BEFORE THE BOARD OF COMMISSIONERS OF LANE COUNTY, OREGON

ORDER NO: 15-10-27-05

IN THE MATTER OF AWARDING AND ACCEPTING CONTRACT AMENDMENTS AND DELEGATING AUTHORITY TO THE COUNTY ADMINISTRATOR TO SIGN THE APPROVED CONTRACT AMENDMENTS IN THE DEPARTMENT OF HEALTH & HUMAN SERVICES

WHEREAS, Lane Manual Chapter 21 sets forth policy regarding award of contracts and contract amendments for services and policy regarding signatory authority of the County Administrator; and

WHEREAS, competitive processes were undertaken as required by Lane Manual for the contracts in the attached contract list;

NOW, THEREFORE, the Board of County Commissioners of Lane County ORDERS as follows:

1. Award, accept, and delegate authority to the County Administrator to sign the contract amendments indicated in the attached contract list.

ADOPTED this 27th day of October, 2015.

[Signature]
Jay Bozievich, Chair
Lane County Board of Commissioners

APPROVED AS TO FORM
Date: 10-19-15

LANE COUNTY OFFICE OF LEGAL COUNSEL
### Exhibit A – October 2015 Contract Amendments List

<table>
<thead>
<tr>
<th>Contractor Name</th>
<th>Contract Title</th>
<th>Type</th>
<th>Amendment Amount</th>
<th>New Delegated Authority Total</th>
<th>Begin Date</th>
<th>End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capitol Dental Care, Inc.</td>
<td>Dental Provider Panel - Billing Authority</td>
<td>Revenue</td>
<td>$5,000</td>
<td>$20,000</td>
<td>1/1/13</td>
<td>12/31/16*</td>
</tr>
<tr>
<td>MODA Health</td>
<td>Billing Authority - ODS - OHP clients</td>
<td>Revenue</td>
<td>$1,000</td>
<td>$3,800/11,000</td>
<td>12/1/12</td>
<td>11/30/16*</td>
</tr>
<tr>
<td>MODA Health</td>
<td>Manage Care - Primary Care - Billing Authorization</td>
<td>Revenue</td>
<td>$6,000</td>
<td>$64,500</td>
<td>4/1/11</td>
<td>3/31/16*</td>
</tr>
<tr>
<td>OR Dept of Education</td>
<td>Medicaid Administrative Claiming – Healthy Families America</td>
<td>Revenue</td>
<td>$200,000</td>
<td>$470,000</td>
<td>7/1/13</td>
<td>12/31/15</td>
</tr>
<tr>
<td>Oregon Department of Human Services</td>
<td>Title IV-E Reimbursement</td>
<td>Revenue</td>
<td>N/A Term Only</td>
<td>$1,100,000</td>
<td>1/1/14</td>
<td>12/31/16</td>
</tr>
<tr>
<td>Oregon Department of Human Services</td>
<td>Med Svcs Agreement - IGA - Breast &amp; Cervical Cancer</td>
<td>Revenue</td>
<td>$8,000</td>
<td>$26,200</td>
<td>10/26/08</td>
<td>10/25/16*</td>
</tr>
<tr>
<td>Oregon Health Authority</td>
<td>Nurse Family Partnership</td>
<td>Revenue</td>
<td>$500,500</td>
<td>$1,773,317</td>
<td>12/1/13</td>
<td>3/31/16</td>
</tr>
<tr>
<td>Oregon Health Authority</td>
<td>Medicaid Enrollments - FQHC</td>
<td>Revenue</td>
<td>$12,000</td>
<td>$71,300</td>
<td>5/1/12</td>
<td>4/30/16*</td>
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<tr>
<td>Relief Nursery</td>
<td>Intensive Home Visiting</td>
<td>Expense</td>
<td>$70,000</td>
<td>$760,113</td>
<td>7/1/13</td>
<td>12/31/15</td>
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<tr>
<td>Rite Aid HDQTRS. Corp</td>
<td>340B Pharmaceuticals Local Dispensing Authority</td>
<td>Expense</td>
<td>$70,000</td>
<td>$100,170,00</td>
<td>9/9/13</td>
<td>6/30/16*</td>
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<tr>
<td>The Kroger Co.</td>
<td>340B local dispensing</td>
<td>Expense</td>
<td>$30,000</td>
<td>$130,000</td>
<td>9/24/13</td>
<td>6/30/16*</td>
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</tbody>
</table>

*On-going until cancelled