STATE OF NORTH CAROLINA COUNTY OF WAKE

AMENDMENT 3 Contract # DMA-MCO-2018-1

This Amendment 3 amends Contract # DMA-MCO-2018-1 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 Alliance Behavioral Healthcare ("Contractor" or "PIHP").

As of August 1, 2018, and pursuant to State law, all functions, powers, duties, obligations and services vested in DMA were vested in the Division of Health Benefits ("Division" or "DHB"). The Parties agree that the nomenclature change from DMA to DHB does not affect the legal obligations of either party that exist under the Contract, this Amendment 3 and any future amendments.

This Amendment 3 shall be legally binding upon execution on behalf of DHB and PIHP, and the commencement of the Effective Period of this Amendment 3 shall be October 1, 2018.

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

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

This Amendment 3 extends the Contract through October 12, 2018 or the effective date of Contract amendment 4, whichever is later.

2. Reference #7-Payment Provisions. Delete the second sentence in its entirety and replace with the following:

The total not-to-exceed amount of this Contract is \$820,589,066.

3. Reference APPENDIX Y: MEDICAID PAYMENT AMOUNTS. Appendix Y, as detailed below, shall apply for the period of this Amendment 3 so long as Contract amendment 4 begins on or before June 30, 2019. Appendix Y is incorporated herein by reference.

Other Requirements: All other terms and conditions, unless expressly amended here shall remain in full force and effect.

Counterparts: This Amendment 3 may be executed in two or more counterparts, each and all of which shall be deemed an original and all of which together shall constitute but one and the same instrument. Any signature page transmitted by electronic mail in portable document format will have the same legal effect as an original executed signature page.

IN WITNESS WHEREOF, the Parties have executed this Amendment 3 in their official capacities to be effective on October 1, 2018.

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Printed Name	Title	P. J. S.
ATTEST		
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Signature	Date	er e
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Printed Name	Title	
CORPORATE SEAL		
North Carolina Department of Health and Hu	ıman Services	
	9/28	/18
Dave Richard, / Deputy Secretary NC Department of Health and Human Services, Division of Health Benefits	Date	

NCDHHS ACT2007 (Amendment Template) (Rev.11.01.15) Contract #DMA-MCO-2018-1 A3

APPENDIX Y: MEDICAID PAYMENT AMOUNTS

Helow are the rates for Alliance Behavioral Health Care July 1, 2018 - June 30, 2019

Alliance Behaviorn Health Care Modicaid Capitation Rates

TCY 1 FO (2)	into Plan Services)
Ages	SPY 2018 Contract Rate
3+	\$30.91
3+	\$817.90
65+	386.94
3-20	\$357.06
21+	\$324.84
All Ages	\$5,087,86
Ali Ages	\$105.14
All Ages	\$143.28
	Ages 3+ 34 65+ 3-20 21+ All Ages All Ages

TBI	2	2+	\$5,728.69	***

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

Agos SFY 2018 Contract

Raling Group	Agoş	SFY 2019 Contract Rate
AFDC	34	\$1.87
Foster Children	3+	\$2.81
Aged	65+	\$1,78
Blind/Olambled .	3-20	39.95
Blind/Disabled	21+	\$18,25
Innovations ·	aagA IIA	\$0.16
Subtotal (wo innovations)	All Ages	\$4;41
Total (w/ innovations)	All Ages	\$4.37

1:	 		
(TBI	 22+	\$0.00	

CAPITATION RATES (TOTAL RATE)

Ralling Group	Аров	9FY 2019 Contract Rate
AFDC	3+	\$40.78
Foster Children	31	\$820.80
Aged	65+	\$90,72
Blind/Disebled	3-20	\$367.00
Blind/Disebled	21+	\$342.89
encllsvenni	All Ages	\$6,088.01
Sublotal (w/o Innovations)	All Ages	\$109.55
Total (w/ limovations)	All Ages	

	<u>1184</u>	22+	\$5,728.69,	J
Allianço Representativo		Approved/Accep		Date <u>5-7-18</u>
DHHS Rèpresentativa		Арргочий/Ассор(-	Dato <u>6-28-18</u>
CMS Reuresentative		Annsovol/Accouléd		Mata