

**AMENDMENT
ANTHEM BLUE CROSS
INTERGOVERNMENTAL (IGT) HEALTH PLAN-PROVIDER AGREEMENT**

This Amendment to the Intergovernmental Health Plan Provider Agreement is effective January 1, 2021 (“Effective Date”) between Blue Cross of California dba Anthem Blue Cross, a California corporation hereinafter referred to as "PLAN", and the City of Coalinga, acting through its Fire Department, hereinafter referred to as "PROVIDER".

RECITALS

- A. ANTHEM and PROVIDER have previously entered into a Intergovernmental Health Plan Provider Agreement ("Agreement") whereby PROVIDER is designated as a PROVIDER. The Agreement, as amended, remains in effect.
- B. Pursuant to Section N of the Agreement, the parties now desire to amend the Agreement to provide for the following changes to the Agreement.

THEREFORE, IT IS AGREED:

- I. Section A is deleted in its entirety and replaced with the following.

- A. **Payment**

- Should PLAN receive any Medi-Cal managed care capitation rate increases from State DHCS where the nonfederal share is funded by GOVERNMENTAL FUNDING ENTITY specifically pursuant to the provisions of the Intergovernmental Agreement Regarding Transfer of Public Funds #21-10178, (“Intergovernmental Agreement”) effective for the periods January 1, 2021 through December 31, 2021 for Intergovernmental Transfer Medi-Cal Managed Care Rate Range Increases (“IGT MMCRRIs”), PLAN shall pay to PROVIDER the amount of the IGT MMCRRIs received from State DHCS, in accordance with paragraph 1.E below regarding the form and timing of Local Medi-Cal Managed Care Rate Range (“LMMCRR”) IGT Payments. LMMCRR IGT Payments paid to PROVIDER shall not replace or supplant any other amounts paid or payable to PROVIDER by PLAN.

- II. Section B is deleted in its entirety and replaced with the following.

- B. **Health Plan Retention**

- 1) The PLAN shall retain a two and a half percent (2.5%) administrative fee based on the total amount of the IGT MMCRRIs received from DHCS for PLAN’s cost to administer this program. Each provider’s share of the 2.5% fee shall be calculated based on that provider’s proportionate share of the LMMCRR IGT payment made by Plan in Fresno County.
 - 2) PLAN will not retain any other portion of the IGT MMCRRIs received from the State DHCS other than those mentioned above.

III. Section N is deleted in its entirety and replaced with the following.

N. Term

The term of this Agreement shall commence on January 1, 2021 and shall terminate on December 31, 2024.

This Agreement may be amended in writing by the PROVIDER and the PLAN as mutually agreed. Each time that the parties agree to participate in a Voluntary Rate Range Intergovernmental Agreement with State DHCS, the parties to this Agreement shall amend it in writing in order to update the IGT Rating Period, the term, the contract number for the “Intergovernmental Agreement Regarding Transfer of Public Funds” shown in Section A and to make any other necessary changes.

Upon acceptance by the parties, this AMENDMENT, on the first date specified above, will become a part of the AGREEMENT, and all provisions of the AGREEMENT not specifically inconsistent herewith will remain in full force and effect.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed personally or by their duly authorized officers or agents.

SIGNATURES

ANTHEM BLUE CROSS

PROVIDER

Signature: _____

Signature: _____

Name: John Pickett

Name: Greg DuPuis

Title: Regional Vice President, Provider Solutions

Title: Fire Chief, City of Coalinga

Date: _____

Date: _____