

## **CONTRACT AMENDMENT COVER SHEET**

Agency   Tacking #   Edison ID   75651   GU-23-75651   1	T786									
Contractor Legal Entity Name  METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY  Amendment Purpose & Effect(s)  DECREASES FUNDING FOR REMAINDER OF CONTRACT  Amendment Changes Contract End Date: YES NO End Date: 06/30/27  TOTAL Contract Amount INCREASE or DECREASE per this Amendment (zero if N/A): (-\$585,000.00)  Funding —  FY State Federal Interdepartmental Other TOTAL Contract Amount 2023 \$800,000.00 \$800,000.00  2024 \$800,000.00 \$800,000.00  2025 \$605,000.00 \$805,000.00  2026 \$605,000.00 \$805,000.00  2027 \$605,000.00 \$805,000.00  TOTAL: \$3,415,000.00 \$3,415,000.00  Budget Officer Confirmation: There is a balance in the appropriation from which obligations hereunder are required to be paid that is not already encumbered to pay other obligations.  Speed Chart (optional) Account Code (optional)	Agency Tracking #		Edison ID		Contract #		Amendment #			
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\$800,000.00   \$800,000.00   \$605,000.00   \$605,000.00   \$605,000.00   \$605,000.00   \$605,000.00   \$605,000.00   \$605,000.00   \$605,000.00   \$605,000.00   \$605,000.00   \$3,415,000.00   \$3,4			Federal	Interdepa	rtmental	Other				
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HL00000225 71301000	Speed Chart (optional) Account Code (optional)				1					
	HL00000225 71301000									

## AMENDMENT 1 OF CONTRACT 75651

This Amendment is made and entered by and between the State of Tennessee, Department of Health, hereinafter referred to as the "State" and Metropolitan Government of Nashville and Davidson County, hereinafter referred to as the "Contractor." For good and valuable consideration, the sufficiency of which is hereby acknowledged, it is mutually understood and agreed by and between said, undersigned contracting parties that the subject contract is hereby amended as follows:

- 1. Contract section C.1. is deleted in its entirety and replaced with the following:
- C.1. <u>Maximum Liability</u>. In no event shall the maximum liability of the State under this Contract exceed Three Million Four Hundred Fifteen Thousand Dollars (\$3,415,000.00). The payment rates in section C.3 shall constitute the entire compensation due the Contractor for all service and Contractor obligations hereunder regardless of the difficulty, materials or equipment required. The payment rates include, but are not limited to, all applicable taxes, fees, overheads, and all other direct and indirect costs incurred or to be incurred by the Contractor.

The Contractor is not entitled to be paid the maximum liability for any period under the Contract or any extensions of the Contract for work not requested by the State. The maximum liability represents available funds for payment to the Contractor and does not guarantee payment of any such funds to the Contractor under this Contract unless the State requests work and the Contractor performs said work. In which case, the Contractor shall be paid in accordance with the payment rates detailed in section C.3. The State is under no obligation to request work from the Contractor in any specific dollar amounts or to request any work at all from the Contractor during any period of this Contract.

Required Approvals. The State is not bound by this Amendment until it is signed by the contract parties and approved by appropriate officials in accordance with applicable Tennessee laws and regulations (depending upon the specifics of this contract, said officials may include, but are not limited to, the Commissioner of Finance and Administration, the Commissioner of Human Resources, and the Comptroller of the Treasury).

<u>Amendment Effective Date</u>. The revisions set forth herein shall be effective once all required approvals are obtained. All other terms and conditions of this Contract not expressly amended herein shall remain in full force and effect.

**IN WITNESS WHEREOF**, the parties have by their duly authorized representatives set their signatures.

## METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY

11/22/2024
Date
11/25/2024
Date
11/26/2024
Date

APPROVED AS TO RISK AND INSURANCE:		
Docusigned by:  Balogun Colb	11/26/2024	
Director of Risk Management Services	Date	_
APPROVED AS TO FORM AND LEGALITY:		
Matthew Garth	1/15/2025	
Metropolitan Attorney	Date	
 Metropolitan Mayor	 Date	
ATTEST:		
Metropolitan Clerk	Date	
DEPARTMENT OF HEALTH:		
Ralph Alvarado, MD, FACP, Commissioner	Date	