

UnitedHealthcare Insurance Company

Amendment No. 1

The July 1, 2020 Agreement between the State of Rhode Island Executive Office of Health and Human Services (“EOHHS”) and UnitedHealthcare Insurance Company (the “Contractor”), is hereby amended effective July 1, 2020.

3.1 General Provisions, Section 3.4 Payment, C. Liability for Payment

1. Revision made to Section 3.4, ‘Liability for Payment,’ by **ADDING** the following language to section:

Should any part of the scope of work under this Agreement relate to a State program that is no longer authorized by law (e.g., which has been vacated by a court of law, or for which CMS has withdrawn federal authority, or which is the subject of a legislative repeal), Contractor must do no work on that part after the effective date of the loss of program authority. EOHHS must adjust capitation rates to remove costs that are specific to any program or activity that is no longer authorized by law. If Contractor works on a program or activity no longer authorized by law after the date the legal authority for the work ends, Contractor will not be paid for that work. If the state paid the Contractor in advance to work on a no-longer-authorized program or activity and under the terms of this contract the work was to be performed after the date the legal authority ended, the payment for that work should be returned to EOHHS. However, if Contractor worked on a program or activity prior to the date legal authority ended for that program or activity, and EOHHS included the cost of performing that work in its payments to Contractor, Contractor may keep the payment for that work even if the payment was made after the date the program or activity lost legal authority.

ATTACHMENT E: CONTRACTOR’S CAPITATION RATES SFY 2021

2. This Attachment is amended by **DELETING** the Attachment in its entirety and **REPLACING** it with a new Attachment E dated September 11, 2020.

ATTACHMENT F: RATE-SETTING PROCESS

3. This Attachment is amended by **DELETING** the Attachment in its entirety and **REPLACING** it with a new Attachment F dated September 11, 2020.

IN WITNESS HERETO, the parties have caused this Amendment to be executed under Seal by their duly authorized officers or representatives as of the day and year stated below:

STATE OF RHODE ISLAND:

**UNITEDHEALTHCARE
INSURANCE COMPANY:**

Benjamin L. Shaffer
SIGNATURE

DocuSigned by:
James F. Bedard
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SIGNATURE

BENJAMIN L. SHAFFER
NAME

JAMES F. BEDARD
NAME

MEDICAID DIRECTOR
TITLE

CHIEF FINANCIAL OFFICER
TITLE

10/15/2020
DATE

10/15/2020
DATE

ATTACHMENT E:
CONTRACTOR'S CAPITATION RATES SYF 2021

State of Rhode Island
 Executive Office of Health and Human Services
 State Fiscal Year 2021 Dental Capitation Rate Development
 Rite Smiles Dental Program
 Rate Change Summary

	Projected Exposure	Base Benefit Expense	New Benefit Add On	Base Benefit Expense with Add On	Administrative Cost Allowance	Risk Margin	SFY 2021 Amended Effective Rate	SFY 2021 Prior Effective Rate	% Change
Rite Smiles									
Age 0-2	195,463	\$ 4.17	\$ 0.03	\$ 4.20	\$ 0.32	\$ 0.10	\$ 4.62	\$ 4.64	(0.4%)
Age 3-5	224,059	15.41	0.01	15.42	1.19	0.34	16.95	17.00	(0.3%)
Age 6-10	352,049	21.85	0.02	21.87	1.68	0.48	24.03	24.08	(0.2%)
Age 11-15	350,207	23.13	0.02	23.15	1.78	0.51	25.44	25.45	0.0%
Age 16-21	276,805	16.78	0.02	16.80	1.29	0.37	18.46	18.47	(0.1%)
Total Rite Smiles	1,398,583	\$ 17.66	\$ 0.02	\$ 17.69	\$ 1.36	\$ 0.39	\$ 19.43	\$ 19.46	(0.1%)

Note: Composite values have been rounded

State of Rhode Island
Executive Office of Health and Human Services
State Fiscal Year 2021 Dental Capitation Rate Development
Rite Smiles Dental Program
Rate Change Summary

	SFY 2021 Amended Effective Rate	Premium Tax	SFY 2021 Amended Capitation Rate	SFY 2021 Prior Capitation Rate	% Change
Rite Smiles					
Age 0-2	\$ 4.62	\$ 0.09	\$ 4.71	\$ 4.73	(0.4%)
Age 3-5	16.95	0.35	17.30	17.35	(0.3%)
Age 6-10	24.03	0.49	24.52	24.57	(0.2%)
Age 11-15	25.44	0.52	25.96	25.97	0.0%
Age 16-21	18.46	0.38	18.84	18.85	(0.1%)
Total	\$ 19.43	\$ 0.40	\$ 19.83	\$ 19.86	(0.1%)

Note: Composite values have been rounded

ATTACHMENT F:
RATE SETTING PROCESS
