AMENDMENT NO. ONE

THIS AMENDMENT (the "Amendment") to RelayHealth Revenue Cycle Contract Supplement No. RH-04990 dated December 8, 2010, (the "Agreement") is effective as of July 1, 2012 (the "Amendment Effective Date") between RelayHealth, a division of McKesson Technologies Inc., ("RelayHealth") and University Medical Center of Southern Nevada ("Customer") (each a "Party" and collectively the "Parties").

WHEREAS, the Parties desire to amend the Agreement as of the Amendment Effective Date on the terms and conditions set forth herein.

NOW, THEREFORE, in consideration of the mutual exchange of promises set forth herein, RelayHealth and Customer agree to amend the Agreement as follows:

1. Except as defined herein or otherwise required by the context herein, all capitalized terms used in this Amendment have the meaning set forth in the Agreement.

2. As of Effective Date of the Amendment the Parties agree that there are no outstanding billing claims.

3. Attachment A to Schedule 1 of the Agreement is hereby amended by deleting the fifth bullet point which states "Customer will pay RelayHealth a fee of $25.00 for all accounts where valid insurance coverage is found and is within payers timely filing guidelines."

4. Attachment B to Schedule 1 of the Agreement is hereby amended by deleting Section 2: Fees in its entirety and replacing it with the following:

   For monthly collections excluding any Point of Service cash on accounts referred to RelayHealth the effective fee will be 7.00%.

   A monthly fee of $15,141.00 will be assessed for the cost associated with maintaining four onsite liaisons in the business office of Customer.

5. Section 3: Service Period of Attachment B to Schedule 1 of the Agreement is hereby deleted in its entirety and replaced with the following:

   RelayHealth will perform the Self-Pay RCO Services for a term (a "Service Period") of thirty-six (36) months from the Amendment Effective Date.

6. The Agreement is hereby amended by adding Attachment D, Performance Standards, attached hereto.

7. The parties acknowledge that this Agreement will have to be approved in a public meeting by the Clark County Board of Hospital Trustees, for it to be effective, and that as part of that process that this Agreement will be disseminated on the internet and discussed at one or more public meetings. Nonetheless, Customer agrees to use its best efforts to keep the terms of this Agreement confidential. In the event there is a public records request, Customer, will provide RelayHealth with notice that such disclosure. No party or intended third-party beneficiary, however shall be entitled to an award of damages for a breach of this provision. For any such breach of this provision, the sole remedy shall be to seek an injunction.

8. Except as otherwise modified by this Amendment, all other terms and conditions of the Contract Supplement shall remain in full force and effect.
9. This Amendment is the complete and exclusive agreement between the Parties with respect to the subject matter herein superseding and replacing all prior agreements, communications, and understandings (written and oral) regarding its subject matter.

IN WITNESS WHEREOF, the Parties have caused this Amendment to be executed by their duly authorized representatives.

UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA

By:
Name:
Title:
Date:

Customer Address:
1800 West Charleston Blvd.
Las Vegas, Nevada 89102
Attention: Chief Executive Officer

RELAYHEALTH, A DIVISION OF McKESSON TECHNOLOGIES INC.

By:
Name: David E. Mason
Title: EVP, Legal, RelayHealth
Date: 8/23/2012

RelayHealth Address:
5995 Windward Parkway
Alpharetta, Georgia 30005
Attn: General Counsel

FOR MCKESSON INTERNAL USE ONLY

Submit fully executed contract to:
McKesson
Attn: Contract Operations
5995 Windward Parkway
Mailstop: ATHQ-0111
Alpharetta, GA 30005
Fax: 404.338.5161
Email: Contract.Ops@McKesson.com
Attachment D

Performance Standards

1. Customer service performance expectation of <5% errors and/or complaints shall be tracked based on the monthly volume of assigned accounts compared to the volume of patient complaints and/or errors received.

2. Patient complaints and the action plan to resolve such complaint shall be reported to Customer within two (2) business days.

3. Close and Return files shall be processed monthly at day 121.

4. Patient payment plans shall be documented and updated at the account level for vital works.

5. Reports shall be kept current with all adjustments processed by the last day of each month.

6. No more than one (1) weekly conference call may be rescheduled per month.

7. RelayHealth representative shall document and verify account information when speaking with customer(s). Documentation shall include date and time of call, name of representative, name of person whom they spoke with, reason for phone call, and resolution of call.

8. Customer shall be notified in advance of any changes to the predictive dialer, such as, but not limited to, change in hours of calls, message content, and volumes.

9. RelayHealth shall notify Customer within one (1) business day of changes in downtime, technical difficulties, or closure days.