

CONTRACT AMENDMENT

1.	AMENDMENT #: 60	2. CONTRACT #: AHCCCS # YH6-0014 DES # E 2005004	3. EFFE	TIVE DATE OF AMENDI	MENT:	4. PROGRAM: DHCM – DES/DDD	
5. CONTRACTOR NAME AND ADDRESS: Arizona Department of Economic Security Division of Developmental Disabilities DES/DDD, Site Code 2HA1 1789 W. Jefferson Street Phoenix, AZ 85007							
6.	6. PURPOSE: To amend the Contract for the period January 1, 2017 through June 30, 2017.						
	 THE ABOVE REFERENCED CONTRACT IS HEREBY AMENDED AS FOLLOWS: Section B, Capitation Rates and Contractor Specific Requirements DES/DDD shall provide services as described in this contract. In consideration for the provision of services, DES/DDD will be paid as shown below for the period January 1, 2017 through June 30, 2017 unless otherwise modified by contract amendment. DDD Capitation Rates 						
	CYE 17						
				01-01-17 - 06-30	-17		
	DDD			\$3702.20			
	Targeted Case Management S			\$151.59			
Stated rates are payable to the Contractor until such time new rates are established as described in Section D, Paragraph 56, Compensation and Paragraph 57 Annual Submission of Budget. 7. 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. 8. SIGNATURE OF AUTHORIZED REPRESENTATIVE: 9. SIGNATURE OF AHCCCS CONTRACTING OFFICER:						
8.	SIGNATURE OF AUT	HORIZED REPRESENTATI	VE:	9. SIGNATURE OF A	AHCCCS CONTE	RACTING OFFICER:	
TYPED NAME:			TYPED NAME: MEGGAN HARLEY, CPPO, MSW				
TITLE:				TITLE: CHIEF PROCUREMENT OFFICER			
DATE:				DATE:			