

AMENDMENT TO
AGREEMENT BETWEEN STATE OF LOUISIANA
DEPARTMENT OF HEALTH AND HOSPITALS

Amendment #: 1

CFMS #: 702598

DOA #: 305-100555

DHH #: 057414

Original Contract Amt: \$ 6,106,501.00

Original Contract Begin Date: 05-16-2011

Original Contract End Date: 05-15-2014

Medical Vendor Administration
Bureau of Health Services Financing
AND
Mercer Health & Benefits, LLC
Contractor Name

AMENDMENT PROVISIONS

Change Contract From:

Maximum Amount: \$ 6,106,501.00

CF-1 Block 13 Maximum Contract Amount \$6,106,501 FY11-\$250,000 FY12 - \$2,035,000 FY13-\$2,035,000 FY14 - \$1,786,501

Change To:

Maximum Amount: \$ 7,226,501.00

CF-1 Block 13 Maximum Contract Amount ~~\$6,106,501~~ FY11-\$250,000 FY12 - \$2,035,000 FY13-\$2,035,000 FY14 - ~~\$1,786,501~~ ~~\$1,236,501~~

Justification:

With 19 months of operational experience, Bayou Health's actuarial requirements are clearer. This contract was executed eight months prior to program implementation. At that time, DHH budgeted for capitated rate setting and shared savings determination generally on an annual basis. It understood that rate certification is required when program requirements change, but it did not anticipate four rate certifications in the first contract year due to budget cuts. Neither did it anticipate interim and final savings determinations required by CMS post-implementation, nor in-depth work with health plan actuaries needed for transparency and accuracy. These additional costs are reflected here.

his Amendment Becomes Effective: 10-01-2013

his amendment contains or has attached hereto all revised terms and conditions agreed upon by contracting parties.

IN WITNESS THEREOF, this amendment is signed and entered into on the date indicated below.

CONTRACTOR

Mercer Health & Benefits, LLC

Robert C. Butler 11/13/13
CONTRACTOR SIGNATURE DATE

PRINT NAME ROBERT C BUTLER

CONTRACTOR TITLE PRINCIPAL

**STATE OF LOUISIANA
DEPARTMENT OF HEALTH AND HOSPITALS**

Secretary, Department of Health and Hospital or Designee

J. Ruth Kennedy 11/14/14
SIGNATURE DATE

NAME J. Ruth Kennedy

TITLE Medicaid Director

OFFICE Bureau of Health Services Financing

PROGRAM SIGNATURE DATE

NAME



CERTIFICATE OF THE ASSISTANT SECRETARY
OF
MERCER HEALTH & BENEFITS LLC

I, Margaret M. O'Brien, Assistant Secretary of Mercer Health & Benefits LLC, a Delaware limited liability company (the "LLC"), do hereby certify that at a duly authorized meeting of the Board of Directors of the LLC, dated February 11, 2010, the Board adopted procedures authorizing any Principal, Partner or Senior Partner of the LLC, including the list of individuals attached hereto, to execute contracts, agreements, applications and other instruments on behalf of the LLC. This resolution has neither been amended nor rescinded and is in full force and effect as of the date hereof.

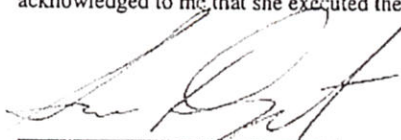
IN WITNESS WHEREOF, I hereunto set my hand and affix the seal of the LLC this 12th day of April 2012


Margaret M. O'Brien
Assistant Secretary

State of New York)

County of New York)

On this 12th day of April 2012, before me personally came Margaret M. O'Brien to me known, who acknowledged to me that she executed the foregoing instrument.


Notary Public

Sandra Davenport
Notary Public - State of New York
No. 01DA6139698
Qualified in Nassau County
Certified in New York County
My Commission Expires January 17, 2014



AUTHORIZED SIGNATORIES

Name	Title
Alicia Smith	Partner
Angela WasDyke	Partner
Branch McNeal	Senior Partner
David Parrella	Principal
Deidra Abbott	Principal
Denise Podeschi	Partner
Ed Fischer	Principal
Frederick Gibision	Partner
Jared Nason	Partner
Katie Falls	Principal
Marcia Morgan	Partner
Mike Nordstrom	Partner
Nicholas (Nick) Simmons	Principal
Robert Butler	Principal
Ryan Johnson	Principal
Sam Espinosa	Partner
Stephanie Davis	Senior Partner
Sundee Easter	Principal
Thomas Steiner	Partner