

**AMENDMENT TO BOARD OF SUPERVISORS  
AGREEMENT NO. 20-026**

This Amendment to BOS Agreement No. 20-026 is entered into this 22<sup>nd</sup> day of June, 2021, by and between the COUNTY OF MENDOCINO, a political subdivision of the State of California, hereinafter referred to as "COUNTY" and VIRGIN PULSE, INC., hereinafter referred to as "CONTRACTOR".

WHEREAS, BOS Agreement No. 20-026 was entered into on March 24, 2020; and

WHEREAS, upon execution of this document by the Chair of the Mendocino County Board of Supervisors and Virgin Pulse, Inc., this document will become part of the aforementioned contract and shall be incorporated therein; and

WHEREAS, CONTRACTOR agrees to provide Additional Services – Quest Concierge Health Screenings – Stand Alone Flu Vaccination services, as requested by COUNTY; services and pricing attached as Exhibit A-A1; and

WHEREAS, it is the desire of CONTRACTOR and COUNTY to amend BOS Agreement No. 20-026 in the amount of Thirty Three Thousand Dollars (\$33,000), effective when Agreement is fully executed, for a total Agreement amount of Two Hundred Seventy Two Thousand Dollars (\$272,000).

NOW, THEREFORE, we agree as follows:

1. CONTRACTOR agrees to provide Additional Services – Quest Concierge Health Screenings – Stand Alone Flu Vaccination services, as requested by COUNTY; services and pricing attached as Exhibit A-A1.
2. To amend BOS Agreement No. 20-026 in the amount of Thirty Three Thousand Dollars (\$33,000), effective when Agreement is fully executed, for a total Agreement amount of Two Hundred Seventy Two Thousand Dollars (\$272,000).

All other terms and conditions of BOS Agreement No. 20-026 shall remain in full force and effect.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement as of the day and year first above written.

**DEPARTMENT FISCAL REVIEW:**

 6/07/2021  
WILLIAM SCHURTZ, HR DIRECTOR DATE

Budgeted: ☐ Yes ☒ No

Budget Unit: PW4025

Line Item: 862189

Grant: ☐ Yes ☒ No

Grant No.: \_\_\_\_\_

**COUNTY OF MENDOCINO**

By:   
DAN GJERDE, Chair  
BOARD OF SUPERVISORS JUN 25 2021


**ATTEST:**

CARMEL J. ANGELO, Clerk of said Board

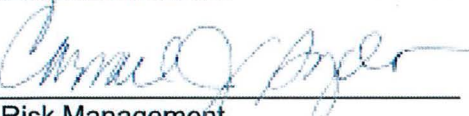
By:   
Deputy

I hereby certify that according to the provisions of  
Government Code section 25103, delivery of this  
document has been made.

CARMEL J. ANGELO, Clerk of said Board

By:   
Deputy

**INSURANCE REVIEW: JUN 25 2021**

By:   
Risk Management

**EXECUTIVE OFFICE/FISCAL REVIEW:**

**APPROVAL RECOMMENDED**

By:   
Deputy CEO

**CONTRACTOR/COMPANY NAME:**

SEE ATTACHED  
SIGNATURE PAGE

By: \_\_\_\_\_

**NAME AND ADDRESS OF CONTRACTOR:**

Virgin Pulse, Inc.

75 Fountain Street, Suite 310


Providence, RI 02902

By signing above, signatory warrants and represents that he/she executed this Agreement in his/her authorized capacity and that by his/her signature on this Agreement, he/she or the entity upon behalf of which he/she acted, executed this Agreement

**COUNTY COUNSEL REVIEW:**

**APPROVED AS TO FORM:**

CHRISTIAN M. CURTIS,  
County Counsel

By:   
Deputy

Signatory Authority: \$0-25,000 Department; \$25,001-50,000 Purchasing Agent; \$50,001+ Board of Supervisors

Exception to Bid Process Required/Completed ☐

Mendocino County Business License: Valid ☐

Exempt Pursuant to MCC Section: \_\_\_\_\_

**IN WITNESS WHEREOF**, the parties hereto have executed this Agreement as of the day and year first above written.

**DEPARTMENT FISCAL REVIEW:**

SEE ATTACHED  
SIGNATURE PAGE  
WILLIAM SCHURTZ, HR DIRECTOR      DATE  
Budgeted: ☐ Yes ☒ No  
Budget Unit: PW4025  
Line Item: 862189  
Grant: ☐ Yes ☒ No  
Grant No.: \_\_\_\_\_

**COUNTY OF MENDOCINO**

By: \_\_\_\_\_  
DAN GJERDE, Chair  
BOARD OF SUPERVISORS

**ATTEST:**

CARMEL J. ANGELO, Clerk of said Board

By: \_\_\_\_\_  
Deputy

I hereby certify that according to the provisions of Government Code section 25103, delivery of this document has been made.

CARMEL J. ANGELO, Clerk of said Board

By: \_\_\_\_\_  
Deputy

**INSURANCE REVIEW:**

By: \_\_\_\_\_  
Risk Management

**EXECUTIVE OFFICE/FISCAL REVIEW:**

APPROVAL RECOMMENDED

By: \_\_\_\_\_  
Deputy CEO

**CONTRACTOR/COMPANY NAME:**

DocuSigned by:  
By: Kim Stephan  
004F0E2459E44DA...

**NAME AND ADDRESS OF CONTRACTOR:**

Virgin Pulse, Inc.  
75 Fountain Street, Suite 310  
Providence, RI 02902

By signing above, signatory warrants and represents that he/she executed this Agreement in his/her authorized capacity and that by his/her signature on this Agreement, he/she or the entity upon behalf of which he/she acted, executed this Agreement      Kim Stephan      General Counsel

**COUNTY COUNSEL REVIEW:**

**APPROVED AS TO FORM:**

CHRISTIAN M. CURTIS,  
County Counsel

By: \_\_\_\_\_  
Deputy



## EXHIBIT A-A1

### Additional Services – Quest Concierge Onsite Health Screenings.

Provider shall make available to Client on behalf of Client's Eligibles, the Quest Concierge Onsite Health Screenings services contemplated in Sections 1(a), (b), (c), (d), (e), and (f) below:

- (a) Quest Concierge Onsite Health Screenings – Flu Vaccinations (Standalone) services at a rate of Forty Dollars and Zero Cents (\$40.00) Per Unit.
  - i. Flu Vaccinations (Standalone): Full-service planning, administration, and scheduling of onsite flu vaccinations. Minimum 30 participants. Privacy screens & Spanish-speaking screeners are unavailable for flu events.
- (b) Quest Concierge Onsite Health Screenings - Additional Staff Requested: Screening Staff services at a rate of One Hundred and Ten Dollars and Zero Cents (\$110.00) Per Hour, Per Person.
  - i. Additional Staff Requested: Screening Staff: Should your event need to be longer than our outlined staffing matrix, staff time will be billed at the hourly rate for the staff role at the event.
- (c) Quest Concierge Onsite Health Screenings - Additional Staff Requested: Onsite Clerk services at a rate of Thirty-five Dollars and Zero Cents (\$35.00) Per Hour.
  - i. Additional Staff Requested – Onsite Clerk. One clerk included for events with over 50 participants. If the event is under 50 participants, Client must provide someone for the registration desk.
- (d) Quest Onsite Health Screenings – Additional Travel Fees: Mileage. Cost for these services varies.
  - i. Additional Travel Fees - Mileage: Travel to events within sixty (60) miles roundtrip of a metropolitan Statistical Area, with population of 200,000 is included in pricing.
- (e) Quest Onsite Health Screenings – Additional Travel Fees: Hotel/Food services at a per diem rate for each staff member assigned to the event in the amount of One Hundred and Thirty-five Dollars and Zero Cents (\$135.00) for lodging; and Forty Dollars and Zero Cents (\$40.00) for food.
  - i. Additional Travel Fees – Hotel/Food: If extensive travel or scheduling warrants a hotel stay, hotels will be booked with two (2) screeners to a room (when gender permits).
- (f) Quest Onsite Health Screenings – Privacy Screens services at a rate of Thirty-five Dollars and Zero Cents (\$35.00) Per Unit.
  - i. Privacy Screens: One (1) screen per station included with Concierge Onsite Screening events with over 50 participants.