

**AMENDMENT NO. 1 TO
HEALTH PLAN-PROVIDER AGREEMENT (RESOLUTION NUMBER 072601)**

This Amendment to the Agreement is made this ____ day of _____, 2014, by and between San Mateo Health Commission dba Health Plan of San Mateo, a public entity hereinafter referred to as "PLAN", and the County of San Mateo, San Mateo County Health System, hereinafter referred to as "PROVIDER".

WHEREAS, the parties entered into an Agreement dated June 18, 2013, as authorized by San Mateo County Board of Supervisors Resolution Number 072601, to provide PROVIDER with supplemental revenue with respect to services provided for Medi-Cal members of PLAN as a result of intergovernmental transfers ("IGTs") from the County of San Mateo to the California Department of Health Care Services ("State DHCS") and to address related issues for the term of July 1, 2012, through December 31, 2013; and

WHEREAS, the parties now wish to amend the Agreement, extending the term through June 15, 2015, and making changes to the payment provisions of the Agreement.

NOW, THEREFORE, IT IS HEREBY AGREED BY THE PARTIES HERETO AS FOLLOWS:

1. The first paragraph of Section A of the Agreement, **Payment**, is hereby deleted and replaced as follows:

A. Payment

Should PLAN receive base rate Medi-Cal managed care capitation rate increases from State DHCS where the nonfederal share is funded by the County of San Mateo, PLAN shall pay to PROVIDER the increase in total compensation received by the PLAN as a result of the intergovernmental transfers from County of San Mateo for FY 12-13 ("IGT SUPPLEMENTAL PAYMENTS"), which is no more than \$40,835,586, in accordance with Section E below.

2. Section G of the Agreement, **Term**, is hereby deleted and replaced as follows:

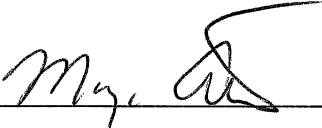
G. Term

The term of this Agreement shall commence on July 1, 2012, and shall terminate on June 15, 2015.

3. All other terms and conditions of the Agreement dated June 18, 2013, between PROVIDER and PLAN shall remain in full force and effect.

SIGNATURES

HEALTH PLAN: San Mateo Health Commission Date: 6/30/2014

By: CEO, 

PROVIDER: County of San Mateo Date: _____

By: President, Board of Supervisors _____

Attest:

By _____

Clerk, Board of Supervisors