



RESOLUTION No. _____

OF THE BOARD OF SUPERVISORS OF THE COUNTY OF NEVADA

RESOLUTION APPROVING AMENDMENT NO. 1 TO THE AGREEMENT BETWEEN PARTNERSHIP HEALTHPLAN OF CALIFORNIA (“PLAN”) AND THE COUNTY OF NEVADA FOR ENHANCED CARE MANAGEMENT, AS PART OF NEVADA COUNTY’S PARTICIPATION IN A RATE RANGE INTERGOVERNMENTAL TRANSFER (“IGT”): A REVENUE AGREEMENT WHEREBY NEVADA COUNTY RETROACTIVELY RECEIVES FEDERAL FINANCIAL PARTICIPATION MEDI-CAL FUNDS TO COVER UNREIMBURSED COSTS FOR PREVIOUSLY PROVIDED, MANDATED SERVICES (RES. 23-564)

WHEREAS, Nevada County is one of the twenty-eight Managed Care Rural Expansion Counties, and Medi-Cal Managed Care was administered in Nevada County in the period of January 2024 through December 2024; and

WHEREAS, Partnership HealthPlan is the Medi-Cal Managed Care Plan for Nevada County; and

WHEREAS, Nevada County provides health services to Medi-Cal members that constitute Medi-Cal Managed Care Plan service responsibilities; and

WHEREAS, Nevada County incurred (or will incur) unreimbursed costs for health services that constitute Medi-Cal Managed Care Plan service responsibilities the period of January 2024 through December 2024; and

WHEREAS, Nevada County is eligible per California Welfare and Institutions Code Sections 14164 and 14301.4 to participate in an Intergovernmental Transfer (IGT) for the purpose of providing support for the nonfederal share of risk-based payments to managed care health plans to enable the plans to compensate providers designated by the transferring entity for Medi-Cal health care services and for the support of the Medi-Cal Program; and

WHEREAS, the Department of Health Care Services approval for Nevada County’s participation in a Rate Range Intergovernmental Transfer for the period of January 2024 through December 2024 requires execution of an Amendment to Nevada County’s Medi-Cal Managed Care Plan Agreement to reflect this change.

NOW, THEREFORE, BE IT HEREBY RESOLVED by the Board of Supervisors of the County of Nevada, State of California, that Amendment One to the Agreement by and between the County and Partnership HealthPlan for Enhanced Care Management services, as a requirement to implement the County’s participation in a Rate Range Intergovernmental Transfer to, be and is hereby approved in substantially the form attached hereto, and that the Chair of the Board of Supervisors be and is hereby authorized to execute the Amendment on behalf of the County of Nevada.

Funds to be deposited to account 1589-50101-491-1000/446000