THE INFORMATION IN THIS BOX IS NOT A PART OF THE CONTRACT AND IS FOR COUNTY USE ONLY



Contract	Number			
94-807 A-8				

SAP Number

County Administrative Office

Department Contract Representative Telephone Number	Ginger Roosa 909-387-4384
Contractor	Inland Empire Health Plan JPA
Contractor Representative	Annette Taylor
Telephone Number	909-296-3584
Contract Term	N/A
Original Contract Amount	N/A
Amendment Amount	N/A
Total Contract Amount	N/A
Cost Center	N/A

Briefly describe the general nature of the contract: The purpose of the amendment is to change from fiscal year (July 1 to June 30) to calendar year (January 1 to December 31) for financial reporting purposes, as approved on May 11, 2020 by the governing Board of the Inland Empire Health Plan.

FOR COUNTY USE ONLY Approved as to Legal/Form	Reviewed for Contract Compliance	Reviewed/Approved by Department
Penny Alexander-Kelley, Chief Assistant County Counsel	Neviewed for Contract Compilance	► Separtment
Date	Date	Date

JOINT POWERS AGREEMENT BETWEEN THE COUNTIES OF SAN BERNARDINO AND RIVERSIDE CREATING A MEDI-CAL MANAGED CARE SYSTEM TO BE KNOWN AS THE INLAND EMPIRE HEALTH PLAN

EIGHTH AMENDMENT	
Adopted	. 2020)

AMENDMENTS TO THE JOINT POWERS AGREEMENT BETWEEN THE COUNTIES OF SAN BERNARDINO AND RIVERSIDE CREATING A MEDICAL MANAGED CARE SYSTEM TO BE KNOWN AS THE INLAND EMPIRE HEALTH PLAN

RECITALS:

WHEREAS, the COUNTY OF SAN BERNARDINO (hereinafter referred to as "SAN BERNARDINO") and the COUNTY OF RIVERSIDE (hereinafter referred to as "RIVERSIDE"), are the parties to the Joint Powers Agreement, approved by both parties' Boards of Supervisors on July 26, 1994, as amended, and now agree to further amend that Inland Empire Health Plan Joint Powers Agreement document between them:

NOW, THEREFORE, the following amendments are made to the Inland Empire Health Plan Joint Powers Agreement:

A. Under <u>SECTION 9. FISCAL YEAR</u>, all references to July 1 shall be replaced with January 1, and all references to June 30 shall be replaced with December 31.

FURTHER, all other terms and conditions of the Inland Empire Health Plan Joint Powers Agreement, as amended shall be unchanged and shall remain in full force and effect.

This Amendment may be executed in separate counterparts, each of which shall be deemed an original, and all of which shall be deemed one and the same instrument. The parties' faxed signatures, and/or signatures scanned into PDF format, shall be effective to bind them to this Amendment.

(SIGNATURE PAGE TO FOLLOW)

IN WITNESS WHEREOF, the parties hereto have caused this Amendment to be executed and attested to by their proper officers thereunto duly authorized.

INLAND EMPIRE HEALTH PLAN		
By: EB1F4AD25DD84F8 Chair, IEHP	Dated:	5/12/2020
Chair, IEHP ATTEST: Docusigned by: Limit M. Supple By: EB1F4AD25DD84F8 Annette Taylor, Secretary		5/12/2020
Annette Taylor, Secretary COUNTY OF SAN BERNARDINO		
By: Chair Board of Supervisors	Dated:	JUN 2 3 2020
ATTENT: Clerk of the Board By: Deputy	Dated:	JUN 2 3 2020
COUNTY OF RIVERSIDE		
By: Chair, Board of Supervisors	Dated:	
ATTEST: Clerk of the Board		
By: Deputy	Dated:	
APPROVED AS TO LEGAL FORM:		
By:GREGORY P. PRIAMOS, County Counsel Raymond M. Mistica, Deputy County Counsel		