

Contract Amendment for Foster Care Medical Home Services

This agreement entered into for the period of January 1, 2016 through December 31, 2017 between the State of Wisconsin acting by or through the Department of Health Services, hereinafter referred to as the “Department” and Children’s Hospital and Health System, a Prepaid Inpatient Health Plan with a certificate of authority to do business in Wisconsin for the Foster Care Medical Home Program hereinafter referred to as the “PIHP”, is hereby amended as follows:

1. Article XI, Section I – Contract Specified Reports and Due Dates

Remove the following reporting requirement:

PPACA Primary Care Monthly Report	This report is used to reconcile the distribution of funds for PPACA primary care services. Within 45 calendar days of receipt of payment from the Department, the HMO must submit the report to the Department. with the following title: PPACA_TPIC_YYYYMMDD.txt. Submit to BFM on the SFTP site.	Article V, M
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2. Article XIII, Section B, 5.b – Notify the Department of a Termination or Modification that Involves Reducing Access to Care

Amend third paragraph to read:

The PIHP must submit an updated provider and facility file when there has been a significant change with respect to network adequacy, as defined by the Department, in the PIHP’s operations that would affect adequate capacity and services.

3. Article XV, Section D – PPACA Primary Care Rate Increase

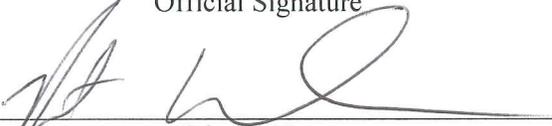
Remove all language contained within this section.

4. Addendum I –Autism Treatment Services – Standard Member Handbook Language

Amend instructions for finding a Medicaid-enrolled provider to read:

1. Go to www.forwardhealth.wi.gov.
2. Click on the Members link or icon in the middle section of the page.
3. Scroll down and click on the Resources tab.
4. Click on the Find a Provider link.
5. Under Programs, select BadgerCare Plus.

All terms and conditions of the January 1, 2016 through December 31, 2017 contract and any prior amendments that are not affected by this amendment shall remain in full force and effect.

Children's Hospital and Health System	Department of Health Services
Official Signature 	Official Signature 
Printed Name Robert Duncan	Printed Name Kevin Moore
Title Executive Vice President	Title Medicaid Director