

CONTRACT AMENDMENT

 AMENDMENT #: 	2. CONTRACT #:	3. EFFECTIVE DATE OF AMENDMENT:	4. PROGRAM:
			ACC-RBHA
5	YH22-0061R-02	OCTOBER 1, 2025	NON-TITLE
			XIX/XXI
5. CONTRACTOR/PROVIDE	R NAME AND ADDRESS:		·
	Arizona Comple	te Health-Complete Care Plan (AZCH-CCP)	
	1850 \	N. Rio Salado Parkway, Suite 211	
		Tempe, AZ 85281	
6. PURPOSE: To amen	d the Contract: Section D,	Program Requirements, and Section F, Atta	chments, Attachment F3,

Contractor Chart of Deliverables, for the period October 1, 2025 through September 30, 2026 and as stated below.

7. THE ABOVE REFERENCED CONTRACT IS HEREBY AMENDED AS FOLLOWS:

Section D, Program Requirements

Crisis, SMI SED, and SUBG Non-Title XIX/XXI Drug Lists: The Contractor's subcontract with the PBM shall require the PBM to reimburse prescription claims at the same reimbursement rates that are utilized for the Title XIX population and as required in number 4 and 5 below. The subcontract shall also include the following terms for the Crisis, SMI Non-Title XIX/XXI, SED, and SUBG Drug Lists:

- The Contractor shall reimburse the PBM the exact dollar amount of the actual payments made to
 pharmacies inclusive of the ingredient costs and the dispensing fees for prescription claims.
 The Contractor shall submit encounters to AHCCCS for prescription drug/device claims that are
 the exact dollar amount of the actual payments made to the pharmacies inclusive of ingredient
 costs and the dispensing fees for prescription claims.
- The Contractor shall ensure that the PBM does not implement programs to only allow for a subset of the retail network pharmacies to fill prescription medications that are normally available across all retail pharmacies.

In accordance with the CMS Medicaid Outpatient Drug Rule and 42 USC 1396a(a)(30)(A) or Section 1902(a)(30)(A) of the Social Security Act (SSA): The Contractor's PBM shall reimburse pharmacies, at a minimum, the actual acquisition cost of medications dispensed to Non-Title XIX/XXI, or other programs funded by AHCCCS that have a pharmacy benefit plus a professional fee. The professional fee encompasses the cost associated with a pharmacist's time and expertise in dispensing a prescription drug, above and beyond the cost of the medication itself. This fee covers the pharmacist's services, such as reviewing the prescription, providing patient counseling, ensuring proper drug utilization, and physically dispensing the medication. AHCCCS will provide further guidance for 340B entity pharmacy requirements. At a future date, AHCCCS will issue a State Maximum Allowable Cost List to be utilized by each Contractor's PBM to reimburse generic drugs.



Section F, Attachments

- o Attachment F3, Contractor Chart of Deliverables
 - Added Deliverable:
 - Area: MM
 - Timeframe: Ad Hoc
 - Report: Changes to Interventions and Parameters to Contractor's Exclusive Pharmacy and/or Single Prescriber Process
 - When due: 30 days prior to implementationSection: Section D, Medical Management
 - Reference/Policy: AMPM Policy 1024
 - Reporting Form: MCO Developed Submission
 - Submitted Via: SharePoint
 - Revised Name of Deliverable: Federal MHBG Reports to Federal MHBG Activities and Expenditures Reports
 - Revised Name of Deliverable: Federal SUBG Reports to Federal SUBG Activities and Expenditures Reports

Electronic Submission: An electronic or portable document file (PDF) copy of this amendment shall serve as the original. 8. EXCEPT AS PROVIDED FOR HEREIN, ALL TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT, NOT HERETOFORE CHANGED AND/OR AMENDED REMAIN UNCHANGED AND IN FULL EFFECT. IN WITNESS WHEREOF THE PARTIES HERETO SIGN THEIR NAMES IN AGREEMENT.				
9. NAME OF CONTRACTOR/PROVIDER:	10. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM			
SIGNATURE OF AUTHORIZED INDIVIDUAL:	SIGNATURE:DocuSigned by:			
	Malor			
TYPED NAME:	TYPED NAME:			
James V Stover	Meggan LaPorte			
TITLE:	TITLE:			
Medicaid Plan President	Chief Procurement Officer			
DATE:	DATE: 9/3/2025			
9/10/2025				