

PICR-San Mateo-PA-A1-2024  
Prior Agreement No.5380-PICR-2024-SMC-PA  
Program Name: Psychiatric Inpatient Concurrent Review  
August 13, 2024

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CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY  
PARTICIPATION AGREEMENT AMENDMENT NO.1  
FOR PSYCHIATRIC INPATIENT CONCURRENT REVIEW ("PICR")  
COVER SHEET

1. This Participation Agreement Amendment No. 1 ("Amendment 1") shall become effective upon execution by and between San Mateo County ("Participant") and the California Mental Health Services Authority ("CalMHSA").
2. This Amendment 1 modifies the terms of the initial Participation Agreement No. 5380-PICR-2024-SMC-PA ("Agreement") to extend the term of the Program for 6 months, and increase the program funding on the terms and conditions set forth under "Modifications to the Agreement", attached hereto and incorporated herein by this reference.
3. The maximum amount payable under the Agreement shall not exceed **\$672,541.33** during the term of the agreement.
4. All other provisions in the initial Agreement No. 5380-PICR-2024-SMC-PA, not cited in this Amendment 1, shall remain in full force and effect.
5. The initial term of the Agreement beginning May 7, 2024 to December 31, 2024 is extended for 6 months through to June 30, 2025.
6. Authorized Signatures:

**CalMHSA**

DocuSigned by:  
Signed: Dr. Amie Miller Name (Printed): Dr. Amie Miller, Psy.D., MFT  
82E9EFB8B7CC446...  
Title: Executive Director Date: 1/15/2025

**Participant: San Mateo County**

Signed: David J. Canepa Name (Printed): David J. Canepa  
Title: President, Board of Supervisors Date: April 22, 2025

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### Modifications to the Agreement

The Agreement is hereby modified as described herein below effective upon execution of this Amendment 1:

- 1. Exhibit A – Program Description and Funding.** Article III (Estimated Annual Program Funding) under Exhibit A of the Agreement is hereby modified and replaced in its entirety by Article III. Modified County Specific Funding, attached to this Amendment 1 and fully incorporated within the Agreement.
- 2. Exhibit B - Duration, Term, and Amendment.** Article III (Duration, Term, and Amendment) Paragraph A under Exhibit B of the Agreement is hereby modified to read as follows:
  - A. The term of this Agreement covers the period from May 7, 2024 through June 30, 2025.
- 3. Exhibit B - Fiscal Provisions.** Article V (Fiscal Provisions) Paragraphs A and B under Exhibit B of the Agreement are hereby modified to read as follows:
  - A. Funding amount shall not exceed the NTE amount stated in Exhibit A, Article III. Table B during the term of this Agreement.
  - B. Payment Terms
    1. The fees payable by Participant under this Agreement are set forth in Exhibit A. Table A “Service Fee”.
    2. Participant will be invoiced monthly by CalMHSA, and Participant will issue payment amount within thirty (30) days of invoicing.
    3. Each monthly invoice is determined by Participant’s actual utilization.
    4. A Participant’s actual utilization fee shall accrue from the actual utilization commencement date of Participant. The Participant shall not be invoiced until the client is discharged and a fully processed Treatment Authorization Request (“TAR”) is completed.

Exhibit A - Article III. MODIFIED COUNTY SPECIFIC FUNDING

Table A. Service Fee

Participant agrees to pay the following Service Fee for each review and authorization conducted on behalf of Participant:

| Applicable period      | Service Fee Per Review |
|------------------------|------------------------|
| 05.07.24 to 06.30.2025 | \$89.60                |

Notes:

1. Service Fee refers to the cost to review and authorize each claim and is inclusive of all costs and fees. Participant will be invoiced at the end of each month based on Participants’ actual utilization of the services according to the rate set forth in Table A above for each review and authorization completed.

Table B. Modified Program Funding

Maximum program funding under this Agreement shall not exceed the NTE amount set forth below for all the stated services during the term of the Agreement:

| Applicable period  | Amount              |
|--|---------------------|
| 05.07.24 to 12.31.24   | \$384,309.33        |
| 01.01.25 to 06.30.25   | \$288,232.00        |
| <b>Program Funding Not to Exceed (“NTE”)<br/>05.07.2024 through 06.30.2025</b> | <b>\$672,541.33</b> |

Notes:

1. The updated NTE amount is calculated based on county’s highest annual utilization from the last three fiscal years and an added 25% overage allowance to take into account annual increases in utilization during the term of this Agreement.
2. The above budget assigns additional funds for the Program increasing the Program Funding NTE amount to \$672,541.33 during the term of the Agreement.