This Amendment, effective January 1, 2017, except as specified below, is by and between the State of Minnesota, acting through its Department of Human Services (STATE) and Itasca Medical Care, Managed Care Organization (MCO), identified as Contract No. 111338 for Minnesota Senior Health Options and Minnesota Senior Care Plus, in furtherance of the Minnesota Medical Assistance Program for the provision of prepaid medical and remedial services pursuant to Title XIX of the Social Security Act, 42 CFR Parts 434 and 438, Minnesota Statutes, §§ 256B.69.

WHEREAS, a benefit has been added; and

WHEREAS, the STATE and MCO have agreed to amend the 2017 Minnesota Department of Human Services Contract No. 111338 to include these changes:

NOW, THEREFORE, the parties agree that the contract identified above shall be modified as:

**CONTRACT REVISION 1.**

A new definition is added as section 2.28, and subsequent sections are renumbered accordingly:

**2.28 Certified Community Behavioral Health Clinics (CCBHC)** means a two year demonstration from July 1, 2017 to June 30, 2019 enacted through the Excellence in Mental Health Act portion of Public Law Number 113-93, § 223. A CCBHC is a Minnesota Health Care Programs-enrolled Provider certified by the STATE to provide services in accordance with Minnesota Statutes, § 245.735 and PL 113-93, § 223. CCBHCs provide an integrated behavioral and physical health delivery model. Services provided under this model include but are not limited to primary care screening and monitoring; outpatient mental health and substance use disorder services, including screening, assessment and diagnosis (including risk management); crisis mental health services (including 24-hour mobile crisis teams), crisis intervention services and crisis stabilization; patient-centered treatment planning, targeted case management, peer and family support, services for members of the armed forces and veterans; psychiatric rehabilitation services, including adult rehabilitative mental health services (ARMHS) and children’s therapeutic services and supports (CTSS). CCBHC services are available to Enrollees who have been determined eligible for services by the...
<table>
<thead>
<tr>
<th><strong>CONTRACT REVISION</strong></th>
<th><strong>The following sections are added to § 6.1.18 Health Homes:</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>2.</td>
<td>(C) Certified Community Behavioral Health Clinics (CCBHC). CCBHC services consistent with Minnesota Statutes, Statutes § 245.735 and Public Law Number 113-93, § 223 are covered. CCBHCs provide a set of services designed to integrate primary care, behavioral health, and substance use disorder services (SUDs), social/community services for children with emotional disturbance (including SED) and services for adults with SMI (including SPMI).</td>
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<tr>
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<td>(1) Authorization for CCBHC services is determined by a Mental Health Professional who is employed or under contract with a STATE-certified CCBHC, using a form and format determined by the STATE. Assessment shall be in accordance with Minnesota Statutes, § 245.735 and Public Law Number 113-93, section 223.</td>
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<tr>
<td></td>
<td>(2) In accordance with Minnesota Statutes, § 245.735 and PL 113-93, § 223, the STATE has established an initial and recertification process to ensure that Providers comply with all system, clinical infrastructure, and billing and service delivery requirements established in the CCBHC certification criteria.</td>
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<td>(3) Expanded Covered Services.</td>
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<td></td>
<td>(a) The MCO shall cover the following services as expanded services for Enrollees who would not be eligible to receive the services other than under the CCBHC program, at the rates identified for each service below.</td>
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<td>(b) Clinical care consultation expanded to cover adults at the same rate that is applicable to children;</td>
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<td>(c) Family psychoeducation expanded to cover adults at same rate that is applicable to children;</td>
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<td></td>
<td>(d) Mental health certified peer supports expanded beyond ARMHS and CTSS to cover other individuals receiving CCBHC services;</td>
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<td>(e) Chemical dependency certified peer supports expanded to cover eligible Enrollees at the same rate</td>
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</table>
that is applicable to Level I mental health peer supports;

(f) The MCO shall cover functional assessment and treatment plan development for all Enrollees receiving CCBHC services, beyond the scope of ARMHS and CTSS.

(g) The MCO shall cover CCBHC initial evaluations as required by CCBHC criteria, paid at the same rate that is applicable to brief diagnostic assessments.

(h) Ambulatory withdrawal management is not covered under this Contract.

**Execution in Counterparts.** Each party agrees that this Amendment may be executed in two or more counterparts, all of which shall be considered one and the same agreement, and which shall become effective if and when both counterparts have been signed and dated by each of the parties. It is understood that both parties need not sign the same counterpart.

EXCEPT AS AMENDED HEREIN, THE TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT REMAIN IN FULL FORCE AND EFFECT.

*Signature page follows*
IN WITNESS WHEREOF, the parties hereto have executed this contract amendment. This contract amendment is hereby accepted and considered binding in accordance with the terms outlined in the preceding statements.

APPROVED:

<table>
<thead>
<tr>
<th>STATE OF MINNESOTA DEPARTMENT OF HUMAN SERVICES</th>
<th>ITASCA MEDICAL CARE</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Two corporate officers must execute)</td>
<td></td>
</tr>
</tbody>
</table>

By:  

Name: Nathan Moracco  
Print Name:  

Title: Assistant Commissioner  
Title:  

Date: 6/29/17  
Date:  
and  

By:  

Print Name:  
Title:  
Date:  

Contract # 111338  
SWIFT #0000197296
IN WITNESS WHEREOF, the parties hereto have executed this contract amendment. This contract amendment is hereby accepted and considered binding in accordance with the terms outlined in the preceding statements.

APPROVED:

STATE OF MINNESOTA
DEPARTMENT OF HUMAN SERVICES

By:
Name: Nathan Moracco
Title: Assistant Commissioner
Date:

ITASCA MEDICAL CARE

(Two corporate officers must execute)

By: 
Print Name: Sarah Duell
Title: CEO
Date: 10/27/17

By: 
Print Name: Terry Snyder
Title: Board Chair
Date: 10/27/17

Contract # 111338
SWIFT #0000197296