

STATE OF CALIFORNIA - DEPARTMENT OF GENERAL SERVICES
STANDARD AGREEMENT - AMENDMENT

SCO ID: 4265-2510222-A1

STD 213A (Rev. 4/2020)

CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED _____ PAGES

AGREEMENT NUMBER 25-10222	AMENDMENT NUMBER A1	Purchasing Authority Number
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1. This Agreement is entered into between the Contracting Agency and the Contractor named below:

CONTRACTING AGENCY NAME
California Department of Public Health

CONTRACTOR NAME
Tehama County Health Services Agency

2. The term of this Agreement is:

START DATE
October 1, 2025

THROUGH END DATE
September 30, 2028

3. The maximum amount of this Agreement after this Amendment is:
 \$ 2,974,653.00
 Two Million Nine Hundred Seventy-Four Thousand Six Hundred Fifty-Three Dollars

4. The parties mutually agree to this amendment as follows. All actions noted below are by this reference made a part of the Agreement and incorporated herein:

I. This amendment shifts funds in fiscal years 1, 2 and 3 to accommodate anticipated expenses. In addition, this amendment adds one new subcontractor.

II. Exhibit B, Attachment I, Budget Detail has been replaced in its entirety.

All other terms and conditions shall remain the same.

IN WITNESS WHEREOF, THIS AGREEMENT HAS BEEN EXECUTED BY THE PARTIES HERETO.

CONTRACTOR

CONTRACTOR NAME (if other than an individual, state whether a corporation, partnership, etc.)
Tehama County Health Services Agency

CONTRACTOR BUSINESS ADDRESS 818 Main Street	CITY Red Bluff	STATE CA	ZIP 96080
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PRINTED NAME OF PERSON SIGNING Jayme Bottke	TITLE Executive Director
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CONTRACTOR AUTHORIZED SIGNATURE 	DATE SIGNED 4-15-26
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STATE OF CALIFORNIA

CONTRACTING AGENCY NAME
California Department of Public Health

CONTRACTING AGENCY ADDRESS 1616 Capitol Avenue, Suite 74.262, MS 1802, PO Box 997377	CITY Sacramento	STATE CA	ZIP 95899
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PRINTED NAME OF PERSON SIGNING Errolben "MJ" Elepano	TITLE Chief, Contracts Management Unit
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CONTRACTING AGENCY AUTHORIZED SIGNATURE	DATE SIGNED
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CALIFORNIA DEPARTMENT OF GENERAL SERVICES APPROVAL	EXEMPTION (If Applicable)
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**Exhibit B, Attachment I
Budget Detail
October 1, 2025 - September 30, 2028**

PERSONNEL	Exhibit A, SOW 8.	Exhibit A, Attach I	Minimum Base Annual Salary	Amended Minimum Base Annual Salary	Maximum Base Annual Salary	Amended Maximum Base Annual Salary	Year 1 10/1/2025 - 9/30/2026						Year 2 10/1/2026 - 9/30/2027						Year 3 10/1/2027 - 9/30/2028						Total	Total Budget Adj.	Amended Total	
							FTE	FTE Adj.	Amended FTE	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	FTE	FTE Adj.	Amended FTE	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	FTE	FTE Adj.	Amended FTE	Budgeted Amount	Budget Adj.	Amended Budgeted Amount				
Interim WIC Director	1-22	1-8	138,809		168,723		0.05	0.00	0.05	8,436	-	8,436	0.00	0.00	0.00	-	-	-	0.00	0.00	0.00	-	-	-	8,436	-	8,436	
Program Manager/ WIC Director in Training	1-22	1-8	91,229		110,885		0.65	0.00	0.65	61,078	-	61,078	0.65	0.00	0.65	65,353	-	65,353	0.60	0.00	0.60	64,549	-	64,549	190,980	-	190,980	
Registered Dietitian, Nutrition Education & Staff Training Coordinator	3, 5-10, 12, 14, 15	1-5, 7	58,490		72,474		0.85	0.00	0.85	66,728	(584)	55,144	0.85	0.00	0.85	66,666	397	59,352	0.86	0.02	0.87	64,424	848	62,322	476,462	661	176,818	
WIC Nutrition Assistant II, NVRA Coordinator (1)	3, 5-10, 12, 14, 15	1-5	41,392		58,712		1.00	0.00	1.00	56,432	-	56,432	1.00	0.00	1.00	57,561	-	57,561	1.00	0.00	1.00	58,712	-	58,712	172,705	-	172,705	
WIC Nutrition Assistant II, Breastfeeding Coordinator (1)	3, 5-10, 12, 14, 15, 18	1-5, 8	41,392		58,712		1.00	0.00	1.00	56,432	-	56,432	1.00	0.00	1.00	57,561	-	57,561	1.00	0.00	1.00	58,712	-	58,712	172,705	-	172,705	
WIC Nutrition Assistant II, FMNP Coordinator (1)	3, 5-10, 12, 14, 15	1-5, 8	41,392		58,712		1.00	0.00	1.00	56,432	-	56,432	1.00	0.00	1.00	57,561	-	57,561	1.00	0.00	1.00	58,712	-	58,712	172,705	-	172,705	
WIC Nutrition Assistant II, Outreach Coordinator (1)	3, 5-10, 12, 14, 15	1-5	41,392		58,712		1.00	0.00	1.00	56,432	-	56,432	1.00	0.00	1.00	57,561	-	57,561	1.00	0.00	1.00	58,712	-	58,712	172,705	-	172,705	
WIC Nutrition Assistant I (1)	6, 7, 9, 12, 15	3-5	37,502		53,272		1.00	0.00	1.00	51,204	-	51,204	1.00	0.00	1.00	52,228	-	52,228	1.00	0.00	1.00	53,272	-	53,272	156,704	-	156,704	
Overtime (3)							0.00	0.00	0.00	-	-	-	0.00	0.00	0.00	-	-	-	0.00	0.00	0.00	-	-	-	-	-	-	
Salaries and Wages							0.00	0.00	0.00	-	-	-	0.00	0.00	0.00	-	-	-	0.00	0.00	0.00	-	-	-	-	-	-	
Total FTE							6.55	0.00	6.55				6.50	0.00	6.50				6.46	0.02	6.47							
Fringe Benefits (4)							Percent		Amended Percent	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	Percent		Amended Percent	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	Percent		Amended Percent	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	Total	Total Budget Adj.	Amended Total	
							69.87%		69.87%	280,998	(408)	280,590	48.49996%		49.99992%	291,566	80,003	281,359	48.49994%		56.99977%	206,000	73,043	278,043	687,264	152,638	839,902	
TOTAL PERSONNEL										683,472	(992)	682,180				686,436	80,400	688,536				648,148	73,891	693,034	1,910,454	153,299	2,063,750	
OPERATING																												
General Expenses (5)	5, 7, 17, 21, 23, 25	1-10								66,422	(15,031)	70,391				179,247	(125,221)	53,996				166,469	(115,585)	49,874	430,096	(255,837)	174,261	
Travel (6)	8	1-10								2,000	(1,000)	1,000				2,000	(1,000)	1,000				2,000	(1,000)	1,000	6,000	(3,000)	3,000	
Training	4, 5, 7, 17, 21, 23	1-10								5,000	-	5,000				5,000	-	5,000				5,000	-	5,000	16,000	(1,000)	14,000	
Outreach/Media/Promotion	17	1-10								11,000	(10,000)	1,000				11,000	(10,000)	1,000				11,000	(10,500)	500	33,000	(30,500)	2,500	
Facility Costs (See Exhibit B, Attach II for breakdown) (7)	11, 23	1-10								34,164	-	34,164				34,164	-	34,164				34,164	-	34,164	102,492	-	102,492	
TOTAL OPERATING										117,686	(26,031)	111,555				217,861	(136,221)	95,160				217,623	(128,085)	89,538	686,690	(290,337)	296,253	
CAPITAL EXPENDITURES (8) (Unit Cost of \$5,000 or More)																												
Equipment (9)	6, 17, 18, 20, 21	1-10								-	-	-				-	-	-				-	-	-	-	-	-	
Vehicles (10)	8, 17, 18, 19	1-10								-	-	-				-	-	-				-	-	-	-	-	-	
TOTAL CAPITAL EXPENDITURES																												
OTHER COSTS (11)																												
Chico State Enterprises - CHC- RD services	1, 7, 9, 10, 12, 14, 15	1-4, 7								-	27,271	27,271				-	35,721	35,721				-	35,721	35,721	-	98,713	98,713	
TOTAL OTHER COSTS											27,271	27,271					35,721	35,721					35,721	35,721	-	98,713	98,713	
INDIRECT							Percent		Amended Percent	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	Percent		Amended Percent	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	Percent		Amended Percent	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	Total	Total Budget Adj.	Amended Total	
Total Personnel Costs							25.00%			170,793	(248)	170,545	25.00%			162,044	20,100	172,134	25.00%			164,786	18,473	173,258	477,612	38,325	515,937	
TOTAL INDIRECT										170,793	(248)	170,545				162,044	20,100	172,134				164,786	18,473	173,258	477,612	38,325	515,937	
TOTAL BUDGET										\$ 991,551	\$ -	\$ 991,551				\$ 991,551	\$ -	\$ 991,551				\$ 991,551	\$ -	\$ 991,551	\$ 2,974,653	\$ -	\$ 2,974,653	

Contract Year:
Contract Amount:
Funding Changes:
Checks/Balances:

Year 1
\$ 991,551
\$ -
\$ -

Year 2
\$ 991,551
\$ -
\$ -

Year 3
\$ 991,551
\$ -
\$ -

*All costs will be reviewed by CDPH for approval
 (1) Bilingual - Positions that receive Bilingual pay may show a higher budgeted amount. Justification and back-up documentation will be kept on file.
 (2) Additional Pay (i.e., Longevity, Retention, Differential pay and COLA) - Positions that receive one or more of these additional compensations may show a higher budgeted amount. Justification and back-up documentation will be kept on file.
 (3) Overtime - Requires justification if amount does not seem reasonable. Justification will be kept on file.
 (4) Fringe Benefits - Justification and back-up documentation will be kept on file for any fringe benefit rate that exceeds 50%.
 (5) General Expenses - Includes: Minor equipment (i.e., office furniture, IT equipment, anthropometric items), professional certifications, audit costs, vehicle maintenance, IT maintenance, program materials, office expenses, etc.
 (6) Travel - All costs reimbursed shall be in accordance with CalHR rates.
 (7) Facility Costs - Includes Rent, Utilities, Janitorial, Security, and Maintenance.
 (8) Capital Expenditures - Unit cost must be \$5,000 or more. Refer to Exhibit D, Provision 1 for procurement rules.
 (9) Equipment - Includes items such as: Telephone systems, information technology equipment, photocopy machines, etc.
 (10) Vehicles - Will be used for Facility Site Visits, Conferences, Trainings, and Outreach.
 (11) Other Costs - List the subcontractor's name and brief description of services provided.