## EXHIBIT C COORDINATING PROVISIONS : STATE LAW, ACCREDITATION STANDARDS AND GEOGRAPHIC EXCEPTIONS

## I. INTRODUCTION:

- 1.1 Scope To the extent of any conflict between the Agreement, including the administrative handbook as herein incorporated by reference, and this Exhibit, this Exhibit shall supersede, govern and control to the extent required by federal and/or state law and to the extent that MultiPlan, Inc., on behalf of itself and its subsidiations (Provider and/or Client are subject to such feeder state law.
- 1.2 <u>Terms</u> The terms used in this exhibit are the defined terms as specified in the applicable federal and/or state law. The specific form Agreement between the parties may utilize defined terms other than those noted in the **t**/deral an state law(s). For purposes of this exhibit, provider means a licensed facility or licensed, registered or certified health care professional(s) contracted to provide health care services under this Agreement
- 1.3 <u>Citations</u> The citations are current as of the date of **Exis**ibit. Recodification of statutory and/or regulatory citations does not nullify the intent of the provision.

## II. STATE LAW COORDINATING PROVISIONS: LOUISIANA

Where the statutory requirement is an additional obligation **ther** wise specified in the Agreement, the parties agree that the statutory requirement will be added as an obligation. Where the statutory requirement specifically conflicts with a current obligation, the statutory requirement shall take precedence **dancer** the existing obligation as to the statutory requirement only, and shall not void any other valid provision of this Agreem that. Statutory requirements identified below are limited to only those entities specifically covered by the statute.

2.1 As required by La. R.S. § 22:1007(J)(p)pvideris not required as a condition of participation or continuation in the provider network of one or more health benefit plans of the managed care organization, to serve in the provider network of all or additional health benefit plans of the managed care organization he managed care organization is prohibited from terminating provider agreement based on the provider's refusal to serve in its network for such additional plans.

## III. ACCREDITATION STANDARDS CO ORDINATING PROVISIONS:

There are no Accreditation Standards Coordinating Provisions at this time.

IV.