

CONTRACT AMENDMENT

1. AMENDMENT #:	2. CONTRACT #:	3. EFFECTIVE DATE OF AMENDMENT:	4. PROGRAM:	
25	AHCCCS: YH15-0001 DCS:ADCS15-074550	APRIL 1, 2025	DCS/CHP	
5. CONTRACTOR/PROVIDER NAME AND ADDRESS:				
Department of Child Safety (DCS) Comprehensive Health Plan (CHP) PO Box 29202, Site Code 942C Phoenix, Arizona 85038-9202				
6. PURPOSE: To increase the capitation rate for the period of April 1, 2025, through September 30, 2025 and as indicated below:				

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

> Section B, Capitation Rates and Contractor Specific Requirements

Capitation Rates:

CAPITATION RATES
APRIL 1, 2025 – SEPTEMBER 30, 2025
\$\frac{1,630.97}{1,716.13}\$

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.

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9. NAME OF CONTRACTOR/PROVIDER: ARIZONA DEPARTMENT OF CHILD SAFETY	10. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM			
SIGNATURE OF AUTHORIZED INDIVIDUAL:	SIGNATURE:DocuSigned by:			
amanda torres	Malon			
TYPED NAME:	TYPED NAME: Meggan LaPorte			
Amanda Torres, MSW				
TITLE: Assistant Director Support Services	TITLE: Chief Procurement Officer			
DATE: 4/11/2025 12:18 PM MST	DATE: 4/3/2025			