

**Amendment to the Group Agreement
Between
San Mateo Community Health Authority
And
San Mateo County Public Authority**

This Amendment to the Group Agreement is made this ____ day of _____ 2018, by and between the San Mateo Community Health Authority (Authority), dba Health Plan of San Mateo (PLAN) and San Mateo County Public Authority (Contract Holder)

WHEREAS, the Parties entered into that certain Group Agreement (Agreement), effective July 1, 2015.

WHEREAS, the Parties last amended the Agreement on November 13, 2018.

WHEREAS, the Parties desire to amend certain terms of the Agreement to clarify and memorialize the current business arrangement of the Parties.

NOW THEREFORE, in consideration of the promises and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the Parties here agree as follows:

Section 3.1. Premium Change

In accordance with Section 3.1.1 of the Group Agreement, PLAN is giving thirty-one (31) days written notice to change premium rate.

The Premium Schedule in Exhibit B will be replaced in its entirety and amended as follows:

Premium effective January 1, 2019.....\$321.50 per member per month

Section 3.2. Premium Payment will be replaced in its entirety and amended as follows:

Premiums are payable to the PLAN at the PLAN's office by electronic file transfer via ACH, wire transfer or check via mail addressed to: Finance Department, Health Plan of San Mateo, 801 Gateway Blvd, Ste. 100, South San Francisco, CA 94080. In no event shall the County's total fiscal obligation under this agreement exceed SIXTEEN MILLION FIVE HUNDRED THOUSAND DOLLARS (\$16,500,000).

Section 4.1 Term

The paragraph that reads:

The term of the Agreement shall be July 1, 2015 through December 31, 2018.

Shall now read:

The term of the Agreement shall be July 1, 2015 through December 31, 2019.

Effective Date

This amendment shall be effective January 1, 2019.

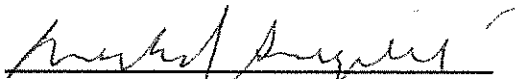
Incorporation of Agreement Rights, Duties and Obligations

All other terms and provisions of said Agreement shall remain in full force and effect so that all rights, duties and obligations, and liabilities of the parties hereto otherwise remain unchanged.

San Mateo County Public Authority


San Mateo Community Health Authority

Name



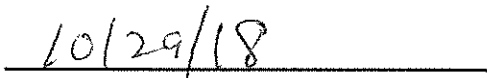
Michael Smigielski

Title



Title

Date



Date