

STATE OF MICHIGAN PROCUREMENT

Department of Health and Human Services

235 South Grand Avenue, Lansing, MI 48913 P.O. Box 30037, Lansing, MI 48909

CONTRACT CHANGE NOTICE

Change Notice Number <u>01</u>
to
Contract Number <u>MA 20000002098</u>

	Mid-State Health Network
TRACTOR	530 West Ionia Street, Suite F
	Lansing, MI 48933
	Joseph Sedlock
CONT	517-253-7525
Ö	Joseph.sedlock@midstatehealthnetwork.org
	CV0054910

STATE	Program Manager	Jeff Wieferich	MDHHS			
		517-335-0499				
		wieferichj@michigan.gov				
	Contract Administrator	Lance Kingsbury	MDHHS			
		517-335-8170				
		kingsburyl@michigan.gov				
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CONTRACT SUMMARY												
DESCRIPTION: Prepaid Inpatient Health Plan (PIHP)												
		PIRATION DATE	INITIAL AVAILAR OPTIONS	BLE	EXPIRATION DATE BEFORE CHANGE(S) NOTED BELOW							
October 1, 2020 Septem		ber 30, 2021	Seven, one-ye	ear	September 30, 2021							
PA	DELIVERY TIMEFRAME											
	As Needed											
ALTERNATE PAYMENT			EXTENDED PURCHASING									
☐ P-card ☐ Payment Request (PRC			c) 🗆 Other	r	☐ Yes ⊠ No							
MINIMUM DELIVERY REQUIREMENTS												
N/A												
DESCRIPTION OF CHANGE NOTICE												
OPTION	LENGTH OF OPTION	ON E	EXTENSION		ENGTH OF XTENSION	REVISED EXP. DATE						
CURRENT V	/ALUE	VALUE OF CHANGE NOTICE		ESTIMATED AGGREGATE CONTRACT VALUE								
\$580,891,2	282.00	\$0.00		\$580,891,282.00								
DESCRIPTION: Effective upon MDHHS signature, the following amendment is incorporated into this Contract per the												

Section 8. Payment Terms; B. State Funding; 9. Temporary Hourly Wage Increase for Direct Care Workers in Response to COVID-19 Pandemic and State of Emergency:

The Contractor must implement the temporary hourly wage increase, referred to as Premium Pay, provisions of MSA L-20-67 https://www.michigan.gov/documents/mdhhs/L_20-67-Premium_Pay_706313_7.pdf dated October 28, 2020. BHDDA published "Additional Guidance on Premium Pay Increase" May 22, 2020 which can be found at the following link: https://www.michigan.gov/mdhhs/0,5885,7-339-71545-524138--.00.html.

MDHHS will provide increased capitation rates or provide sufficient funding if capitation rates cannot be appropriately adjusted due to COVID-19 specific federal regulations during the Premium Pay period to cover the

following language:

actual cost of mandatory premium pay increases. The Contractor must disperse these funds to eligible contracted providers employing individuals that qualify for the increase

All other terms, conditions, specifications and pricing remain the same.

FOR THE CONTRACTOR: Mid-State Health Network Company Name **Authorized Agent Signature** Authorized Agent (Print or Type) Date FOR THE STATE: Signature Christine H. Sanches, Director Michigan Department of Health and Human Services; Bureau of Grants and Purchasing Agency

Date