



650 Newtown Pike
Lexington, Kentucky 40508-1197
(859) 252-2371
(859) 288-2359 Fax
(859) 288-7510 Medical Fax

CONTRACT AMENDMENT

DATE: April 13, 2018

CONTRACT NUMBER: 17-18-PUBLIC-R

CONTRACTOR NAME AND ADDRESS:

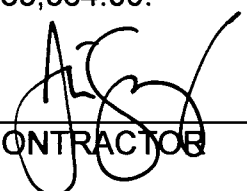
Family Care Center-HANDS Program
Lexington-Fayette Urban County Gov.
200 East Main Street
Lexington, KY 40507
Attn: Charles Lanter, Director of Grants &
Special Projects

It is mutually understood and agreed by and between the undersigned contracting parties to amend the previously executed agreement as follows:

Change to section 5:

Effective April 13, 2018 section five is changed to increase the Contractor's billing for Non-Medicaid clients in HANDS not to exceed total from \$73, 380.00 to \$113,380.00.

The total not to exceed contract amount increases to \$635,364.00.



CONTRACTOR

MAY 17 2018

DATE



COMMISSIONER OF HEALTH



CHIEF FINANCIAL OFFICER



COMMUNITY HEALTH OFFICER

PREVENT

PROMOTE

PROTECT