## SECOND AMENDMENT TO AGREEMENT BETWEEN THE COUNTY OF SAN MATEO AND MILLS-PENINSULA SENIOR FOCUS, INC.

# WITNESSETH:

WHEREAS, pursuant to Government Code, Section 31000, County may contract with independent contractors for the furnishing of such services to or for County or any Department thereof;

WHEREAS, the parties entered into an Agreement for Adult Day Care services on September 13, 2005; and

WHEREAS, the parties wish to amend the Agreement to continue the provision of adult day care services for FY 2006-2007.

# NOW, THEREFORE, IT IS HEREBY AGREED BY THE PARTIES HERETO AS FOLLOWS:

1. Section 3. of the agreement is amended to read as follows:

In consideration of the services provided by contractor in accordance with all terms, conditions and specifications set forth herein and in Exhibit "A", County shall make payment to Contractor based on the rates and in the manner specified in Exhibit "B." The County reserves the right to withhold payment if the County determines that the quantity or quality of the work performed is unacceptable. In no event shall the County's total fiscal obligation under this contract exceed ONE HUNDRED FORTY-ONE THOUSAND SIX HUNDRED DOLLARS (\$141,600) collectively for the period of July 1, 2006 through June 30, 2007 for all contracts approved under same resolution. The total obligation for the term of these agreements is TWO HUNDRED EIGHTY-THREE THOUSAND TWO HUNDRED DOLLARS (\$283,200) collectively.

2. All other terms and conditions of the agreement dated September 13, 2005, between the County and Contractor shall remain in full force and effect.

IN WITNESS WHEREOF, the parties hereto, by their duly authorized representatives, have affixed their hands.

	COUNTY OF SAN MATEO
	By:
	Date:
ATTEST:	
By:	
Mills-Peninsula Senior Focus, Inc.	
Contractor's Signature	
Date: 06/15/06	

NO.267 P.2 9:29AM DEC.13.2005

## INSURANCE SERVICES CORPOR TION SUTTF

Grosvenor Center, Mauka Tower 737 Bishop Street #2100 Honolulu, HI 96813

For further information referencing this Certificate, contact: Sutter Health Risk Services Department (916) 286-6520

CERTIFICATE OF COVERAGE

Certificate Number 06-0569

1/1/2006 Issue Date:

# NAMEOFINSURED

Mills Peninsula Health Services 1783 El Camino Real Burlingame, CA 94010

This is to certify that the policies of insurance listed below have been issued to the insured named above for the certificate period indicated, not withstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the rems, exclusions and conditions of such policies. Limits shown may have been reduced by paid claims.

# TYPE OF COVERAGE

Healthcare Professional Liability & Commercial General Liability

SISCO (Claims made):

LIMIT

Primary:

SIS 2006-1

\$5,000,000/Claim

Retroactive Date:

4/1/94 (MPHS)

Certificate Effective Date:

1/1/2006

Certificate Expiration Date:

7/1/2006

# REASON FOR INTEREST

RE: Evidence of professional liability including general liability Insurance for Mills Hospital and Peninsula Hospital and Medical Center in connection with Lifeline.

CERTIFICATE HOLDER

MSSP 225 West 37th Avenue San Mateo, CA 94401

Should any of the above described policies be canceled before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

Authorized Representative

1993-K

# DEPARTMENT OF INDUSTRIAL RELATIONS

OFFICE OF THE DIRECTOR

# CERTIFICATE OF CONSENT TO SELF-INSURE

MILLS-PENINSULA HEALTH SERVICES (a California corporation)
THIS IS TO CERTIFY, That Subsidiary of Sutter Health

Sections 3700 to 3705, inclusive, of the Labor Code of the State of California and is hereby granted this has complied with the requirements of the Director of Industrial Relations under the provisions of Certificate of Consent to Self-Insure.

This certificate may be revoked at any time for good cause shown.



EFFECTIVE

1st DAY OF February 19 2000

DEPARTMENT OF INDUSTRIAL RELATIONS E STATE OF CALIFORNIA

STEPHEN J. SMITH

DINECTON .

MARK B. ASHCRAFT ANTI

\* Revocation of Certificate,—"A certificate of consent to self-insure may be revoked by the Director of Industrial Relations at any time for good cause after a bearing. Cood cause includes, among other things, the impairment of the solvency of such employer, the inability of the employer to fulfill his obligations, or the practice by such employer or his agent in charge of the administration of obligations under this division of any of the following; (a) Habitually and as a matter of practice and custom inducing claimants for compensation to secrept less than the compensation of any it necessary for them to resort to proceedings practice and custom inducing claimants for compensation the employer to secure the compensation due; (b) Discharging his compensation of respective in such a manner; (c) Discharging his compensation obligations in such a manner; (d) Discharging his compensation of self-insurance.

The Certificate may be revoked for noncompliance with Title 8, California Administrative Code, Group 2—Administration of Self-Insurance.

FORM A.A.T.