

## ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM DIVISION OF BUSINESS AND FINANCE

## CONTRACT AMENDMENT

1. AMENDMENT#	2. CONTRACT #:	3. EFFECTIVE DATE OF AMENDMENT:	4. PROGRAM
57	YH8-0002 ADHS # 832007	October 1, 2014	DHCM - ADHS/DBHS

5. CONTRACTOR NAME AND ADDRESS:

Arizona Department of Health Services
Division of Behavioral Services
150 N. 18<sup>th</sup> Avenue, Suite 200
Phoenix, AZ 85007

- 6. PURPOSE: To retroactively amend Capitation Rates for the month of October, 2014.
- 7. THE ABOVE REFERENCED CONTRACT IS HEREBY AMENDED AS FOLLOWS:

Section 9010 of the Patient Protection and Affordable Care Act (ACA) requires that the Contractor pay a Health Insurer Assessment Fee (HIF) annually based on its respective market share of premium revenues from the preceding year (calendar year 2014 revenue). AHCCCS provides funding to the Contractor for the Health Insurer Assessment Fee and associated taxes subject to receipt and review of documentation from the Contractor as required by AHCCCS.

This contract amendment serves to retroactively adjust the capitation rates for the month of October, 2014 to include the federal and state income taxes associated with the 2015 Health Insurer Assessment Fee, and amends the following sections of the contract:

## > Section B, Capitation Rates and Contractor Specific Information

Title XIX eligible children, under the age of 18 (represents the cost of providing covered behavioral health services to children), not enrolled in CMDP:	\$37.14- \$41.38 pmpm
Title XIX eligible children, under the age of 18 (represents the cost of providing covered behavioral health services to children), enrolled in CMDP:	\$924.13 \$1,029.72 pmpm
Title XIX eligible adults, age 18 and older (represents the cost of providing covered behavioral health services to adult members without serious mental illness):	\$44.13 \$49.17 pmpm
Title XIX eligible adults, age 18 and older (represents the cost of providing covered behavioral health services to adult members with serious mental illness, who are not receiving physical health services under this contract):	<del>\$33.92</del> \$37.80 pmpm
Title XIX eligible adults, age 18 and older (represents the cost of providing covered behavioral health services to adult members with serious mental illness, who are receiving physical health services under this contract):	\$2,398.27 pmpm
Title XXI eligible children (represents the cost of providing covered behavioral health services to TXXI children):	<del>\$37.14</del> \$41.38 pmpm
Title XXI eligible adults (represents the cost of providing covered behavioral health services to TXXI adults):	\$44.13 \$49.17 pmpm

	L TERMS AND CONDITIONS OF THE ORIGINAL AND/OR AMENDED REMAIN UNCHANGED AND IN		
IN WITNESS WHEREOF THE PARTIES HERETO SIGN THEIR NAMES IN AGREEMENT			
9. SIGNATURE OF AUTHORIZED	10. SIGNATURE OF AHCCCS CONTRACTING OFFICER:		
REPRESENTATIVE:	MHadas		
TYPED NAME:	TYPED NAME:		
REBECCA O'BRIEN	MEGGAN HARLEY		
TITLE:	TITLE:		
ACTING CHIEF PROCUREMENT OFFICER	PROCUREMENT MANAGER		
DATE:	DATE: 11/16/2015		