

STATE OF CALIFORNIA - DEPARTMENT OF GENERAL SERVICES

STANDARD AGREEMENT

STD 213 (Rev. 04/2020)

AGREEMENT NUMBER

20-10406

PURCHASING AUTHORITY NUMBER (If Applicable)

1. This Agreement is entered into between the Contracting Agency and the Contractor named below:

CONTRACTING AGENCY NAME

Department of Health Care Services

CONTRACTOR NAME

San Mateo County Connected Care

2. The term of this Agreement is:

START DATE

October 7, 2020

THROUGH END DATE

September 30, 2021

3. The maximum amount of this Agreement is:

\$100,000 (One Hundred Thousand Dollars)

4. The parties agree to comply with the terms and conditions of the following exhibits, which are by this reference made a part of the Agreement.

Exhibits	Title	Pages
Exhibit A	Scope of Work	3
Exhibit B	Budget Detail and Payment Provisions	4
Exhibit C *	General Terms and Conditions (GTC 04/2017)	
+ -	Exhibit D(F) Special Terms and Conditions (Attached hereto as part of this agreement) Notwithstanding provisions 4.g., 5, 6, 15, 16, 17, 23, 24, 30 and 31 which do not apply to this agreement	27
+ -	Exhibit E Additional Provisions	7
+ -	Exhibit F Contractor's Release	1
+ -	Exhibit G Business Associate Addendum	6
+ -	Exhibit H ARRA Terms and Conditions	2

Items shown with an asterisk (*), are hereby incorporated by reference and made part of this agreement as if attached hereto.

These documents can be viewed at <https://www.dgs.ca.gov/OLS/Resources>

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.)

San Mateo County Connected Care

CONTRACTOR BUSINESS ADDRESS

225 37th Avenue, 3rd Floor PONY: HLT362

CITY

San Mateo

STATE

CA

ZIP

94403

PRINTED NAME OF PERSON SIGNING

Stephen Dean

TITLE

Chief Information Officer

CONTRACTOR AUTHORIZED SIGNATURE

DocuSigned by:

Stephen Dean

DATE SIGNED

October 23, 2020

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STATE OF CALIFORNIA

CONTRACTING AGENCY NAME

Department of Health Care Services

CONTRACTING AGENCY ADDRESS

1501 Capitol Avenue, MS 4200

CITY

Sacramento

STATE

CA

ZIP

95814

PRINTED NAME OF PERSON SIGNING

Carrie Talbot

TITLE

SSMI, Chief, Contracts Services S

CONTRACTING AGENCY AUTHORIZED SIGNATURE

Carrie Talbot

DATE SIGNED

October 23, 2020

CALIFORNIA DEPARTMENT OF GENERAL SERVICES APPROVAL

EXEMPTION (If Applicable)

Exempt per: W&I 14046.3(b)