	3X2
Agenda Item #:	-3100

PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY					
Meeting Date: September 11, 2007 [X] Consent [] Regular [] Ordinance [] Public Hearing					
Department Submitted By: PUBLIC SAFETY Submitted For: Youth Affairs Division					
I. EXECUTIVE BRIEF					
Motion and Title: Staff recommends a motion to: Receive and File amendment #1 to the contract with Children's Health Care Associates, P.A., for the period October 1, 2007 to September 30, 2008 for professional/medical services to the residents of the Highridge Family Center for an annual cost of \$54,000.					
Summary: This contract provides physical examinations, diagnosis, and treatment of illnesses of the residents of the Highridge Family Center. Agenda item 3X1 on July 23, 2006 (R-2006-1321) authorized the County Administrator or his/her designee to execute the contracts on behalf of the Board of County Commissioners. <u>District 7 (DW)</u>					
Background and Policy Issues:					
Attachments:					
Executed Agreement with Children's Health Care Associates, P.A.					
Recommended by: Department Director Date					
Approved by: Muth 130/07					
Assistant County Administrator /Daté					

AMENDMENT NO. 1 TO THE AGREEMENT BETWEEN PALM BEACH COUNTY AND CHILDREN'S HEALTHCARE ASSOCIATES, P.A. TO PROVIDE PEDIATRIC SERVICES FOR THE HIGHRIDGE FAMILY CENTER

THIS AMENDMENT NO. 1, to the Agreement made and entered into at West Palm Beach Florida on October 1, 2006 (R2006 1321), between Palm Beach County, Florida a political subdivision of the State of Florida, hereinafter referred to as "COUNTY", and CHILDREN'S HEALTHCARE ASSOCIATES, P.A., A Florida Professional Corporation, hereinafter referred to as "PEDIATRICIAN".

WHEREAS, the parties entered into the Agreement of October 1, 2006 for providing pediatric services at the COUNTY'S Highridge Family Center; and WHEREAS, the parties now desire to extend the Agreement for an additional

NOW THEREFORE, in consideration of the mutual promises contained herein the parties agree as follows:

year.

- 1. Article 2 is modified to provide that all services shall be completed by September 30, 2008.
- 2. Effective during the period of October 1, 2007 through September 30, 2008, the compensation to the PEDIATRICIAN under Article 3 shall be in the amount of four thousand five hundred dollars (\$4,500.00) per month, for a maximum amount of fifty four thousand dollars (\$54,000.00) during FY 07-08.
- 3. Except as expressly modified above the Agreement is hereby confirmed and remains in full force and effect.

IN WITNESS WEREOF, the Board of County Commissioners of Palm Beach County
Florida has made and executed this Agreement on behalf of the COUNTY and
PEDIATRICIAN has hereunto set his/her hand the day and year above written.

ATTEST: SHARON R. BOCK	PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS:
By:	By: Multiple State Vincent J. Bonvento Assistant County Administrator
WITNESS: Signature	PEDIATRICIAN: Children's Healthcare Associates Company Name
Name (type or print)	Signature Janis A. Jones MD.
Signature 7. C. Hepworth	Typed Name President
Name (type or print) APPROVED AS TO FORM	Title
By: County Attorney	(corp. seal)
APPROVED AS TO TERMS AND CONDITIONS By:	

Children's HealthCare Associates

Janis Jones, M.D. Jaime Lambrecht, M.D. Greta Stiebel-Chin, M.D. Guillermo Vila, M.D. St. Mary's Medical Pavilion 927 45th Street Suite #205 West Palm Beach, Florida 33407 Telephone: (561) 844–6605 Fax: (561) 848–9059

March 21, 2007

Tony Spaniol, Psy. D.
Director, Division of Youth Affairs
Highridge Family Center
4200 N Australian Avenue
West Palm Beach, FL 33407

Dear Dr. Spaniol:

Children's Healthcare Associates is pleased to render medical services to the Highridge Family Center. We look forward to continuing to provide these services for the 2007-2008 contract year. Our fees for the 2007-2008 renewal period will remain at four thousand, five hundred dollars (\$4,500.00) per month.

Please feel free to contact me if you need any additional information.

Thank you for the opportunity to service your facility.

Sincerely,

Janis A. Jones, MD

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ACORD 25 (2001/08)



First Professionals Insurance Company

MEMORANDUM OF INSURANCE

TO: TO WHOM IT MAY CONCERN:

NAMED INSURED: CHILDREN'S HEALTHCARE ASSOCIAT 927 45TH STREET SUITE #205 WEST PALM BEACH, FL 33407

*Policy provides individual coverage for the physicians listed on the attached schedule.

This is to advise you that the First Professionals Insurance Company, Inc. has issued to the named insured the policy enumerated below, subject to all the terms of such policy. This memorandum neither affirmatively or negatively amends, extends or alters the coverage of such policy.

POLICY NUMBER	TYPE OF INSURANCE	LIMITS	CLAIMS REPORTI LIMITS PERIOD			
99275	Professional	250,000 each claim	From:	12/15/2006		
	Liability	750,000 aggregate	To:	12/15/2007		

Retroactive Date: See Schedule

Date Issued: 12/15/2006

Vice President of Underwriting

FPIC-9(1/86)

FL-PC9275



First Professionals Insurance Company

MEMORANDUM OF INSURANCE

TO: TO WHOM IT MAY CONCERN:

NAMED INSURED: JAIME D. LAMBRECHT, M.D. 927 45TH STREET SUITE 205 WEST PALM BEACH, FL 33407

ID NO: 71505

This is to advise you that the First Professionals Insurance Company, Inc. has issued to the named insured the policy enumerated below, subject to all the terms of such policy. This memorandum neither affirmatively or negatively amends, extends or alters the coverage of such policy.

POLICY	TYPE OF INSURANCE	LIMITS		CLAIMS REPORTING PERIOD		
99275	Professional	250,000 each claim	From:	12/15/2006		
	Liability	750,000 aggregate	To:	12/15/2007		

Retroactive Date: 07/01/1983

Class 92 - PEDIATRICS - NO SURGERY

Date Issued: 01/08/2007

Vice President of Underwriting

FPIC-9(1/86)

342/8

FL-P41962



WORKERS' COMPENSATION AND EMPLOYERS LIABILITY POLICY INFORMATION PAGE

Comp	Options In	surance Company					NCCI	Company Code:	36307
		20. ————————————————————————————————————		New	[Revision	Policy	No.: 01CB4-901D1	169-04
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	\$8,881	Total Estimated Annual Pol	licy Premium						
	\$252	Minimum Premium						.!	
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