

**AMENDMENT TO THE
MEDI-CAL PRIVACY AND SECURITY AGREEMENT (Agreement) BETWEEN
the California Department of Health Care Services (DHCS) and the California
Statewide Automated Welfare System Joint Powers Authority (CalSAWS
Consortium)**

DHCS and CalSAWS Consortium are parties to the Agreement, effective on September 1, 2019.

This Amendment entered into by and between DHCS and CalSAWS Consortium extends the termination date of the Agreement to allow ongoing transmissions of Medi-Cal PII while the renewal of the Agreement is negotiated and finalized between DHCS and the County Departments/Agencies.

AGREEMENTS

DHCS and CalSAWS Consortium mutually agree to modify the following parts of the Agreement as set forth below:

XVIII. TERMINATION

- A. The Agreement shall terminate on either March 1, 2024 or upon execution of a successor 2022 PSA, whichever occurs first. The parties can agree in writing to extend the term of the Agreement. CalSAWS Consortium requests for an extension shall be approved by DHCS and limited to no more than a six (6) month extension.
- B. **Survival:** All provisions of the Agreement that provide restrictions on disclosures of Medi-Cal PII and that provide administrative, technical, and physical safeguards for the Medi-Cal PII in the CalSAWS Consortium possession shall continue in effect beyond the termination or expiration of the Agreement, and shall continue until the Medi-Cal PII is destroyed or returned to DHCS.

Except as set forth in this Amendment, the Agreement is unaffected and shall continue in full force and effect in accordance with its terms. If there is conflict between this Amendment and the Agreement, the terms of this Amendment will prevail.

SIGNATORIES

The signatories below warrant and represent that they have the competent authority on behalf of their respective agencies to enter into the obligations set forth in this Amendment.

The authorized officials whose signature appears below have bound their respective agencies to the terms of the Agreement, as modified by this Amendment.

For the California Statewide Automated Welfare System Joint Powers Authority,

(Signature)

(Date)

(Name)

(Title)

For the Department of Health Care Services,

(Signature)

(Date)

(Name)

(Title)