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**EXHIBIT \_\_**  
**COORDINATING PROVISIONS-STATE/FEDERAL LAW, ACCREDITATION STANDARDS AND**  
**GEOGRAPHIC EXCEPTIONS**  
**NEW YORK**

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**I. INTRODUCTION:**

Scope: To the extent of any conflict between the Agreement and this State Law Coordinating Provisions (“SLCP”) Exhibit, this SLCP Exhibit shall supersede, govern and control to the extent required by federal and/or state law and to the extent that MultiPlan, Inc. (“MPI”), Network Provider and/or Client are subject to such federal or state law.

**II. DEFINITIONS:**

1. Depending upon the specific form of the Agreement, the following terms may be utilized in the Agreement and are intended to be defined as provided for in the Agreement:

- (i) Billed Charges may be referred to as Regular Billing Rates;
- (ii) Client may be referred to as Payor;
- (iii) Contract Rates may be referred to as Preferred Payment Rates;
- (iv) Covered Services may be referred to as Covered Care;
- (v) Network Provider may be referred to as Preferred Provider;
- (vi) Participant may be referred to as Covered Individual; and
- (vii) Program or Benefit Program may be referred to as Contract.

2. For purposes of this Exhibit, the term Network Provider is inclusive of Participating Professional and all Network Providers.

**III. FEDERAL LAW COORDINATING PROVISIONS:**

Federal Employees Health Benefits (“FEHB”). As applicable, this Agreement is subject to the terms of the laws governing FEHB.

Federal Employees Health Benefits (“FEHB”) Plan. The parties agree that any and all claims or disputes relating to such benefits under a FEHB Plan will be governed exclusively by the terms of such federal government contract and federal law, whether or not such terms and laws are specified in this SLCP Exhibit or elsewhere in this Agreement.

**IV. STATE LAW COORDINATING PROVISIONS:**

As required by New York Insurance Law §3217-b (H), in the event Network Provider is a hospital, as defined by New York Public Health Law §2801, and this Agreement is terminated or not renewed, other than for quality of care issues, Client, as applicable, and Network Provider shall continue to abide by the terms of this Agreement, including reimbursement terms, for a period of two (2) months from the effective date of termination, or in the case of a non-renewal, from the end of the of the non-renewal date. Clients shall provide notice to Participants of such termination or non-renewal within fifteen (15) days after commencement of the two (2) month period. Notwithstanding the preceding, these requirements do not apply if both parties mutually agree in writing to the termination or non-renewal and Client provides notice to Participants at least thirty (30) days in advance of the Agreement termination date.

**V. ACCREDITATION STANDARDS COORDINATING PROVISIONS:**

There are no Accreditation Standards Coordinating Provisions at this time.

**VI. GEOGRAPHIC EXCEPTIONS COORDINATING PROVISIONS:**

Professional Liability Insurance. In the event Network Provider is a nurse practitioner, such Network Provider shall maintain professional liability insurance at minimum levels of \$500,000 per occurrence and \$1,500,000 in the aggregate.