



Lexington Fayette County Health Department

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CONTRACT AMENDMENT #2

DATE: August 27, 2025

CONTRACT NUMBER: 24-25-PUBLIC-R

CONTRACTOR NAME AND ADDRESS: Family Care Center-HANDS PROGRAM
Lexington-Fayette Urban Co. Gov.
200 East Main Street
Lexington, KY 40507

It is mutually understood and agreed by and between the undersigned contracting parties to amend the previously executed agreement as follows:

Section 5:

Is changed effective **August 27, 2025** to note an increase in FY25 HANDS Non-Medicaid Home Visiting Services Grant funding to a new maximum allowable of \$50,000. Contractor must report HANDS Non-Medicaid Home Visiting Service Grant expenses to Health Department monthly for reimbursement. Reimbursement will be made from Department for Public Health to Health Department on Contractor's behalf. Upon Health Department's receipt of Contractor reimbursement, Health Department will distribute reimbursement to Contractor. The maximum amount of administrative reimbursement is \$50,000. The project period is 7/1/24 to 6/30/25.

CONTRACTOR DATE

Dr. Crystal Miller DATE
COMMISSIONER OF HEALTH

PREVENT

PROMOTE

PROTECT

Prevent

Promote

Protect

Cara Kay
CHIEF FINANCIAL OFFICER

DATE

Jessica Cobb
COMMUNITY HEALTH OFFICER

DATE

DRAFT

PREVENT

PROMOTE

PROTECT