment
- Medication management
- Clinical services
- Case management
- Minimum 3 meals a day
- Transportation
- Psychiatric assessment and follow-up as needed or requested
- Social assessment and follow-up as needed or requested
- Referrals to other appropriate providers to meet specific needs

Other essential services and approved items SHALL NOW READ:

The following items may be paid with Non-Congregate Shelter Funds, **\$57,000** a month for up to 36 beds, not to exceed **\$972,000**:

- Secure isolated rooms
- 24-hour nursing services
- History and physical assessment
- Medical assessment
- Medication management
- Clinical services
- Case management
- Minimum 3 meals a day
- Transportation
- Psychiatric assessment and follow-up as needed or requested
- Social assessment and follow-up as needed or requested
- Referrals to other appropriate providers to meet specific needs
- Other essential services and approved items

After 19 beds, WellCare will be reimbursed \$100 per bed per day up to 36 beds as they are used.

3. EXHIBIT B –WELLCARE SERVICES BEHAVIORAL AND MEDICAL CLINIC for NON- CONGREGATE SHELTER SERVICES, Section 10. Compensation

CURRENTLY READS:

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1. COUNTY agrees to pay PROVIDER for performance of services described in this Scope of Work not to exceed the amount of **\$252,000**. The COUNTY's obligation to pay PROVIDER cannot exceed this amount. It shall be the PROVIDER's responsibility to ensure the hours and tasks are properly budgeted. PROVIDER shall submit to COUNTY a monthly invoice and summary of services in a format provided by the COUNTY.

SHALL NOW READ:

1. COUNTY agrees to pay PROVIDER for performance of services described in this Scope of Work not to exceed the amount of **\$972,000**. The COUNTY's obligation to pay PROVIDER cannot exceed this amount. It shall be the PROVIDER's responsibility to ensure the hours and tasks are properly budgeted. PROVIDER shall submit to COUNTY a monthly invoice and summary of services in a format provided by the COUNTY.
4. EXHIBIT B –WELLCARE BEHAVIORAL AND MEDICAL CLINIC FOR NON-CONGREGATE SHELTER SERVICES, Section 11. Budget,

CURRENTLY READS:

The table below reflects a budget that corresponds to the six-month scope of work:

Budget – Non-Congregate Shelter and Housing Services	
Program Costs -\$42,000 per month (for 14 beds) up to 6 months	\$252,000
Total Annual Not-to-Exceed Amount	\$252,000

The Assistant Director of Social Service may authorize line item budget amendments not to exceed 10% of the annual contract award in writing.

SHALL NOW READ:

The table below reflects a budget that corresponds to the twelve-month scope of work:

Budget – Non-Congregate Shelter and Housing Services	
Program Costs -\$42,000 per month (for 14 beds) up to 8 months (until 8/31/2021)	\$336,000
Program Costs at a daily bed rate of \$100 per bed per day up to 36 total beds for an additional 6 months (19 beds at \$57,000/ month additional beds charged \$100/bed/day up to 36 beds)	\$636,000
Total Annual Not-to-Exceed Amount	\$972,000

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The Assistant Director of Social Service may authorize line item budget amendments not to exceed 10% of the annual contract award in writing.

This Amendment No. 1 represents an increase of \$720,000 for a new RESOLUTION total of \$972,000.

Except as expressly amended herein, the terms and conditions of the RESOLUTION shall remain in full force and effect.

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COUNTY:

COUNTY OF CLARK, NEVADA

By: _____

Marilyn Kirkpatrick
Chair

PROVIDER:

Well Care Services Behavioral and
Medical Clinic

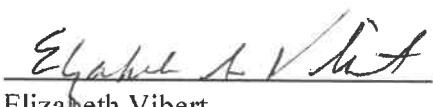
By: _____

Marcelino Casal
Practice Manager

APPROVED AS TO FORM:

STEVEN B. WOLFSON, District Attorney

By: _____


Elizabeth Vibert
Deputy District Attorney