## TOWN OF CANTON CONNECTICUT

## AMENDMENT TO THE OCTOBER 28, 2016 MENTAL HEALTH CONTRACTED SERVICES AGREEMENT

This Amendment is made and entered as of the 13 day of October, 2020, by and between The Town of Canton, P.O. Box 168, 4 Market Street, Collinsville, CT 06022 and Elaine R. Morisano, Ph.D., 37 Nonau K Dave Contain CT 06019 (hereinafter referred to as "Consultant"). The Consultant and the Town of Canton are hereinafter sometimes referred to individually as a "Party" and together as "Parties." The Town of Canton includes the Canton Youth Services Bureau which is an Agency of the Town of Canton.

The purpose of this Amendment is to change the fees specified in section (3.). The section shall hereafter be as follows:

Accept referrals from the Canton Youth Services Bureau for diagnostic evaluations and outpatient psychotherapy. The cost for evaluations and ongoing counseling shall be at the rate of \$100.00 per hour for individual and \$150.00 per hour for family therapy. A cancel / fail fee of \$25.00 will be assessed if an appointment is cancelled or failed with less than 24 hours' notice.

All other terms and conditions of the October 28, 2016 Agreement shall remain in full force and effect.

IN WITNESS WHEREOF, the Parties have executed and delivered this Agreement this by day of October, 2020.

Contractor:

Town of Canton

Chief Administrative Officer

Consultant:

Elaine R. Morisano, Ph.D.

By Elaine R. Morisano, Ph.D.

Date

Date

37 Mohawle Dr.

Canton, CT 06019

860-841-9073