



CONTRACT AMENDMENT

1. AMENDMENT #: 33	2. CONTRACT #: YH12-0001-02	3. EFFECTIVE DATE OF AMENDMENT: January 1, 2017	4. PROGRAM DHCM – ALTCS/EPD
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5. CONTRACTOR NAME AND ADDRESS:
**UnitedHealthcare Community Plan
1 East Washington, Suite 800
Phoenix, AZ 85004**

6. PURPOSE: To amend the Contract Capitation Rates for the period January 1, 2017 – September 30, 2017

7. THE ABOVE REFERENCED CONTRACT IS HEREBY AMENDED AS FOLLOWS:
➤ Section B, Capitation Rates and Contractor Specific Requirements

County	GSA 42 (Yuma and La Paz Counties)	GSA 44 (Apache, Coconino, Mohave, Navajo Counties)	GSA 48 (Yavapai County)	GSA 50 (Pima and Santa Cruz Counties)	GSA 52 (Maricopa County)
EPD Long Term Care – Dual-Eligible	\$2,832.58	\$2,561.91	\$2,936.75	\$2,883.91	\$2,721.14
EPD Long Term Care – Non-Dual-Eligible	\$5,554.65	\$5,389.24	\$4,734.20	\$5,369.99	\$5,679.31
Acute Care Only	\$515.15	\$532.06	\$447.65	\$481.62	\$523.29
Prior Period Coverage	\$1,207.64	\$1,207.64	\$1,207.64	\$843.32	\$1,013.56

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:	10. SIGNATURE OF AHCCCS CONTRACTING OFFICER:
TYPED NAME: JESSE ELLER	TYPED NAME: MEGGAN HARLEY, CPPO, MSW
TITLE: CHIEF EXECUTIVE OFFICER	TITLE: CHIEF PROCUREMENT OFFICER
DATE:	DATE: