

**AMENDMENT TO THE  
BLUE CROSS & BLUE SHIELD OF RHODE ISLAND  
PARTICIPATING PHYSICIAN/PROVIDER AGREEMENT**

This Amendment to the Blue Cross & Blue Shield of Rhode Island Participating Physician/Provider Agreement (the "Amendment") is made and entered into by and between **Blue Cross & Blue Shield of Rhode Island**, a nonprofit hospital and medical service corporation organized under Title 27, Chapter 19 and Title 27, Chapter 20 of the General Laws of Rhode Island (the "Corporation"), and the undersigned physician, podiatrist or other provider (hereinafter collectively referred to as the "Physician/Provider").

W I T N E S S E T H

WHEREAS, the Corporation and the Physician/Provider desire to amend that certain Blue Cross & Blue Shield of Rhode Island Participating Physician/Provider Agreement ("Agreement") entered into by and between the Corporation and the Physician/Provider for the provision of services to subscribers of the Corporation and their eligible dependents (hereinafter collectively referred to as "Subscribers") to provide that the Physician/Provider will no longer participate in the Corporation's BlueCHiP for Medicare product on the terms and conditions set forth herein.

NOW, THEREFORE, in consideration of the mutual covenants, promises and understandings set forth herein, and for other good and sufficient consideration, the receipt of which is hereby acknowledged, the parties agree as follows:

SECTION 1. The parties agree that as of the effective date set forth in Section 2 hereof the Physician/Provider shall be deemed to no longer participate in the Corporation's BlueCHiP for Medicare product and as such shall not be required to abide by the Agreement or the Physician/Provider Agreement Administrative Policies in relation to services rendered under BlueCHiP for Medicare.

SECTION 2. The parties agree to waive the prior written notice requirements of Section IV.B of the Agreement for purposes of this Amendment. This Amendment shall be effective as of the latest date on the signature page of this Amendment.

SECTION 3. Except as expressly amended by the Amendment, the Agreement shall remain in full force and effect and is hereby in all respects ratified, adopted and confirmed. From and after the date hereof, any reference to the Agreement, whether made therein or in any other agreement, instrument or document, shall refer to the Agreement as amended herein. This amendment shall be construed and the obligations, rights, and remedies of the parties hereunto shall be determined in accordance with the laws of the State of Rhode Island.

IN WITNESS WHEREOF, the parties hereto have executed this Amendment to the Agreement as of the date set forth below.

BLUE CROSS & BLUE SHIELD  
OF RHODE ISLAND

PHYSICIAN/PROVIDER

By: \_\_\_\_\_

By: \_\_\_\_\_

Physician/Provider Signature

Title \_\_\_\_\_

\_\_\_\_\_

Print Name/Group Name

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Provider Number: \_\_\_\_\_