![AHCCCS - Arizona Health Care Cost Containment System logo]

CONTRACT AMENDMENT

1. AMENDMENT #: **9**	2. CONTRACT #: **YH17-0001**	3. EFFECTIVE DATE OF AMENDMENT: **October 1, 2018**	4. PROGRAM **DHCM-RBHA** **RBHA - Greater Arizona**

5. CONTRACTOR NAME AND ADDRESS:

6. PURPOSE: To amend the Contract for the period October 1, 2018 through September 30, 2019 and to amend Sections: Scope of Work and Exhibits.

7. THE ABOVE REFERENCED CONTRACT IS HEREBY AMENDED AS FOLLOWS:

Contract Sections:

➢ **Scope of Work**

3.3 Prior Period Coverage
Prior Period Coverage for GMH/SU or Non-CMDP Child members who are initially eligible as Non-Title XIX/XXI and assigned to a RBHA and who transition to Title XIX/XX eligibility:

1. The GMH/SU or Non-CMDP Child member retains behavioral health assignment with the RBHA Contractor through the Title XIX/XXI PPC period.
2. The GMH/SU or Non-CMDP Child member is enrolled with the AHCCCS Complete Care Contractor for physical health services through the Title XIX/XXI PPC period.
3. The RBHA Contractor is responsible for payment of all behavioral health claims for medically necessary Non-Title XIX/XXI and Title XIX/XXI behavioral health covered services provided to these GMH/SU or Non-CMDP Child members who are initially eligible as Non-Title XIX/XXI and assigned to a RBHA during the prior period coverage timeframe.
4. The AHCCCS Complete Care Contractor is responsible for payment of all physical health claims for medically necessary Title XIX/XXI physical health covered services during the PPC period and prospectively.
5. The member is enrolled with the AHCCCS Complete Care Contractor for both physical and behavioral health Title XIX/XXI services the day following the date AHCCCS is notified of the member's XIX/XXI eligibility.

15.5   Compensation
AHCCCS shall compensate the Contractor for services provided to Title XIX members during the Prior Period Coverage (PPC) time periods and to Title XIX/XXI members during the prospective time periods through capitation payments, special provisions for payment, and reinsurance as described and defined within this Contract and appropriate laws, regulations or policies [42 CFR 438.6(b)(1)] and the *Special Provisions for Payment* and *Reinsurance* Section of this Contract. Title XXI members are not eligible for PPC services. Capitation payments may only be made by the State and retained by the Contractor for Medicaid-eligible members [42 CFR 438.3(c)(2)].

See also Contract Section, *Enrollment and Disenrollment* for information regarding Prior Period Coverage for members transitioning to Title XIX/XXI from RBHA Non-Title XIX/XXI eligibility.

Reconciliation of Title XIX/XXI Behavioral Health PPC Expenses: AHCCCS shall make a payment to the Contractor for Title XIX/XXI behavioral health covered service medical expenses provided during the prior period coverage timeframe to GMH/SU and non-CMDP child members who are initially eligible as Non-Title XIX/XXI and assigned to a RBHA and who then transition to Title XIX/XXI eligibility. The payment shall include administrative funding and premium tax components. These expenses and revenue are excluded from any other reconciliation of the Contractor's service expenses.

AHCCCS will not include in the data provided to Actuaries for setting capitation rates, encounters for Title XIX services billed by an IHS or a tribally owned or operated facility. Members enrolled with the Contractor who are initially found eligible for AHCCCS through Hospital Presumptive Eligibility will receive coverage of services during the prior period through AHCCCS Fee-For-Service. The capitation rates and Contractor Specific Requirements reflect that the Contractor is not responsible for the prior period cost of medically necessary covered services to those members. In conformance with ACOM Policy 323, AHCCCS shall reconcile the Contractor's service expenses to service revenue/net capitation paid to the Contractor for dates of service during the Contract Year being reconciled for the behavioral health categories/risk groups: CMDP Child, DDD Child, DDD Adult, SMI members not receiving physical health care services under this Contract, and SMI members receiving physical health care services under this Contract Crisis Adult, and Crisis Child for purposes of limiting Contractor's profits and losses. It is the intent of AHCCCS that adjudicated encounter data will be used to determine service expenses.

➢ **Exhibit-9: Deliverables**

						DHCM Operations and Compliance Officer DHCM System of Care	
DHCM OPERATIONS	Weekly	DCS Children Standard Work – Shelter Status Report	Every Friday starting 10/09 05/2018	Scope of Services	Deliverable Template held by DHCM, System of Care		SharePoint

						DHCM Operations and Compliance Officer DHCM System of Care	
DHCM OPERATIONS	Quarterly	DCS Children Standard Work – High Number of Placements Report	12/28/18; 03/29/19; 06/28/19; 09/27/19	Scope of Services	Reporting Template as Provided by DHCM, System of Care		SharePoint

DHCM OPERATIONS	Annually Ad Hoc	System of Care Planning Status Update Report	1ˢᵗ Submission March 15	Scope of Services	Reporting Template as Provided by DHCM, System of Care	DHCM System of Care	SharePoint

DHCM OPERATIONS	Annually	System of Care Planning Deliverables	1st Submission: September 15, 2018 September 15	Scope of Services	Reporting Template as Provided by DHCM, System of Care	DHCM System of Care	SharePoint

8. Authority: AHCCCS is duly authorized to execute and administer agreements pursuant to A.R.S. §36-2903 et seq. and §36-2932 et seq. These contracts/amendments are exempt from the Procurement Code pursuant to A.R.S. §41-2501(H) (as effective on July 1, 2016).

    EXCEPT AS PROVIDED FOR HEREIN, ALL TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT NOT HERETOFORE CHANGED AND/OR AMENDED REMAIN UNCHANGED AND IN FULL EFFECT.

    IN WITNESS WHEREOF THE PARTIES HERETO SIGN THEIR NAMES IN AGREEMENT

9. SIGNATURE OF AUTHORIZED REPRESENTATIVE: **SIGNATURE ON FILE**	10. SIGNATURE OF AHCCCS CONTRACTING OFFICER: **SIGNATURE ON FILE**
TYPED NAME:	TYPED NAME:
TITLE:	TITLE:
DATE:	DATE: