



February 18, 2020

Michael B. Williams  
Champaign County Probation and Court Services  
101 E. Main St.  
Urbana, IL 61801

**FIRST AMENDMENT  
TO THE AGREEMENT FOR INMATE HEALTH  
CARE SERVICES AT CHAMPAIGN COUNTY,  
ILLINOIS JUVENILE DETENTION CENTER**

Dear Mr. Williams:

As the proud provider of medical services for the Champaign County Juvenile Detention Center, Wellpath LLC (fka Correct Care Solutions, LLC) looks forward to renewing our commitment to provide quality health care in the upcoming year.

Pursuant to section 9.0, Wellpath requests to renew our agreement for an additional one-year period with an increase consistent with the Consumer Price Index - All Urban Consumers, U.S. City Average, Medical Care Services, which stands at 5.1% as reported for the 12 month change for the month of November. Application of this increase, revises the base compensation from \$10,840.00 to \$11,392.84 monthly / \$136,714.08 annually, effective May 1, 2020 through April 30, 2021.

As such, section 8.0 shall be deleted in its entirety and replaced with the following language:

8.0 ANNUAL AMOUNT/MONTHLY PAYMENTS. The base annualized amount to be paid by the COUNTY to Wellpath under this Agreement, is One Hundred Thirty-Six Thousand Seven Hundred Fourteen Dollars and Eight Cents (\$136,714.08). Each monthly payment shall be in the amount of Eleven Thousand Three Hundred Ninety-Two Dollars and Eighty-Four Cents (\$11,392.84), pro-rated for any partial months and subject to any reconciliations as set forth below. Each monthly payment is to be paid by the County to Wellpath before or on the 1st day of the month of the month of service.

If the County accepts, please sign this letter in the space provided on the following page and email a signed copy to Stephanie Vardell, Partner Services Specialist, at [svardell@wellpath.us](mailto:svardell@wellpath.us). This letter shall serve as the First Amendment to the Agreement and shall be binding upon signature of the County and Wellpath, pursuant to Section 11.13 of the Agreement. All other terms of the current Agreement, including any changes detailed above, shall remain in full force and effect.

Should you have any questions, please do not hesitate to contact Nanette Worley, Director of Operations at 217-565-1841.

Sincerely

Audrey Townsel, PsyD, MHA  
Regional Vice President






**AGREED TO AND ACCEPTED AS STATED ABOVE:**

**County of Champaign, Illinois**

By:   
**Name:** Giraldo Rosales  
**Title:** Champaign County Board Chairman

By:   
**Name:** Michael B. Williams  
**Title:** Champaign County Director of Probation  
and Court Services

**Wellpath LLC**

By:   
**Name:** Cindy P. Watson  
**Title:** President, Local Govt. Health Div

