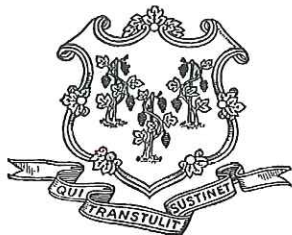


STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES



CONTRACT AMENDMENT

Contractor: UNITED WAY OF CONNECTICUT
Contractor Address: 1344 SILAS DEANE HIGHWAY, ROCKY HILL, CT 06067
Contract Number: 119UWC-HUO-10 / 09DSS1002AX
Amendment Number: A3
Maximum Contract Value as Amended: \$10,641,501
Contract Term as Amended: 07/01/09 - 06/30/13

The contract between **United Way of Connecticut** (the Contractor) and the Department of Social Services (the Department), which was last executed by the parties and approved by the Office of the Attorney General on 12/16/2010, is hereby further amended as follows:

1. The maximum value of this contract shall be \$10,641,501.
2. The total maximum amount payable under this contract is increased by **\$3,423,057 from \$6,829,444 to \$10,252,501**. The increased funding shall be used to fund Program services through 6/30/2012. Funding for SFY 2013 shall be provided subject to availability in a future amendment.
3. The Department shall allow the Contractor to carry forward and utilize for service delivery through 6/30/12 a total of \$389,000 already paid to the Contractor during prior contracts.
4. The budget for SFY 2012 and for the entire contract period shall be as set forth on page 2 of this amendment.
5. The term of the contract is extended for an additional 2 years and the end date of the contract is changed from 6/30/2011 to 6/30/2013.

This document constitutes an amendment to the above numbered contract. All provisions of that contract, except those explicitly changed above by this amendment, shall remain in full force and effect.

PROGRAM NAME:
211/Husky/MED SFY 2012

United Way of Connecticut, Inc.
FINANCING SUMMARY A3

	(A) REQUESTED	(B) ADJUSTMENTS	(C) APPROVED
Total State Grant			
For Amendments Only			
Previously approved State Grant	\$7,206,057	\$3,435,444	10,641,501
Amount of Amendment			

ITEM/Line #	Subcategory (a)	Line Item Total (b)	Adjustments (c)	Revised Total (d)
1. UNIT RATE				
1a. Bed Days				
1b. Client Advocate				
1c. Security Deposit				
1d. Other Unit Rate Costs				
TOTAL UNIT RATE				
2. CONTRACTUAL SERVICES				
2a. Accounting	0			
2b. Legal	69,890			69,890
2c. Independent Audit	35,326			35,326
2d. Other Contractual Service	788,133			788,133
TOTAL CONTRACTUAL SERVICE		893,349		893,349
3. ADMINISTRATION				
3a. Admin. Salaries	899,795			899,795
3b. Admin. Fringe Benefits	274,665			274,665
3c. Admin. Overhead	88,466			88,466
TOTAL ADMINISTRATION		1,262,926		1,262,926
4. DIRECT PROGRAM STAFF				
4a. Program Salaries	5,148,826			5,148,826
4b. Prog. Fringe Benefits	1,889,158			1,889,158
TOTAL DIRECT PROGRAM		7,037,984		7,037,984
5. OTHER COSTS				
5a. Program Rent	498,418			498,418
5b. Consumable Supplies	352,308			352,308
5c. Travel & Trans.	122,318			122,318
5d. Utilities	258,075			258,075
5e. Repairs & Maintenance	0			0
5f. Insurance	57,037			57,037
5g. Food & Related Costs	0			0
5h. Other Project Expenses	56,818			56,818
TOTAL OTHER COSTS		1,344,974		1,344,974
6. EQUIPMENT		102,268		102,268
7. PROGRAM INCOME				
7a. Fees				
7b. Other Income				
TOTAL PROGRAM INCOME				
8. TOTAL NET PROGRAM COST		10,641,501		\$10,641,501
(Sum of 1 - 6 minus Line 7)				

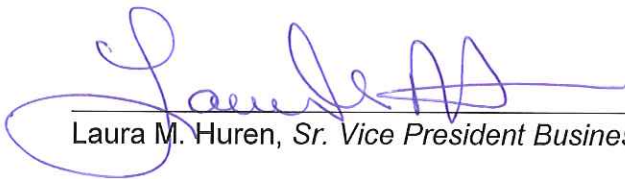
SIGNATURES AND APPROVALS

119UWC-HUO-10 / 09DSS1002AX A3

The Contractor IS a Business Associate under the Health Insurance Portability and Accountability Act of 1996 as amended.

Documentation necessary to demonstrate the authorization to sign must be attached.

CONTRACTOR - UNITED WAY OF CONNECTICUT



Laura M. Huren, Sr. Vice President Business Operations

6/28/11

Date

DEPARTMENT OF SOCIAL SERVICES

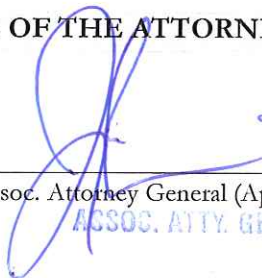


Roderick L. Bremby, Commissioner

6/30/2011

Date

OFFICE OF THE ATTORNEY GENERAL



ASST. / Assoc. Attorney General (Approved as to form & legal sufficiency)
ASSOC. ATTY. GENERAL

7/11/11