STANDARD AGREEMENT - AMENDMENT	3CO ID: 4203-2010004-M4		
STD 213A (Rev. 10/2019)	AGREEMENT NUMBER	AMENDMENT NUMBER	Purchasing Aut

STD 213A (Rev. 10/2019)	AGREEMENT NUMBER	AMENDMENT NUMBER	Purchasing Autho	rity Number
CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED 2 PAGES	20-10884	04		
1. This Agreement is entered into between the State Agency an	d the Contractor named below:			
STATE AGENCY NAME				
California Department of Public Health				
CONTRACTOR NAME				
SLS Health Services LLC				
2. The term of this Agreement is:				
START DATE				
January 12, 2021				
THROUGH END DATE				
June 30, 2022				
3. The maximum amount of this Agreement after this Amendme \$1,000,000,000.00 One Billion Dollars and Zero Cents	ent is:	,		
4. The parties mutually agree to this amendment as follows.	All actions noted below are by	this reference made a part	of the Agreemer	nt and
incorporated herein:	, in addition the total bottom and by	and reference made a part	or and righteenine.	
I. The purpose of the amendment is to update the rate sheet to		corresponding rates in order	to better serve th	e state of
California due to an unforeseen increase in demand for border	support and vaccination efforts.			
II. Exhibit A, Attachment I, Staffing Agreement, Exhibit D, Staffin	ng Rate Sheet has been revised to	o include additional classifica	tions and rates, as	attached.
All other terms and conditions shall remain the same.				
IN WITNESS WHEREOF, THIS AGREEMENT HAS BEEN EXECUTED				
	CONTRACTOR			
CONTRACTOR NAME (if other than an individual, state whether a corpor	ration, partnership, etc.)			
SLS Health Services LLC				
CONTRACTOR BUSINESS ADDRESS		CITY	STATE	ZIP
Post Office Box 17017		Galveston	TX	77552
PRINTED NAME OF PERSON SIGNING		TITLE		
William Sullivan		President		
CONTRACTOR AUTHORIZED SIGNATURE		DATE SIGNED		
		7/2/21		
	STATE OF CALIFORNIA	/ /		
CONTRACTING AGENCY NAME		9		
California Department of Public Health				
CONTRACTING AGENCY ADDRESS		CITY	STATE	ZIP
1616 Capitol Avenue		Sacramento	CA	95814
PRINTED NAME OF PERSON SIGNING		TITLE	I	
Amy Manasero		Assistant Branch Chief		
CONTRACTING AGENCY AUTHORIZED SIGNATURE		DATE SIGNED		
CALIFORNIA DEPARTMENT OF CENTRAL CENTRAL CONTROL		EVENADTION (IS A P. 1.1.)		
CALIFORNIA DEPARTMENT OF GENERAL SERVICES APPROVAL		EXEMPTION (If Applicable) Proclamation of the State	of Emergency	
		Executive Order N-25-20	or emergency	
		PCC 1102		es.

EXHIBIT D STAFFING RATE SHEET

Staff Classification	Med Surge Rates	Vaccine Rates
Registered Nurse - Med/Surg	\$150.00	\$90.00
Registered Nurse - ICU	\$185.00	
Registered Nurse - Pediatrics	\$130.00	
Registered Nurse - Tele/Obs	\$170.00	
Registered Nurse - ER	\$160.00	
Registered Nurse - OR	\$140.00	
Registered Nurse - EH	\$140.00	
Licensed Vocational Nurse -BH	\$100.00	
Licensed Vocational Nurse	\$80.00	\$68.00
Certified Nursing Assistant	\$55.00	\$55.00
Respiratory Therapist	\$175.00	
MRI Technician	\$150.00	
X-Ray Technician	\$100.00	
Pharmacist	\$165.00	
Pharmacy Technician		\$100.00
Physical Therapist	\$140.00	
Paramedic	\$100.00	\$100.00
Home Care Aide	\$70.00	
Environmental Services (EVS)	\$70.00	
Administrative Staff		\$45.00
EMT		\$65.00

The following classifications and corresponding hourly rates are effective June 10, 2021:

Staff Classification	Lead Hourly Rates
RN - Outpt PM/Lead	\$105.00
LVN - PM/Lead	\$83.00
CNA- PM/Lead	\$70.00
MA - PM/Lead	\$80.00
Admin - PM/Lead	\$60.00
Project Manager	\$105.00
Other PM/Lead	\$15.00 per hour addition to Standard Rate

- Overtime will be paid at 1.5 x's regular rate after 8 hours in a workday or over 40 hours in a workweek, unless the hours in a workday exceeds 12 hours.
- Overtime will be paid at 2 x's regular rate after 12 hours in a workday.
- Staff schedules will be 72 hours per week (e.g. 6 days per week; 12 hours per day).
- Employee support costs to be billed at Actual Cost + 10%.
- Per diem rates based upon local area GSA rates.
- Travel costs for Staff to and from the work Site will be invoiced.
- The Staffing Rates offered are based upon the unknown future market fluctuations. SLS HEALTH reserves the right to reprice the above Staffing Rates in the event the CLIENT wishes to extend the period of performance beyond the initial Term, or in the event of a change in scope of requested services, or due to market conditions adversely impacting available personnel.

Activation and Standby:

- Activation and Staff billing to begin upon arrival at Site.
- In the event that a Staff member is idle or in transition due to reassignment to another Site (other than for scheduled or requested days off), Staff will be paid for a full 8 hour shift.
- All training and orientation time to be billed at the Regular Rate. Staff to be paid for a full 12 hour day on orientation, provided that Staff are available to provide clinical services upon completion of training and orientation for the remainder of said 12 hour period.