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Official Record

Recording requested By
EUREKA COUNTY NV

Eureka County - NV
Mike Rebaleati - Recorder

Fee: Page 1 of 3
RPTT: Recorded By: FES
Book- 497 Page- 0156



0214521

APN# N/A

Recording Requested by:

Name: EUREKA COUNTY

Address: _____

City/State/Zip EUREKA, NV

ADDENDUM TO DOCUMENT NO. 0213856
CONTRACT FOR SERVICES – NEVADA HEALTH CENTERS
(Title of Document)

**This page added to provide additional information required by NRS 111.312
Sections 1-2.
(Additional recording fee applies)**

This cover page must be typed or printed.

Nevada Health Centers, Inc.

Bringing Quality Health Care To Nevada's Communities

Carson City Administrative Office

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Las Vegas Administrative Office

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ADDENDUM TO AGREEMENT FOR PROVISION OF PRIMARY CARE SERVICES FOR EUREKA COUNTY IN THE YEAR JULY 1, 2009 TO JUNE 30, 2010

The following Addendum is entered into between Nevada Health Centers, Inc., herein after NVHC, and the County of Eureka, hereinafter referred to as COUNTY.

As agreed with an approved action by the Eureka Commissioners on December 7, 2009, COUNTY agrees to provide funds to NVHC for additional mid-level provider coverage in the Eureka and Crescent Valley Medical Facilities as described:

- 1) Eureka – Eight (8) additional provider coverage days per month
- 2) Crescent Valley – Four (4) additional provider coverage days per month
 - a. For clarification purposes, this will provide Crescent Valley Medical Facility to be open with a normal schedule of three (3) days per week

COUNTY agrees to compensate NVHC for above described services on a monthly basis. NVHC will itemize monthly expenses directly associated with the additional mid-level provider coverage. COUNTY agrees to pay NVHC within 30 days of invoice receipt.

Mid-Level Provider Salary	Actual Amt	8 days per month in Eureka 4 days per month in Crescent Valley	\$57,600
Mid-Level Provider Benefits	Actual Amt	21%	\$12,096
Mid-level Housing & Travel to/from Eureka	Estimated	Multiplied by 12 months	\$20,000
Mid-Level Physician Supervision	Actual Amt	Yearly	\$2,000
Medical Assistant	Only if needed	Additional Medical Assistant for Eureka	\$29,120
Medical Assistant Benefits	Only if needed		\$6,115
Provider / MA travel to Crescent Valley	Estimated	Yearly Cost based on Federal Allowance	\$7,504
Mid-Level Provider after hour coverage		Already covered with current contract	\$0
TOTAL Estimated Cost for Eureka County -->			\$134,435

This agreement shall commence upon NVHC securing a physician for the medical facility which operates in the Eureka area. This is estimated to be January or February of 2010.

All the terms and conditions of the original Agreement for Provision of Primary Care Services for Eureka County other than those expressly set forth herein shall remain in full force and effect. At the time of contract renewal, consideration will be made to combine this addendum to the contract if mutually agreed.

Agreed to this 5th day of January, 2010.



Chair or designated signee
Eureka County Commission



Thomas G. Chase
Chief Executive Officer
Nevada Health Centers, Inc.

ATTEST: 
Clerk