

PINELLAS COUNTY HEALTH PROGRAM  
INTERLOCAL AGREEMENT- AMENDMENT 1  
Legistar ID Number: 25-1805A

THIS FIRST AMENDMENT, effective upon the date executed below, by and between **PINELLAS COUNTY**, a political subdivision of the State of Florida, hereinafter called the "**COUNTY**," and the **FLORIDA DEPARTMENT OF HEALTH, PINELLAS COUNTY HEALTH DEPARTMENT**, an agency of the State of Florida providing public health services in Pinellas County, hereinafter called "**DOH**." The Parties hereby amend the Interlocal Agreement between the **COUNTY** and **DOH** dated November 14, 2023, as follows:

WITNESSETH:

WHEREAS, the **COUNTY** desires to provide access to health care for the low-income, uninsured residents of Pinellas County through the Pinellas County Health Program (PCHP) and the Healthcare for the Homeless Program (HCH); and

WHEREAS, **DOH** is the current provider of primary care, specialty care, dental, and other services for PCHP and HCH; and,

WHEREAS, the **COUNTY** wishes to provide for integrated care in the medical homes, to include behavioral health and substance use services; and

WHEREAS, having **DOH** directly administer existing substance use funding by allowing them to subcontract for these services will allow for more seamless integration of care.

**NOW, THEREFORE**, the parties hereto do mutually agree as follows:

1. The above "WHEREAS" clauses are incorporated into and are made a part of this Agreement.
2. Section 4, "Compensation", subsection (a), is hereby amended and restated as follows:  
Compensation for services in Section 3 of this Agreement is a total annual amount not to exceed \$11,314,105.60 per year for the first two (2) years of this agreement. Beginning in

PINELLAS COUNTY HEALTH PROGRAM- INTERLOCAL AGREEMENT  
AMENDMENT 1

year three (3), compensation for services is a total annual amount not to exceed \$12,425,763.00 per year.

3. Section 26, "Public Records" is hereby amended and restated as follows:

**DOH** acknowledges that information and data it manages as part of the services may be public records in accordance with Chapter 119, Florida Statutes and Pinellas County public records policies. **DOH** agrees that prior to providing services it will implement policies and procedures to maintain, produce, secure, and retain public records in accordance with applicable laws, regulations, and the **DOH** policies, including but not limited to the Section 119.0701, Florida Statutes. Notwithstanding any other provision of this Agreement relating to compensation, **DOH** agrees to charge any third parties requesting public records only such fees allowed by Section 119.07, Florida Statutes, and policy, or Pinellas County's applicable Fee Schedule as authorized by law, for locating and producing public records during the term of this Agreement.

Specifically in regard to medical record requests or Athena One records which are maintained in a system wholly supported by the **COUNTY**, the **COUNTY** will be responsible for reviewing, processing, and responding to such requests, to include all modalities that meet the request criteria. **DOH** shall promptly forward any such requests received to the **COUNTY's** Public Records Liaison within three (3) business days of receipt. Records held in systems wholly supported by **DOH** will continue to be the responsibility of **DOH** in accordance with the language herein.

4. Except as herein provided, all other terms and conditions of the Agreement remain in full force and effect.

SIGNATURE PAGE FOLLOWS

PINELLAS COUNTY HEALTH PROGRAM- INTERLOCAL AGREEMENT  
AMENDMENT I

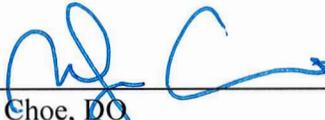
IN WITNESS WHEREOF, the parties hereto have caused this instrument to be executed on  
the day and year written below.

PINELLAS COUNTY, FLORIDA, by and  
through its County Board of  
County Commissioners

By: \_\_\_\_\_  
Dave Eggers  
Chairman

Date: \_\_\_\_\_, 2026

Florida Department of Health, Pinellas  
County Health Department

By:  \_\_\_\_\_  
Ulyee Choe, DO  
County Health Department Director

Date: Jan 26, 2026

Federal Tax ID: F596000800262

APPROVED AS TO FORM

By: Cody J. Ward  
Office of the County Attorney