




CONTRACT AMENDMENT

1. AMENDMENT #: 06	2. CONTRACT #: YH19-0001R-04	3. EFFECTIVE DATE OF AMENDMENT: OCTOBER 1, 2023	4. PROGRAM: ACC/ACC-RBHA TITLE XIX-XXI
5. CONTRACTOR NAME AND ADDRESS: Health Net Access, Inc. dba Arizona Complete Health-Complete Care Plan (AZCH-CCP) 1870 W. Rio Salado Parkway Tempe, AZ 85281			
6. PURPOSE: To amend the Directed Payments (ARPA) language found in Section D, Program Requirements, of the Contract to add the Safety Net Services Initiative for the period October 1, 2023, through September 30, 2024.			
7. THE ABOVE REFERENCED CONTRACT IS HEREBY AMENDED AS FOLLOWS: ➤ Section D, Program Requirements American Rescue Plan Act Directed Payments Safety Net Services Initiative (SNSI): AHCCCS seeks to provide enhanced support to ensure the financial viability of the State's Public Safety Net Hospital. The Safety Net Services Initiative (SNSI) is a program to preserve and promote access to medical services through a uniform percentage increase to the Contractor's rates for inpatient and outpatient services provided by the Public Safety Net Hospital. Federal regulation mandates that these payments be approved by CMS before they shall be implemented. Annually, AHCCCS will notify the Contractor when CMS approves the SNSI preprint. The rate increase is intended to supplement, not supplant, payments to the Qualified Public Safety Net Hospital. AHCCCS will compute the rate increase and will make available to the Contractor the annual interim payment amounts. Interim payments are calculated using projected experience for the Contract Year. The Contractor will be paid outside of the monthly capitation payments through a separate lump sum payment. No later than 12 months after the contract period there will be an adjustment based on a reconciliation of the interim lump sum payments compared to the actual utilization incurred during the Contract Year. AHCCCS may amend the SNSI components annually or during the Contract year and will provide guidance to the Contractor as applicable.			
8. 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 AND DATE:	10. SIGNATURE OF AHCCCS CONTRACTING OFFICER AND DATE:  Meghan LaPorte (Jan 4, 2024 10:34 MST)		
TITLE OF AUTHORIZED REPRESENTATIVE: Medicaid Plan President	TITLE OF AHCCCS CONTRACTING OFFICER: CHIEF PROCUREMENT OFFICER		