

COUNTY COPY ()
YOUR COPY ()

CONTRACT NO: 24P-47B

CONTRACT ADDENDUM

The Purchase of Service Contract between Sauk County, a municipal corporation, acting through Sauk County Department of Human Services and Imagine Your Capacity, Counseling and Consulting, LLC, is being amended at this time to add a new rates and additional dollars. This Addends Section I **CONTRACT INFORMATION** on page one and Section IV **PAYMENT FOR SERVICES** on pages three and four of the Contract.

III. PAYMENT FOR SERVICES

Purchaser and Provider agree:

- A. The total amount to be paid to Provider by Purchaser for services provided in accordance with this Contract shall not exceed the contracted dollar amount of:
\$100,000.00

Service	Funding Source	Unit Cost	Total Cost
CLTS		<u>Local Service Area</u>	\$20,000.00
		Phd In-Home/Community \$214 per hour \$53.50 per 15 min	
	<u>CCOP/CLTS</u> <u>Waiver/Base</u>	Phd In-Home Clinic/Telehealth \$172.00 per hour	
		Outside of Local Service Area	
		Phd In-Home/Community \$305.00 per hour \$76.25 per 15 min	

(Effective date 09/01/24 - 12/31/24)

*Define Rate (Example: Dollars/per unit, time/per client)

- B. The Provider shall bill monthly. Payment will be made in arrears each month following the month service is provided.
Please attach this addendum to your copy of the Purchase of Service Contract.

DocuSigned by:
Brent Miller
0A0B3AC690D7404...
For County: Name: Brent Miller
Title: Administrator
SAUK COUNTY

9/9/2024
Date:

Signed by:
Jessica Mijal
ACF4125B9F1F41A...

9/9/2024

For Agency : _____

Name: Jessica Mijal

Title: Director

SAUK COUNTY DEPARTMENT OF HUMAN SERVICES

Date: _____

Signed by:
Lisa Hoeme
58F50540FBED403...

9/18/2024

Provider's Authorized Representative

Name: Lisa Hoeme

Title: Managing Partner

Date: _____