

**First ADDENDUM TO CONTRACT FOR SERVICES  
BY INDEPENDENT CONTRACTOR**

THIS First ADDENDUM is to that Contract for Services entered into on September 3, 2019 between the County of Siskiyou ("County") and Victor Treatment Centers, Inc. ("Contractor") and is entered into this \_\_\_ day of \_\_\_\_\_, 2020.

WHEREAS, the cost of services to be provided under this rate contract is expected to remain as provided in the Contract; and

WHEREAS, Section II - Compensation, paragraph A, Exhibit A, needs to be revised to reflect the provided FY 20/21 rates.

NOW THEREFORE, THE PARTIES MUTUALLY AGREE AS FOLLOWS:

Section II, of the Contract, Compensation, paragraph A, Exhibit "A", shall be deleted and replaced in its entirety with the new Exhibit "A" Section II, Compensation, paragraph A, attached hereto and hereby incorporated by reference.

All other terms and conditions of the Contract shall remain in full force and effect.

IN WITNESS WHEREOF, County and Contractor have executed this First addendum on the dates set forth below, each signatory represents that he/she has the authority to execute this agreement and to bind the Party on whose behalf his/her execution is made.

COUNTY OF SISKIYOU

Date: \_\_\_\_\_

\_\_\_\_\_  
MICHAEL N. KOBSEFF, CHAIR  
Board of Supervisors  
County of Siskiyou  
State of California

ATTEST:  
LAURA BYNUM  
Clerk, Board of Supervisors

By: \_\_\_\_\_  
Deputy

CONTRACTOR: Victor Treatment Centers, Inc.

Date: 11/2/20

\_\_\_\_\_  
*Simona Cataldo*  
Simona Cataldo, CEO

Date: 11/2/20

\_\_\_\_\_  
*Edward Hackett*  
Edward Hackett, CFO

License No.: 00118

(Licensed in accordance with an act providing for the registration of contractors)

Note to Contractor: For corporations, the contract must be signed by two officers. The first signature must be that of the chairman of the board, president or vice-president; the second signature must be that of the secretary, assistant secretary, chief financial officer or assistant treasurer. (Civ. Code, Sec. 1189 & 1190 and Corps. Code, Sec. 313.)

TAXPAYER I.D. 94-2264395

ACCOUNTING:

Fund	Organization	Account	Activity Code (if applicable)
2122	401030	740100	
2129	401031	740000	163A

Encumbrance number E2000268

FY 19/20	\$0.01 (Rate)
FY 20/21	\$0.01 (Rate)
FY 21/22	\$0.01 (Rate)

*If needed for multi-year contracts, please include separate sheet with financial information for each fiscal year.*

## Exhibit A

### II. Compensation

- A. County shall pay Contractor for services provided at the following rates applicable for Fiscal Year 2020/2021:

Assessment	\$2.91 per minute
Plan Development	\$2.91 per minute
Case Management	\$2.35 per minute
Intensive Care Coordination	\$2.35 per minute
Intensive Home Based Services	\$2.91 per minute
Individual Therapy	\$2.91 per minute
Family Therapy	\$2.91 per minute
Group Therapy	\$2.91 per minute
Collateral	\$2.91 per minute
Individual Rehabilitation	\$2.91 per minute
Group Rehabilitation	\$2.91 per minute
Therapeutic Behavioral Services	\$2.91 per minute
Medication Support Services	\$5.37 per minute
Crisis Intervention Services	\$4.07 per minute
Room & Board	<i>State STRTP Rate – see below</i>

Contractor agrees to pro-rate the monthly Room and Board rate. County agrees to pay the current Short Term Residential Therapeutic Programs (STRTP) rate which is regulated by the Department of Social Services. The rates are updated each fiscal year and can be found in the All County Letters on their website at: <http://www.cdss.ca.gov/inforesources/Letters-Regulations/Letters-and-Notices/All-County-Letters>

Contractor shall provide an invoice that includes a description of the services provided each month, including number of patients served, hours, and types of service provided along with progress notes for each client served

