

**STATE OF NORTH CAROLINA  
COUNTY OF WAKE**

**AMENDMENT 2  
Contract # DMA-MCO-2018-2**

This Agreement amends Contract # DMA-MCO-2018-2 bearing the effective date of July 1, 2017 ("Contract"), between the North Carolina Department of Health and Human Services (the "Department"), Division of Medical Assistance ("Division" or "DMA") and Cardinal Innovations Healthcare Solutions ("Contractor" or "PIHP"). This Amendment 2 shall be effective upon execution on behalf of Division and PIHP, and the commencement of the Effective Period of this Amendment 2 shall be July 1, 2018.

As provided for under the terms of the Contract, DMA and PIHP agree to amend the following Contract provisions:

1. Reference #2-Effective Period (page 2 of Contract). Add the following sentence:

By this Amendment 2, the Effective Period of the Contract shall be extended from July 1, 2018 through September 30, 2018.

2. Reference #7-Payment Provisions (page 2 of Contract). Amend the second sentence by the deletion of the following strike-through numeral and by the addition of the following underlined numeral:

The total not-to-exceed amount of this Contract is ~~\$708,773,424~~ 891,204,381.

3. Reference APPENDIX Y: MEDICAID PAYMENT AMOUNTS. Replace with the attached Appendix Y: Medicaid Payment Amounts. Add the following language:

Appendix Y Capitation Rates shall apply under the Contract for the period July 1, 2018 – September 30, 2018, and Appendix Y is fully incorporated in the Contract by this reference.

**Other Requirements:**

All other terms and conditions as set forth in the original Contract document shall remain in effect for the duration of this Agreement. Signatures follow on next page

In Witness Whereof, Division and Contractor have executed this contract in duplicate originals, with one original being retained by each party.

**Cardinal Innovations Healthcare Solutions**


  
\_\_\_\_\_  
Signature

6/29/18  
\_\_\_\_\_  
Date

CHARLES G. SUTTEN, III  
\_\_\_\_\_  
Printed Name

CEO  
\_\_\_\_\_  
Title

**ATTEST**

  
\_\_\_\_\_  
Signature

6/29/18  
\_\_\_\_\_  
Date

Stephen D. Martin  
\_\_\_\_\_  
Printed Name

Deputy General Counsel  
\_\_\_\_\_  
Title

**CORPORATE SEAL**

**Division of Medical Assistance / North Carolina Department of Health and Human Services**

  
\_\_\_\_\_  
Signature  
**Dave Richard,**  
Deputy Secretary for Medical Assistance

7/2/2018  
\_\_\_\_\_  
Date

**APPENDIX Y: MEDICAID PAYMENT AMOUNTS**

Below are the rates for Cardinal Innovations Healthcare Solutions  
July 1, 2018 - June 30, 2019

**Cardinal Innovations Medicaid Capitation Rates**

**CAPITATION RATES (State Plan Services)**

AFDC	3+	\$26.80
Foster Children	3+	\$573.40
Aged	65+	\$77.17
Blind/Disabled	3-20	\$276.38
Blind/Disabled	21+	\$262.67
Innovations	All Ages	\$6,878.19
Subtotal (w/o Innovations)	All Ages	\$77.74
<b>Total (w/ Innovations)</b>	<b>All Ages</b>	<b>\$121.33</b>

**CAPITATION RATES (1915(b)(3) Services)**

AFDC	3+	\$3.50
Foster Children	3+	\$11.83
Aged	65+	\$5.49
Blind/Disabled	3-20	\$26.04
Blind/Disabled	21+	\$45.84
Innovations	All Ages	\$0.00
Subtotal (w/o Innovations)	All Ages	\$10.40
<b>Total (w/ Innovations)</b>	<b>All Ages</b>	<b>\$10.33</b>

**CAPITATION RATES (TOTAL RATE)**

AFDC	3+	\$30.30
Foster Children	3+	\$585.33
Aged	65+	\$82.66
Blind/Disabled	3-20	\$301.40
Blind/Disabled	21+	\$308.31
Innovations	All Ages	\$6,878.19
Subtotal (w/o Innovations)	All Ages	\$85.14
<b>Total (w/ Innovations)</b>	<b>All Ages</b>	<b>\$131.66</b>

Cardinal Innovations Representative \_\_\_\_\_ Approved/Accepted \_\_\_\_\_

DHHS Representative \_\_\_\_\_ Approved/Accepted \_\_\_\_\_

CMS Representative \_\_\_\_\_ Approved/Accepted \_\_\_\_\_

6-11-18

6-28-18

Date \_\_\_\_\_