

**FOURTH AMENDMENT**  
**(BOS Agreement No. \_\_\_\_ - \_\_\_\_)**

This Fourth Amendment to Agreement No. 17-263 (“Fourth Amendment”) is made and entered into as of the last date signed below, by and between the County of Yolo, a political subdivision of the State of California (“County”), and CommuniCare Health Centers, Inc., a non-profit corporation authorized to do business in the State of California (“Contractor”), jointly referred to as the “Parties” herein.

**WHEREAS**, on or about October 24, 2017, the Parties entered into Agreement No. 17-263 (Agreement); and

**WHEREAS**, on or about July 21, 2020, the Parties amended the Agreement via the First Amendment; and

**WHEREAS**, on or about April 21, 2021, the County exercised its option to extend the Agreement under the same terms and conditions via Option Letter #1; and

**WHEREAS**, on or about August 31, 2021, the Parties further amended the Agreement via the Second Amendment; and

**WHEREAS**, on or about April 1, 2022 the then acting Yolo County Procurement Manager determined it was in the best interest of the County to extend the contract award from the April 2017 RFP based on satisfactory service and reasonable prices and to avoid the interruption of County business and approved a sole source letter to document this extension; and

**WHEREAS**, on or about April 12, 2022, the Parties further amended the Agreement via the Third Amendment; and

**WHEREAS**, the parties would now like to amend the Agreement, as previously amended to:

1. Revise **Paragraph I.A.** to extend the term of the Agreement through December 31, 2023; and
2. Revise **Paragraph III.B.** to add funding in the amount of \$239,325 for Fiscal Year (FY) 2023-24 for a new contract maximum of \$1,983,204.06; and
3. Revise **Section XVI.** of **Exhibit D** to rename the section and update new County insurance requirements; and
4. Revise **Paragraph XVIII.A.** of **Exhibit D** to update contact information; and
5. Revise **Exhibit E** to add the budget for FY 2023-24.

**NOW, THEREFORE, IT IS HEREBY AGREED AS FOLLOWS:**

**1. Paragraph I.A.** to the Agreement is hereby amended to read as follows:

**A.** The term of this Agreement shall be from **October 1, 2017 through December 31, 2023** unless sooner terminated as provided in this Agreement.

**2. Paragraph III.B.** of the Agreement is hereby amended to read as follows:

**B.** Any other provision of this Agreement notwithstanding, the maximum payment obligation to Contractor through **December 31, 2023** shall be no greater than **ONE MILLION NINE EIGHTY-THREE THOUSAND TWO HUNDRED FOUR DOLLARS AND SIX CENTS (\$1,983,204.06)** specified as follows:

	A.1. IBHS for Latino Community & Families	A.2: SMART-Y Program (for the period October 1, 2017 through January 31, 2018)
<b>Fiscal Year 2017-18</b> October 1, 2017 through June 30, 2018	\$166,875.00	\$19,883.00
<b>Fiscal Year 2018-19</b> July 1, 2018 through June 30, 2019	\$222,500.00	
<b>Fiscal Year 2019-20</b> July 1, 2019 through June 30, 2020	\$222,500.00	
<b>Fiscal Year 2020-21</b> July 1, 2020 through June 30, 2021	\$258,798.08	
<b>Fiscal Year 2021-22</b> July 1, 2021 through June 30, 2022	\$402,161.98	
<b>Fiscal Year 2022-23</b> July 1, 2022 through June 30, 2023	\$451,161.00	
<b>Fiscal Year 2023-24</b> July 1, 2023 through December 31, 2023	\$239,325.00	
<b>Sub-Total</b>	<b>\$1,963,321.06</b>	<b>\$19,883.00</b>
<b>Total</b>	<b>\$1,983,204.06</b>	

3. Section XVI. of Exhibit D to the Agreement is hereby amended to read as follows:

**XVI. INSURANCE**

- A. During the term of this Agreement, Contractor shall at all times maintain, at its expense, the following coverages and requirements:
  - 1. Minimum Scope of Insurance – Coverage shall be at least as broad as the latest version of the following:
    - a. Commercial General Liability: Insurance Services Office form CG 000. The policy shall not contain any exclusions contrary to the Agreement, including but not limited to endorsements or provisions limiting coverage for 1) Contractual liability such as ISO CG 24 26 or 21 29; or 2) cross liability or suits by one insured against another.
    - b. Automobile Liability: Insurance Services Office form CA 00 01, code 1- Any Auto or including Hired and Non-Owned vehicles.
    - c. Workers’ Compensation and Employers’ Liability: Workers’ Compensation insurance as required by the State of California and Employers’ Liability.
    - d. Professional Liability (Errors and Omissions) (If applicable, see below)
  - 2. Minimum Limits (as applicable) - Insurance coverage shall be with limits not less than the following:
    - a. Commercial General Liability – \$2,000,000/occurrence and \$4,000,000 annual aggregate or an aggregate of \$2,000,000 that applies separately to this project (ISO CG 25 03 or 25 04).

- b. Automobile Liability – \$1,000,000 per accident for bodily injury and property damage
- c. Professional Liability/Malpractice/Errors and Omissions –\$2,000,000 per occurrence and annual aggregate (If any engineer, architect, attorney, accountant, medical professional, psychologist, or other licensed professional performs work under a contract, or other professional contractors, such as computer and software designers the contractor must provide this insurance. If not, then this requirement automatically does not apply.)
- d. Workers’ Compensation – Statutory Limits/Employers’ Liability - \$1,000,000/accident for bodily injury or disease (If no employees, this requirement automatically does not apply.)

It shall be a requirement under this agreement that any available insurance proceeds broader than or in excess of the specified minimum Insurance coverage requirements and/or limits shall be available to the Additional Insured. Furthermore, the requirements for coverage and limits shall be (1) the minimum coverage and limits specified in this Agreement; or (2) the broader coverage and maximum limits of coverage of any Insurance policy or proceeds available to the named Insured; whichever is greater.

**3. Other Insurance Provisions**

- a. **Additional Insured Status** - The County, its officers, agents, employees and volunteers shall be named as additional insured on the CGL policy with respect to liability arising out of work or operations performed by or in behalf of the Contractor including, materials, parts, or equipment furnished in connection with such work or operations. Coverage can be provided in the form or an endorsement to the Contractor’s insurance (at least as broad as CG 20 10 11 85 or if not available, through the addition of both CG 20 37 and one of the following: CG 20 10, CG 20 26, or CG 20 33). [NOTE: Evidence of additional insured is needed as a separate endorsement or comparable policy language due to wording on the certificate negating any additional coverage listed writing in the description box.]
  - b. **Primary Coverage** - The Contractor’s policy shall be “primary and non-contributory” and will not seek contribution from the County’s insurance or self-insurance and shall be at least as broad as CG 20 01 04 13.
  - c. **Notice of Cancellation** – Each insurance policy required above shall provide that coverage shall not be cancelled, except with notice to the County.
  - d. **Waiver of Subrogation** – Contractor hereby grants to the County a waiver of any right to subrogation which any insurer of said Contractors may acquire against the County by virtue of the payment or any loss under such insurance. Contractor agrees to obtain any endorsement that may be necessary to affect this waiver of subrogation, but this provision applies regardless of whether or not the County has received a waiver of subrogation endorsement from the insurer.
4. The limits of Insurance required in this Agreement may be satisfied by a combination of primary and umbrella or excess Insurance. Any umbrella or excess Insurance shall contain or be endorsed to contain a provision that such coverage shall also apply on a primary and noncontributory basis for the benefit of the County of Yolo (if agreed to in a written contract or agreement) before the County’s own Insurance or self-insurance shall be called upon to protect it as a named insured.
5. Said policies shall remain in force through the life of this Agreement and, with the exception of professional liability coverage, shall be payable on a “per occurrence” basis unless the County Risk Manager specifically consents in writing to a “claims made” basis.

For all “claims made” coverage, in the event that the Contractor changes insurance carriers Contractor shall purchase “tail” coverage covering the term of this Agreement and not less than three years thereafter. Proof of such “tail” coverage shall be required at any time that the Contractor changes to a new carrier prior to receipt of any payments due.

6. The Contractor shall declare all aggregate limits on the coverage before commencing performance of this Agreement, and the County’s Risk Manager reserves the right to require higher aggregate limits to ensure that the coverage limits required for this Agreement as set forth above are available throughout the performance of this Agreement.
  7. Any deductibles or self-insured retentions must be declared to and are subject to the approval of the County Risk Manager. All self-insured retentions (SIR) must be disclosed to Risk Management for approval and shall not reduce the limits of liability. Policies containing any SIR provision shall provide or be endorsed to provide that the SIR may be satisfied either by the named Insured or Yolo County.
  8. Insurance is to be placed with insurers with a current A.M. Best's rating of no less than A:VII, unless otherwise approved by the County Risk Manager.
  9. The policies shall cover all activities of Contractor, its officers, employees, agents and volunteers arising out of or in connection with this Agreement.
  10. For any claims relating to this Agreement, the Contractor's insurance coverage shall be primary, including as respects the County, its officers, agents, employees and volunteers. Any insurance maintained by the County shall apply in excess of, and not contribute with, insurance provided by Contractor's liability insurance policy.
- B.** Prior to commencing services pursuant to this Agreement, Contractor shall furnish the County with original policies or endorsements reflecting coverage required by this Agreement. The endorsements are to be signed by a person authorized by that insurer to bind coverage on its behalf. All endorsements are to be received by, and are subject to the approval of, the County Risk Manager before work commences. Upon County’s request, Contractor shall provide complete, certified copies of all required insurance policies, including endorsements reflecting the coverage required by these specifications.
- C.** During the term of this Agreement, Contractor shall furnish the County with original endorsements reflecting renewals, changes in insurance companies and any other documents reflecting the maintenance of the required coverage throughout the entire term of this Agreement. The endorsements are to be signed by a person authorized by that insurer to bind coverage on its behalf. Upon County’s request, Contractor shall provide complete, certified copies of all required insurance policies, including endorsements reflecting the coverage required by these specifications. Yolo County reserves the right to obtain a full certified copy of any Insurance policy and endorsements. Failure to exercise this right shall not constitute a waiver of right to exercise later.
- D.** Contractor agrees to include with all Subcontractors in their subcontract the same requirements and provisions of this Agreement including the indemnity and Insurance requirements to the extent they apply to the scope of the Subcontractor’s work. Subcontractors hired by Contractor agree to be bound to Contractor and the County of Yolo in the same manner and to the same extent as Contractor is bound to the County of Yolo under the
- E.** Contract Documents. Subcontractor further agrees to include these same provisions with any Sub-subcontractor. A copy of the Owner Contract Document Indemnity and Insurance provisions will be furnished to the Subcontractor upon request. The General Contractor/and or Contractor shall require all Subcontractors to provide a valid certificate of insurance and the

required endorsements included in the Agreement prior to commencement of any work and General Contractor/and or Contractor will provide proof of compliance to the County of Yolo. (Coverage can be provided in the form or an endorsement to the Contractor's insurance (at least as broad as CG 20 38 for operations and CG 20 40 for completed operations).

- F. Contractor shall maintain insurance as required by this Agreement to the fullest amount allowed by law and shall maintain insurance for a minimum of five years following the completion of this project. In the event Contractor fails to obtain or maintain completed operations coverage as required by this Agreement, the County at its sole discretion may purchase the coverage required and the cost will be paid by Contractor.

**4. Paragraph XVIII.A. of Exhibit D to the Agreement is hereby amended to read as follows:**

- A. All notices shall be deemed to have been given when made in writing and delivered or mailed to the respective representatives of County and Contractor at their respective addresses as follows:

Contractor:                      CommuniCare Health Centers, Inc.  
   P.O. Box 1260  
   Davis, CA 95617  
   Melissa Marshall, Executive Director

County:                              Yolo County Health and Human Services Agency  
   137 N. Cottonwood Street  
   Woodland, CA 95695  
   Nolan Sullivan, Director

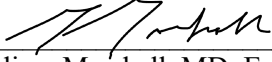
- 5. **Exhibit E** to the Agreement is hereby amended to read as attached.
- 6. All attachments to this Fourth Amendment are incorporated herein by this reference.
- 7. Except as specifically amended by this Fourth Amendment and any prior amendments, the Agreement shall remain in full force and effect according to its terms.

**Signatures Follow**

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**IN WITNESS WHEREOF** the Parties have executed this Fourth Amendment as of the day and year last set forth below.

**CONTRACTOR**

  
\_\_\_\_\_  
Melissa Marshall, MD, Executive Director  
CommuniCare Health Centers, Inc.

Date: 5/2/2023

**COUNTY OF YOLO**

\_\_\_\_\_  
Oscar E. Villegas, Chair  
Board of Supervisors

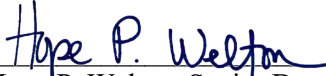
Date: \_\_\_\_\_

  
**Nolan Sullivan** Digitally signed by Nolan Sullivan  
Date: 2023.05.03 08:19:41 -07'00'  
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Nolan Sullivan, Director  
Health and Human Services Agency

Attest:  
Julie Dachtler, Senior Deputy Clerk  
Board of Supervisors

By: \_\_\_\_\_  
Deputy (Seal)

Approved as to Form:  
Philip J. Pogledich, County Counsel

By:   
\_\_\_\_\_  
Hope P. Welton, Senior Deputy

**EXHIBIT E – CONTRACT BUDGET**

<b>CommuniCare Health Centers, Inc.</b>		
<b>IBHS for Latino Community and Families</b>		
	Cost Items	Fiscal Year 2017-18 October 1, 2017 through June 30, 2018
1	a. Personnel (Salary, Benefits, and Payroll Taxes)	\$126,018
	b. Indirect/Overhead/Administration, not to exceed 15% of Personnel Costs (Item 1a)	\$21,766
2	Operating Costs	\$19,091
3	Direct to Clients	\$0
4	<b>Total</b>	<b>\$166,875</b>

<b>CommuniCare Health Centers, Inc.</b>		
<b>IBHS for Latino Community and Families</b>		
	Cost Items	Fiscal Year 2018-19 July 1, 2018 through June 30, 2019
1	a. Personnel (Salary, Benefits, and Payroll Taxes)	\$171,158
	b. Indirect/Overhead/Administration, not to exceed 15% of Personnel Costs (Item 1a)	\$29,413
2	Operating Costs	\$24,929
3	Direct to Clients	\$0
4	<b>Total</b>	<b>\$225,500</b>

<b>CommuniCare Health Centers, Inc.</b>		
<b>IBHS for Latino Community and Families</b>		
	Cost Items	Fiscal Year 2019-20 July 1, 2019 through June 30, 2020
1	a. Personnel (Salary, Benefits, and Payroll Taxes)	\$171,158
	b. Indirect/Overhead/Administration, not to exceed 15% of Personnel Costs (Item 1a)	\$29,413
2	Operating Costs	\$24,929
3	Direct to Clients	\$0
4	<b>Total</b>	<b>\$225,500</b>

**EXHIBIT E – CONTRACT BUDGET**

<b>CommuniCare Health Centers, Inc.</b>		
<b>IBHS for Latino Community and Families</b>		
	Cost Items	Fiscal Year 2020-21 July 1, 2020 through June 30, 2021
1	a. Personnel (Salary, Benefits, and Payroll Taxes)	\$195,000
	b. Indirect/Overhead/Administration, not to exceed 15% of Personnel Costs (1a)	\$29,325
2	Operating Costs	\$32,500
3	Direct to Clients	\$1,973.08
4	<b>Total</b>	<b>\$258,798.08</b>

<b>CommuniCare Health Centers, Inc.</b>		
<b>IBHS for Latino Community and Families</b>		
	Cost Items	Fiscal Year 2021-22 July 1, 2021 through June 30, 2022
1	a. Personnel (Salary, Benefits, and Payroll Taxes)	\$319,729.55
	b. Indirect/Overhead/Administration, not to exceed 15% of Personnel Costs (1a)	\$47,959.43
2	Operating Costs	\$32,500
3	Direct to Clients	\$1,973
4	<b>Total</b>	<b>\$402,161.98</b>

<b>CommuniCare Health Centers, Inc.</b>		
<b>IBHS for Latino Community and Families</b>		
	Cost Items	Fiscal Year 2022-23 July 1, 2022 through June 30, 2023
1	a. Personnel (Salary, Benefits, and Payroll Taxes)	\$358,672
	b. Indirect/Overhead/Administration, not to exceed 15% of Personnel Costs (1a)	\$53,801
2	Operating Costs	\$36,093
3	Direct to Clients	\$2,595
4	<b>Total</b>	<b>\$451,161</b>

**EXHIBIT E – CONTRACT BUDGET**

<b>CommuniCare Health Centers, Inc.</b>		
<b>IBHS for Latino Community and Families</b>		
	Cost Items	Fiscal Year 2023-24 July 1, 2023 through December 31, 2023
1	a. Personnel (Salary, Benefits, and Payroll Taxes)	\$195,039
	b. Indirect/Overhead/Administration, not to exceed 15% of Personnel Costs (1a)	\$29,255
2	Operating Costs	\$14,044
3	Direct to Clients	\$987
4	<b>Total</b>	<b>\$239,325</b>