

AMENDMENT

It is agreed by and between the State of Vermont, Department of Vermont Health Access (hereafter called the "State") and Capitol Health Associates, LLC (hereafter called the "Contractor") that the contract on the subject of personal services generally on the subject of strategic consulting and technical project management and support of Blueprint for Health data quality, connectivity, aggregation, and clinical data analysis initiatives, effective July 1, 2015, is hereby amended effective June 30, 2016, as follows:

1. **By deleting Section 3 (Maximum Amount) on page 1 of 81 of Amendment #1, and substituting in lieu thereof the following Section 3:**

3. **Maximum Amount.** In consideration of the services to be performed by the Contractor, the State agrees to pay the Contractor, in accordance with the payment provisions specified in Attachment B, a sum not to exceed **\$2,158,266.09**.

2. **By deleting from Section 4 (Contract Term), on page 1 of 30 of the base agreement, the first paragraph (of two), and substituting in lieu thereof the following two paragraphs:**

4. **Contract Term.** The period of the Contractor's performance shall begin on July 1, 2015, and end on June 30, 2017. The State and the Contractor have the option of extending this contract for one (1) additional one-year term, subject to the agreement of both parties.

Work performed between July 1, 2016 (retroactive date) and the signing or execution of this Amendment #2 that is in conformity with Attachment A may be billed under this agreement.

3. **In Section 8 (Contacts for this Award), on page 2 of 81 of Amendment 1 of the contract, by revising the phone number for Natalie Elvidge to be "802-241-0389", revising the phone number for Tim Tremblay to be "802-241-0230", and revising the physical/ mailing address for State's Office of General Counsel to be "280 State Drive, NOB 1 South, Waterbury, VT 05671-1010."**

4. **In Attachment A (Specifications of Work to be Performed), immediately following the bulleted text, "Providing ongoing support of end users" on pages 5 of 81 of Amendment 1 of the contract, by inserting the following new bulleted text:**

- Providing to the State, and/or its State-authorized designees, expanded extracts of all available clinical data from the Blueprint Clinical Registry. Full extracts (or incremental-update equivalents) are to be provided on at least a quarterly basis following reconstitution of the Blueprint Clinical Registry. The extracts are to enable the State to conduct independent analytics on data availability and data quality in the Blueprint Clinical Registry, and use the data for healthcare analytic purposes. **Such clinical data extracts constitute the primary and ultimate deliverables of this contract.**

5. In Attachment A (Specifications of Work to be Performed), on pages 5 through 10 of 81 of Amendment 1 of the contract, under the heading "Data Quality Project Management", by deleting the sections for Task 1, Task 2, Task 3, and Task 4, and substituting in lieu thereof, the following text:

Task 1: Blueprint Data Quality Program Management

This task pertains to expert consultation on the overall Health Information Technology (HIT)/Health Information Exchange (HIE) strategy and operations for the State of Vermont and inclusive of major stakeholders and projects as requested by the Blueprint Executive Director. In particular, the Contractor shall provide recommendations for optimization of system capabilities for data capture to ensure exchange of the maximum number of structured data elements in a quality manner.

The Contractor Program Manager(s) shall provide high-level oversight of and recommendations related to statewide data quality work ("Sprints") in coordination with the Contractor Sprint project leader(s). Expertise and input on other related initiatives and projects may be requested at the discretion of the Blueprint Executive Director.

In coordination with the State's Blueprint analytics vendor (currently Onpoint Health Data) using reports and analyses generated from the Blueprint Clinical Registry, the Contractor shall evaluate the level of quality and completeness of current data capture (via end-to-end transmission from practice EHR to VHIE to clinical registry or flat files directly from practice EHR to clinical registry), provide summarized findings, and recommend targeted sites and projects for enhancement and expansion of data collection to the Blueprint Executive Director.

Deliverables:

1. Involvement in HIT/HIE strategy and operations meetings as requested by the Blueprint Executive Director, examples of which may include:
 - a. Weekly check-in/status update meeting with Blueprint Executive Director and/or designated Assistant Director(s)
 - b. DVHA/VITL Quarterly Grant Review meetings
 - c. Weekly Blueprint analytics meetings
 - d. Analytic and Evaluation Workgroup meetings
2. Leadership of Sprint Management Team for prioritizing and coordinating statewide data quality, connectivity, and data optimization efforts
3. Summarized findings of data frequency and quality from analytics reports, including recommended plans for optimization strategies
4. The Contractor shall develop and submit written monthly progress reports that include the following information:
 - a. Total hours by staff member and contractual Task.
 - b. Bulleted summary descriptions of activities, work completed, meetings attended, and current project status.
5. The Contractor shall provide detailed verbal project status reports from relevant project staff as requested by, and directly to, the Blueprint

Executive Director. Such verbal reports are to include opportunities for extensive discussion and provision of answers in response to questions from the Blueprint Executive Director.

6. As specifically requested, and only when specifically requested by the Blueprint Executive Director, Contractor shall develop and submit program reports for specified time periods that include the following information:
 - a. Programs/initiatives on which consultation services were provided
 - b. New projects/initiatives on which consultation services were requested by the Blueprint Executive Director within the specified time period
 - c. Actual hours spent on each program/initiative included in the report
 - d. High-level summaries of advisory expertise given on these programs/initiatives
 - e. Dates and times of meetings attended
 - f. Anticipated next steps based on direction given
7. The Contractor, in consultation with the State, shall implement Tasks 2-4, as set forth below.

Task 2: Project Management of Statewide Blueprint Data Quality Initiatives

The Contractor shall commit the necessary resources and time allotments required to perform work and continue project management of active Sprint projects to completion. Additionally, the Contractor shall help identify, using analyses from statewide clinical data sources, opportunities for data quality optimization and shall initiate and manage these targeted projects to completion.

The Contractor shall complete a set of key items to outline the high-level project management tasks for each Sprint project, including targeted data optimization projects for practices/organizations that have already completed an initial Sprint project.

The monitoring system for each Sprint process contains the following components:

1. Blueprint Community Evaluation
2. Initial IT Evaluation
3. Initial Data Mapping Verification
4. Project Plan
5. First Sprint Meeting Defining Tasks and Issues
6. Weekly Progress Meetings on Continuing Work
7. Final Data Continuity and Validation
8. Sprint Completion
9. Ongoing Maintenance

Data optimization projects shall contain components 4 through 9.

Performance Measures: For Sprint and data optimization projects, the Contractor shall demonstrate progress towards stated goals using a combination of performance measures as follows:

- a. Schedule Performance Measure: Project schedule status shall be tracked by the contractor, updated at least weekly, and reported to the Blueprint Executive Director upon request. Actual progress will be tracked against the project baseline. The actual schedule shall reflect tasks as completed (100% complete), in process (report the percent complete), and not yet started.
- b. Weekly Meetings with Blueprint staff (as requested by the Blueprint Executive Director): The Contractor shall meet/call on a regular basis with the State's Blueprint staff to review ongoing tasks, discuss issues with tasks, and recommend modifications to ongoing activities. These meetings/calls will ensure that the tasks are meeting the State's needs.
- c. Project Status Reporting: Upon request by the Blueprint Executive Director, the Contractor shall provide Blueprint Management with detailed status reports on the project. Required status reporting may involve metrics-based and narrative-based information about the progress of the task or particular projects. This information will serve to supplement weekly telephonic meetings on project issues.
- d. Metrics-Based Management: The Contractor shall prepare metrics on schedule and deliverable acceptance throughout the project, and submit those to Blueprint management, upon request by the Blueprint Executive Director.
- e. Direct Communication with End Users in Development of Deliverables: The Contractor shall interface with appropriate clinicians throughout the development of deliverables. This interfacing will help to ensure greater accuracy and utility of the produced deliverables. Deliverables shall be considered completed upon a satisfactory review by the State.

Deliverables: For each project, the Contractor shall generate the following deliverables, and provide them to the State upon request of the Blueprint Executive Director:

1. Project plan/timeline to be created within 15 days of project start
2. Project Initiation document to be created within 15 days of project start
3. Agendas for and leadership of weekly project team calls
4. Attendance at and (upon request) leadership of Sprint Management Team calls as scheduled
5. Verbal and/or written updates to Blueprint Executive Director and Assistant Directors as requested by those State staff, including proactive escalation of issues presenting obstacles to project completion and requiring timely attention
6. Documentation of project completion
7. The Contractor shall develop and submit written monthly progress reports that include the following information:
 - a. Total hours by staff member and contractual Task.
 - b. Bulleted summary descriptions of activities, work completed,

meetings attended, and current project status.

8. The Contractor shall provide detailed verbal project status reports from relevant project staff as requested by, and directly to, the Blueprint Executive Director. Such verbal reports are to include opportunities for extensive discussion and provision of answers in response to questions from the Blueprint Executive Director.

Task 3: Recruitment and Onboarding of New Blueprint Data Quality Initiatives

The Contractor shall coordinate recruitment of health care provider practices for Sprint or targeted data optimization projects, including education and outreach activities on the Sprint process both proactively and upon request.

The Contractor shall evaluate health care provider practices (“practices”) for project readiness based on several factors, including commitment of practices to completing data quality work in a timely manner and technical capabilities of the practice’s Electronic Health Record (EHR) system for connectivity to the Vermont Health Information Exchange (VHIE) network, and prioritize new projects accordingly as slots and required resources become available.

Once a new practice has been recruited to use the system, the Contractor shall perform all project management activities for it as defined in Task 2.

The Contractor shall provide technical expertise to practices, State Health Information Exchange (HIE) partners, and EHR vendors on data mapping, interface connectivity, and data optimization, in addition to direct work with practices on data quality evaluation and remediation methods.

Deliverables: During the recruitment and onboarding process, the Contractor shall provide the following deliverables:

1. Outreach to practices about the Sprint process or targeted data optimization initiative via phone calls or on-site meetings (if required and travel approved through the Blueprint management team)
2. In consultation with the Blueprint Executive Director and/or Assistant Directors, prioritize practices/organizations for new Sprints as project slots become available (up to 8 concurrent project slots available at a time)
3. Tracking of prioritized projects in the queue awaiting a project slot and communication to relevant project staff of status and level of urgency for connecting new practices to the VHIE/DocSite via appropriate interfaces
4. Provision of technical expertise on connectivity (interface) setup efforts, data quality remediation at the source EHR systems, and/or data optimization strategies to project teams
5. Mentoring and management of other identified Sprint project leaders
6. Support of future recruitment and onboarding activities for the Blueprint Clinical Registry
7. Upon request by the Blueprint Executive Director, status reports related to recruitment and onboarding that includes the following information:
 - a. Names of practices in the recruitment and onboarding stage for new

- Sprints or data optimization efforts and outreach performed
- b. EHR vendors involved
 - c. Identification of resources for the recruitment and onboarding, such as individuals at State HIE vendors upon whom the Contractor may depend for project completion
 - d. Obstacles encountered during the recruitment and onboarding process and, if applicable, feasibility of project continuation and estimated date for project slot availability
8. The Contractor shall develop and submit written monthly progress reports that include the following information:
- a. Total hours by staff member and contractual Task.
 - b. Bulleted summary descriptions of activities, work completed, meetings attended, and current project status.
9. The Contractor shall provide detailed verbal project status reports from relevant project staff as requested by, and directly to, the Blueprint Executive Director. Such verbal reports are to include opportunities for extensive discussion and provision of answers in response to questions from the Blueprint Executive Director.

Task 4: Involvement in Projects Supporting Data Quality Work

The Contractor shall perform data quality work related to data mapping out of EHR source systems, establishing interface connections to State HIE systems and evaluating data quality within those systems, flat file transfers, data quality reporting mechanisms, and master patient index (MPI) functionality and shall use this knowledge and experience to provide input and support to the Blueprint management team on projects related to data quality work, but not specifically part of Sprint or data optimization projects.

Examples of projects supporting data quality work that shall require the Contractor's involvement and expertise include, but are not limited to, the following:

- Project management of new/alternate/pilot methods for data mapping, acquisition, and verification
- Understanding of workflows, data quality requirements, and reporting needs of Blueprint programs, including Support and Services at Home (SASH), Tobacco Cessation Counseling (TCC), Community Health Teams (CHTs), and self-management workshops
- Acquisition and secure transfer of clinical data extract(s) for analysis and merging with claims data by Blueprint analytics vendor
- Assist Blueprint analytics vendor with matching of clinical to claims data, interpretations of data, and mapping of values to measures being generated, such as those for Accountable Care Organizations (ACOs) and provider networks
- Project management and implementation planning for the DocSite migration project
- Coordination of validation testing of the pre-production instance of DocSite against the Success Criteria, as defined herein
- Ongoing project management for maintenance and support of the Blueprint

Clinical Registry

- Participation in strategic planning sessions for future tool selection where technical expertise of the Contractor and risk assessment based on past experience is brought to bear

Deliverables:

1. As directed by the Blueprint Executive Director or as required for proper support of Sprint project work, the Contractor shall participate in and, as appropriate, lead projects related to data quality efforts.
 2. Upon request of the Blueprint Executive Director, the Contractor shall submit status reports related to these projects that include the following information by project:
 - a. Name of project based on specific work in which the Contractor is involved
 - b. Report of work performed, including but not limited to: time spent on the project, meetings attended, stakeholders involved, etc.
 - c. Identification of resources for the project, if needed, such as individuals at State HIE vendors upon whom the Contractor may depend for project completion
 - d. The project's current status, including, but not limited to: Obstacles encountered, project successes, anticipated timeline and upcoming project plans.
 3. The Contractor shall develop and submit written monthly progress reports that include the following information:
 - a. Total hours by staff member and contractual Task.
 - b. Bulleted summary descriptions of activities, work completed, meetings attended, and current project status.
 4. The Contractor shall provide detailed verbal project status reports from relevant project staff as requested by, and directly to, the Blueprint Executive Director. Such verbal reports are to include opportunities for extensive discussion and provision of answers in response to questions from the Blueprint Executive Director.
- 6. In Attachment A (Specifications of Work to be Performed), on page 10 of 81 of Amendment 1 of the contract, by deleting the heading, "Task 5: Program, Project and Vendor Management" and substituting in lieu thereof, "Task 5: Blueprint Clinical Registry Program, Project, and Vendor Management".**
- 7. In Attachment A (Specifications of Work to be Performed), on pages 14 through 29 of 81 of Amendment 1 of the contract, by adding the following new paragraph to each of Tasks 7, 8, 10, 16, and 17, at the end of the Task description and immediately before the "Deliverables" heading: "Development, testing, and support of specific system functions for manual-entry users (e.g., SASH, Community Health Teams, and Self-Management Program) may be waived or modified per written direction of the Blueprint Executive Director, in response to changing program needs."**
- 8. In Attachment A (Specifications of Work to be Performed), on pages 26-27 of 81 of Amendment 1 of the contract, Task 15, under the heading, "Hosted System Requirements,**

by deleting from the first sentence the phrase, "In addition to the audit provisions set forth in Attachment C and Attachment D" and substituting in lieu thereof, the following text: "In addition to the audit provisions set forth in Attachment C, Attachment D (if any), and Attachment G".

9. In Attachment A (Specifications of Work to be Performed), on page 28 of 81 of Amendment 1 of the contract, by deleting the sections for Task 16 (Technical Support of Blueprint Clinical Registry) and substituting in lieu thereof, the following text:

Task 16: Technical Support of Blueprint Clinical Registry

On behalf of the State, the Contractor, through its Subcontractor MDM Technologies, shall administer, update, optimize, maintain, and support the Blueprint registry database and application source code.

The Contractor shall provide expert-level technical guidance and support for the Blueprint Clinical Registry, including:

- Maintenance and enhancement of source code, including database optimization
- Onboarding of interfaces or flat files for new organizations
- Interface engine consultation and integration

Deliverables: The Contractor shall:

1. Implement enhancements to the source code or data dictionary for the Blueprint Clinical Registry based on end-user requests and requirements and as directed and approved by the Blueprint Executive Director and/or designated Assistant Director(s) in writing.
2. Deliverable AII-2 – System Maintenance and Support - See Appendix II.
3. Deliverable AII-5B – Operations and System Administration Procedures Manual – See Appendix II.
4. In support of Onboarding Sprints (Task 3), perform technical tasks related to onboarding data from new organizations into the Blueprint Clinical Registry, including:
 - a. Set up of new organization hierarchy
 - b. Processing of messages
 - c. Message validation at the field level
5. Upon request by the Blueprint Executive Director, submit status reports related to these projects, including:
 - a. Enhancement requests, grouped by pending approval, approved, and denied
 - b. Deployments, including minor defect fixes through major upgrades for new functionality or reporting
 - c. Onboarding Sprint work performed, including status of each site, sites set up and brought Live, and those in the pipeline with estimated completion dates and dependencies
 - d. Time spent on each project, including meetings attended, etc.
6. Create and maintain System documentation as outlined in Appendix II.
7. Deliverable AII-1A–Interface Design Document See Appendix II
8. The Contractor shall develop and submit written monthly progress

reports that include the following information:

- a. Total hours by reporting entity and contractual Task.
 - b. Bulleted summary descriptions of activities, work completed, meetings attended, and current project status.
9. The Contractor shall provide detailed verbal project status reports from relevant project staff as requested by, and directly to, the Blueprint Executive Director. Such verbal reports are to include opportunities for extensive discussion and provision of answers in response to questions from the Blueprint Executive Director.

10. In Attachment A (Specifications of Work to be Performed), on page 29 of 81 of Amendment 1 of the contract, by deleting the section for Task 17, Deliverable 5, and substituting in lieu thereof, the following text for Task 17, Deliverables 5, 6, and 7:

5. Upon request by the Blueprint Executive Director, submit verbal or written status reports to include high-level support issues from the specified time period and any issues requiring attention or action from the Blueprint Executive Director and/or Assistant Directors
6. The Contractor shall develop and submit written monthly progress reports that include the following information:
 - a. Total hours by reporting entity and contractual Task.
 - b. Bulleted summary descriptions of activities, work completed, meetings attended, and current project status.
7. The Contractor shall provide detailed verbal project status reports from relevant project staff as requested by, and directly to, the Blueprint Executive Director. Such verbal reports are to include opportunities for extensive discussion and provision of answers in response to questions from the Blueprint Executive Director.

11. At the end of Attachment A (Specifications of Work to be Performed), add the following new text:

Blueprint Clinical Registry Data Extracts

Task 18: Delivery of Clinical Data Extracts from the Blueprint Clinical Registry

The primary task, primary purpose, and primary and ultimate deliverable for this contract is the secure delivery of expanded, full, clinical data extracts from the Blueprint Clinical Registry to the State and/or its State-authorized designees per the specifications of the Blueprint Executive Director. Those extracts will be used for healthcare analytics by the State. From them, the State will also be able to derive outcome metrics related to Contractor performance on this contract by conducting independent analytics on data availability and data quality in the Blueprint Clinical Registry.

Definitions for this Task:

- Full clinical data extracts are those that contain all clinical data in the Blueprint Clinical Registry as of the date and time of the extract, including all clinical

records and all clinical data elements. Full clinical data extracts shall contain fully identifiable patient and healthcare provider data.

- Limited clinical data extracts are those that contain some subset of the clinical data in the Blueprint Clinical Registry as of the date and time of the extract, representing a subset of the clinical records and/ or a subset of the clinical data elements.
 - Limited clinical data extracts may be a customized subset of data for a particular purpose.
 - A special type of limited clinical data extract is an incremental update, or incremental addition, to data extracts delivered earlier to a particular recipient.
- Expanded clinical data sets are those that contain new, valid, clinical data records not received previously by the State and/or its State-authorized designees, while containing no reduction in the number of data elements delivered previously unless such a reduction in data elements has been specifically authorized in writing by the Blueprint Clinical Director. (Records with no valid data in any data element will not count as valid.)
- Enhanced clinical data extracts are those that contain data elements and/or formats that are altered and thereby more useful for analytic purposes than those received previously by the State and/or its State-authorized designees.
- A particular data extract may be any combination of full versus limited, and expanded and/or enhanced.

Deliverables:

Acceptance of any clinical data extract as a deliverable must be obtained in writing by the Contractor from the Blueprint Executive Director.

1. Prime Deliverable. The Contractor shall securely deliver to the State-authorized-and-designated Blueprint analytics provider a minimum of four (4) full clinical data extracts per year, or incremental-updates which cumulatively provide equivalents to full data extracts, as specified by the Blueprint Executive Director, on roughly a calendar-quarter schedule, plus one final one as of the final month of the contract term. Each of these minimum-requirement clinical data extracts is to be an expanded one, and shall be enhanced per specifications of the Blueprint Executive Director received by the Contractor prior to creation of the extract. Contractor agrees that failure to deliver the products and services under this specific task will constitute a material breach of the contract.
2. The Contractor shall provide additional clinical data extracts upon the request of, and to the specifications of, the Blueprint Clinical Director, as this contract's budget allows. Those additional clinical data extracts may be any combination of full versus limited, and expanded and/or enhanced.
3. Upon the request of, and to the specifications of, the Blueprint Executive Director, the Contractor will provide file summary reports to file recipients and to the State regarding the contents of each clinical data extract, for content verification

purposes. Unless otherwise specified by the Blueprint Executive Director, those file summary reports will include at minimum the following information:

- Overall file information:
 - File extraction date and time.
 - File size.
 - Total number of data elements.
 - Total number of records.
 - Total number of included healthcare organizations.
 - Earliest record date.
 - Latest record date.
- Information for each included healthcare organization:
 - Organization ID.
 - Organization name.
 - Number of records.
 - Number of included unique patients.
 - Earliest record date.
 - Latest record date.

12. By deleting Attachment B (Payment Provisions) in its entirety, on pages 30 through 39 of 81 of Amendment 1 of the contract, and substituting in lieu thereof the following Attachment B, beginning on page 14 of 27 of this agreement.

13. In Attachment G (Other Provisions), immediately following Section 14 (Miscellaneous) and all Section 14 subsections, on pages 53 of 81 of Amendment 1 of the contract, by inserting the following new Sections 15 and 16 text:

15 AUDIT

Contractor will maintain and cause its permitted contractors to maintain a complete audit trail of all transactions and activities, financial and non-financial, in connection with this Contract. Contractor will provide to the State, its internal or external auditors, clients, inspectors, regulators and other designated representatives, at reasonable times (and in the case of State or federal regulators, at any time required by such regulators) access to Contractor personnel and to any and all Contractor facilities or where the required information, data and records are maintained, for the purpose of performing audits and inspections (including unannounced and random audits) of Contractor and/or Contractor personnel and/or any or all of the records, data and information applicable to this Contract. At a minimum, such audits, inspections and access shall be conducted to the extent permitted or required by any laws applicable to the State or Contractor (or such higher or more rigorous standards, if any, as State or Contractor applies to its own similar businesses, operations or activities), to (i) verify the accuracy of charges and invoices; (ii) verify the integrity of State Data and examine the systems that process, store, maintain, support and transmit that data; (iii) examine and verify Contractor's and/or its permitted contractors' operations and security procedures and controls; (iv) examine and verify Contractor's and/or its permitted contractors' disaster recovery planning and testing, business resumption and continuity planning and testing, contingency arrangements and insurance coverage; and (v) examine Contractor's and/or its permitted contractors'

performance of the Services including audits of: (1) practices and procedures; (2) systems, communications and information technology; (3) general controls and physical and data/information security practices and procedures; (4) quality initiatives and quality assurance, (5) contingency and continuity planning, disaster recovery and back-up procedures for processes, resources and data; (6) Contractor's and/or its permitted contractors' efficiency and costs in performing Services; (7) compliance with the terms of this Contract and applicable laws, and (9) any other matters reasonably requested by the State. Contractor shall provide and cause its permitted contractors to provide full cooperation to such auditors, inspectors, regulators and representatives in connection with audit functions and with regard to examinations by regulatory authorities, including the installation and operation of audit software.

16 VULNERABILITY TESTING

The Contractor shall run quarterly vulnerability assessments and promptly report results to the State. Contractor shall remediate all critical issues within 90 days of the assessment, all medium issues within 120 days of the assessment and low issues within 180 days of the assessment. Contractor shall obtain written State pre-approval for any exceptions. Once remediation is complete, Contractor shall re-perform the assessment.

14. By deleting Appendix I (Required Forms) in its entirety, beginning on page 56 of 81 of Amendment 1 of the contract, and substituting in lieu thereof the following Appendix I (Required Forms), beginning on page 25 of 27 of this agreement.

15. In Attachment Appendix II (Details of Blueprint Clinical Registry Maintenance and Operation Activities), on page 63 of 81 of Amendment 1 of the contract, by deleting the entire contents of the second column of the Service Level Requirements table associated with the row for "SLR 6: Disaster Recovery RTO" and substituting in lieu thereof, the following text:

The System's Recovery Time Objective (RTO) for hosting services shall be within 30 days. In case of a disaster that affects the Blueprint Clinical Registry operations, the entire service shall be restored within 60 days.

This amendment consists of 27 pages. Except as modified by this amendment and any previous amendments, all provisions of this contract, (#29244) dated July 1, 2015 shall remain unchanged and in full force and effect.

**STATE OF VERMONT
DEPARTMENT OF VERMONT HEALTH ACCESS**

**CONTRACTOR
CAPITOL HEALTH ASSOCIATES, LLC**

STEVEN COSTANTINO, COMMISSIONER
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CAPITOL HEALTH ASSOCIATES, LLC

ATTACHMENT B PAYMENT PROVISIONS

The maximum dollar amount payable under this agreement is not intended as any form of a guaranteed amount. The Contractor will be paid for products or services actually performed as specified in Attachment A up to the maximum allowable amount specified in this agreement. State of Vermont payment terms are Net 30 days from date of invoice, payments against this contract will comply with the State's payment terms. The payment schedule for delivered products, or rates for services performed, and any additional reimbursements, are included in this attachment. The following provisions specifying payments are:

1. The Contractor shall submit invoices with a current date of submission, invoice number, and contract number on or by the 15th of each month for the prior month's expenses. The Contractor shall invoice the State monthly for staff time, travel, and operating expenses for work associated with Tasks 1 through 17 specified in Attachment A. Invoices shall include the line item amount or the actual expenses incurred for each Task, total hours worked per hourly-paid Task, names of employees (as applicable) and a brief description of services performed, depending on the payment provisions, and the total amount billed.
2. Monthly invoices shall be accompanied by a completed financial reporting form (Appendix I: Required Forms). All reports and invoices related to this contract should be submitted in electronic format to:

Natalie Elvidge
Natalie.Elvidge@vermont.gov

Tim Tremblay
timothy.tremblay@vermont.gov
3. The Contractor shall be reimbursed based on a combination of defined monthly, hourly, or project-based amounts for each Task (budget line item), milestone payments, and actual expenses incurred, as further set forth in this Attachment B, dependent on acceptance by the State of monthly progress reports and deliverables as completed. Payment for activities under each Task will only be issued after all monthly progress reports are received and accepted by the State.
4. All payments to the Contractor shall be based upon the State's acceptance of the deliverables outlined in Attachment A.
5. The State reserves the right to withhold part or all of the contract funds if the State does not receive timely documentation of the successful completion of contract deliverables outlined in Attachment A. Any deliverables deemed unacceptable by the State will be rejected and subject to revision by the Contractor based upon a mutually agreed remediation plan.
6. The travel budget is set per the Budget Table within this Attachment. The State will be billed for the reasonable and necessary out of pocket expenses of the Contractor in accordance with Bulletin 3.

7. Reasonable expenses for State approved travel shall not exceed the State approved mileage and per diem rates at the time at which the expense occurred. The Contractor is responsible for submitting invoices in compliance with the current per diem and mileage rates, which change periodically. Currently these rates are as follows:
<http://humanresources.vermont.gov/compensation/expense-reimbursement>
8. The Contractor will not be reimbursed for other expenses, including supplies, benefits, or insurance, with the exception of cyber liability insurance and related technology professional liability insurance. Upon providing proof of payment and certifications of insurance, the Contractor may invoice the State up to the amount(s) specified in the Budget Table of this Attachment for actual costs incurred to secure required cyber liability insurance and related technology professional liability insurance.
9. Payments and/or reimbursement for meals, lodging, airfare, training/registration and other expenses shall only be issued after all supporting documentation and receipts are received and accepted by the State. Invoices with such expenses shall be accompanied by a Travel and Expense Form (Appendix I: Required Forms).
10. The total maximum amount payable under this contract shall not exceed \$2,158,266.09 for payments from the period of July 1, 2015 through June 30, 2017.
11. The State shall pay the Contractor at the following rates:

Task 1: Blueprint Data Quality Program Management

Task 1a: The Contractor may invoice the State \$10,000 per month up to the amount(s) specified in the Budget Table of this Attachment for Data Quality Program Management activities performed by Hans Kastensmith.

Task 2: Project Management of Statewide Blueprint Data Quality Initiatives

Task 2a: The Contractor may invoice the State \$4,000 per month up to the amount(s) specified in the Budget Table of this Attachment for project management of statewide Blueprint data quality initiatives, including Sprints and data optimization projects. These activities shall be performed by Katie McGee.

Task 2b: In addition to the monthly payments, the Contractor may invoice the State for milestone payments. Eligibility for the following milestone payments is contingent upon achieving a 5% increase in the proportion of patient-centered medical home (PCMH) patients for whom the Blueprint analytics vendor can generate core Accountable Care Organization (ACO) measures from clinical data within the Blueprint Clinical Registry.

Since these ACO measures are generated in Blueprint HSA profiles every 6 months, milestone payments may be invoiced as follows:

- \$15,000 upon Blueprint Executive Director confirmation of 5% increase in patients of Blueprint practices for whom ACO measures requiring clinical data can be generated via *first set* of HSA profiles within each State fiscal year (July 1 - June 30) within the contract term.

- \$15,000 upon Blueprint Executive Director confirmation of 5% increase in patients of Blueprint practices for whom ACO measures requiring clinical data can be generated via *second set* of HSA profiles within each State fiscal year (July 1 - June 30) within the contract term.

Task 3: Project Management for Onboarding of New Blueprint Data Quality Initiatives

The Contractor may invoice the State \$5,000 per month up to the amount(s) specified in the Budget Table of this Attachment for project management of onboarding new Blueprint data quality initiatives, including Sprints and data optimization projects. These activities shall be performed by Hans Kastensmith and/or by Katie McGee.

Task 4: Involvement in Projects Supporting Data Quality Work

The Contractor may invoice the State \$6,000 per month up to the amount(s) specified in the Budget Table of this Attachment for active engagement in projects supporting data quality work. These activities shall be performed by Katie McGee.

Task 5: Blueprint Clinical Registry Program, Project and Vendor Management

Task 5a Blueprint Clinical Registry Project and Vendor Management

For the period of July 1, 2015 to June 30, 2016, the Contractor may invoice the State \$8,194.44 per month, up to the amount(s) specified in the Budget Table of this Attachment, for Blueprint Clinical Registry Project Management activities. For the period of July 1, 2016 to June 30, 2017, the Contractor may invoice the State \$5,000.00 per month, up to the amount(s) specified in the Budget Table of this Attachment, for Blueprint Clinical Registry Project Management activities. Those project management activities include, but are not limited to, State required PM documentation deliverables for management of the DocSite migration and implementation project, including management of the Contractor's vendors (subcontractors) for this work. Services for work performed under this Task may be billed retroactive to September 1, 2015.

Task 5b: Blueprint Clinical Registry Program Management

For the period of July 1, 2015 to June 30, 2016, the Contractor may invoice the State \$7,233.44 a month for Blueprint Clinical Registry Program Management activities up to the amount(s) specified in the Budget Table of this Attachment for program management of the DocSite migration and implementation project. For the period of July 1, 2016 to June 30, 2017, the Contractor may invoice the State \$4,000.00 a month for Blueprint Clinical Registry Program Management activities up to the amount(s) specified in the Budget Table of this Attachment for program management of the DocSite implementation project. Those program management activities include management of the Contractor's vendors (subcontractors) for this work. Services for work performed under this Task may be billed retroactive to September 1, 2015.

Task 5c (formerly Task 1b): In addition to the monthly payments, the Contractor may invoice the State for milestone payments. Eligibility for milestone payments is contingent upon the following:

- Instance of DocSite validated as operational based on the Success Criteria: *One-time payment of \$2,500.00*

- Independent Review findings (if any) remediated/mitigated: *One-time payment of \$2,500.00*

Task 6: Hosting Setup Services and Support for the DocSite Migration Project

Task 6a: The Contractor may invoice the State up to the amount(s) specified in the Budget Table of this Attachment for project management services provided by the Contractor through its subcontractor VITL for direct oversight of hardware setup and establishment of a Test and Production hosting environments for the Blueprint Clinical Registry at Rackspace® at a rate of \$125 per hour, inclusive of travel and all other expenses. Services for work performed under this Task may be billed retroactive to June 1, 2015.

Task 6b: The Contractor may invoice the State up to the amount(s) specified in the Budget Table of this Attachment for hardware setup services within Rackspace® for the Blueprint Clinical Registry provided by Contractor through its subcontractor VITL at a rate of \$125 per hour, inclusive of travel and all other expenses. Services for work performed under this Task may be billed retroactive to June 1, 2015.

Task 6c: The Contractor may invoice the State a one-time milestone payment of \$21,335 upon verification of the completion of the hosting environment build for the Blueprint Clinical Registry within Rackspace® by the Contractor through its subcontractor VITL, including provision of local server administrative privileges and direct remote access to the Contractor's Subcontractor MDM Technologies.

Task 6d: The Contractor may invoice the State for the actual costs of one-time license fees upon proof of purchase and license for the following software required for successful operation of the Blueprint Clinical Registry up to the amount(s) specified in the Budget Table of this Attachment:

- SQL Server Enterprise (14 licenses).
- DocSite-specific third-party software, including:
 - Telerik
 - Active Reports Professional
 - MediSpan
 - Nevron Chart for .NET
 - EVO PDF
 - Others as required

Task 7: Completion of Build for Operational Instance of DocSite

The Contractor may invoice the State up to the amount(s) specified in the Budget Table of this Attachment for technical services required to complete the build of an operational instance of the DocSite software, defined by the Success Criteria, within the Rackspace® hosting environment at a rate of \$150 per hour.

Task 8: DocSite Validation and Functional Testing and Transition Support

The Contractor may invoice the State up to the amount(s) specified in the Budget Table of this Attachment for coordinating functional testing for the operational instance of DocSite and

validating this system against the success criteria defined by the State in the Covisint License at a rate of \$150 per hour.

Task 9: Message Processing Investigation

Task 9a: The Contractor may invoice the State up to the amount(s) specified in the Budget Table of this Attachment for technical services required to establish message processing functionality within the State's instance of the DocSite software at a rate of \$150 per hour.

Task 9b: The Contractor may invoice the State up to the amount(s) specified in the Budget Table of this Attachment for coordinating interface testing and validation for the operational instance of DocSite at a rate of \$150 per hour.

Task 10: Reporting Configuration and Validation for Operational Instance of DocSite

Task 10a: The Contractor may invoice the State up to the amount(s) specified in the Budget Table of this Attachment for technical services required to establish reporting services functionality within the State's instance of the DocSite software at a rate of \$150 per hour.

Task 10b: The Contractor may invoice the State up to the amount(s) specified in the Budget Table of this Attachment for coordinating report testing for the operational instance of DocSite at a rate of \$150 per hour.

Task 11: Initial and Ongoing Security Assessments, Penetration Tests, and Remediation

Task 11a: The Contractor may invoice the State up to the amount(s) specified in the Budget Table of this Attachment to run initial application and network penetration testing and vulnerability scans against the State's pre-production instance of DocSite in VITL's Rackspace® hosting environment; updated and or develop application security plan, control assessments, risk assessment, and disaster recovery plan, at a rate of \$201.42 per hour.

Task 11b: In addition, the Contractor may invoice the State for milestone payments. Eligibility for milestone payments is contingent upon the following:

- Log file and final report from initial penetration test delivered to AHS Security Director: *One-time payment of \$5,000.00*
- High-risk penetration test findings and vulnerabilities remediated/mitigated: *One-time payment of \$5,000.00*

Task 11c: The Contractor may invoice the State up to a maximum of \$5,940 quarterly for penetration tests up to the amount(s) specified in the Budget Table of this Attachment to cover the costs of tests beyond the initial task (Task11a)).

Task 12: Verification of Source Code Delivery from Covisint

Task 12a: The Contractor may invoice the State at the rate of \$150 per hour up to the amount(s) specified in the Budget Table of this Attachment for technical services related to the verification, on behalf of the State, that the licensed software conforms to the documentation provided by Covisint, that the media on which it is provided is free of material damage and defects, and that the delivered software does not contain any routine or element that could be considered malware.

Task 12b: In addition, the Contractor may invoice the State for a milestone payment. Eligibility for the milestone payment is contingent upon the successful rebuild DocSite from source code in the Production environment prior to the expiration of Covisint's 90-day warranty period for the DocSite software: *one-time payment of \$15,000.*

Task 13: Replace Covisint Connect Functions with Rhapsody

The Contractor may invoice the State up to the amount(s) specified in the Budget Table of this Attachment for technical services required to replace Connect interface engine functions with VITL's Rhapsody interface engine for the State's instance of the DocSite software at a rate of \$125 per hour.

Task 14: Transition and Connect Production Data Feeds to Blueprint Clinical Registry

The Contractor may invoice the State up to the amount(s) specified in the Budget Table of this Attachment for technical services required to transition and connect Production data feeds to the Blueprint Clinical Registry at a rate of \$150 per hour.

Task 15: Ongoing Hosting of Blueprint Clinical Registry

Task 15a1: The Contractor may invoice the State for hosting for the Test and Production environments at a rate of \$9,467.17 per month, up to the amount(s) specified in the Budget Table of this Attachment.

Task 15a2: The Contractor may invoice the State for encryption of data backups at a rate of \$100.00 per month, up to the amount(s) specified in the Budget Table of this Attachment.

Task 15b: The Contractor may invoice the State at a rate of \$1,200.00 per month, up to the amount(s) specified in the Budget Table of this Attachment, for network assets allocated to the Blueprint Clinical Registry, including, but not limited to, firewall, intrusion detection, and network use.

Task 15c: The contractor may invoice the state for VITL hosting support at \$125.00 per hour, up to the amount(s) specified in the Budget Table of this Attachment.

Task 16: Technical Support of Blueprint Clinical Registry

The Contractor may invoice the State up to the amount(s) specified in the Budget Table of this Attachment for technical support of the Blueprint Clinical Registry, including maintenance and operations, enhancement requests, and database optimization, for the Test and Production environments, at a rate of \$150 per hour.

Task 17: Blueprint Registry User Support

The Contractor may invoice the State up to the amount(s) specified in the Budget Table of this Attachment for the establishment of Help Desk and provision of Tier 1-3 level support for the Blueprint Clinical Registry. There is a set-up fee of \$8,000 to establish the help desk and ticketing system. The monthly rate will be \$3,333.00 for staff support.

Task 18: Delivery of Clinical Data Extracts from the Blueprint Clinical Registry

The Contractor may invoice the State up to the amount(s) specified in the Budget Table of this Attachment for development and secure delivery of clinical data extracts, at a rate of \$150 per hour.

12. Payments contingent on Blueprint-accepted data extracts. Expanded and full clinical data extracts from the Blueprint Clinical Registry, which meet the specifications of Attachment A, Task 18, Deliverable 1 (Prime Deliverable), constitute the primary and ultimate deliverables for this contract. Beginning with services provided on July 1, 2016 and thereafter, payments for Tasks 5a, 5b, 6a, 15c, 16, and 17b will be contingent upon the Contractor having delivered to the State and/or its State-authorized designees a Prime Deliverable (accepted in writing by the State) within 6 months prior to the invoice date, except in the case of invoices for the final month of the contract. In the case of invoices for the final month of the contract, payments for Tasks 5a, 5b, 6a, 15c, 16, and 17b will be contingent upon the Contractor having delivered to the State and/or its State-authorized designees a Prime Deliverable (accepted in writing by the State) in the final month of the contract or later. Contractor agrees that failure to deliver the products and services under this specific task (Task 18) will constitute a material breach of the contract.

Up to 10 % of the total maximum amount payable under this contract for each State Fiscal Year may be reallocated among these tasks and budget categories for each State Fiscal Year upon written authorization from the Blueprint Executive Director.

Budget Table

Task	Description	Unit Amount July 1, 2015 - June 30, 2016 (SFY 2016)	Budget Maximum For Services Provided July 1, 2015 - June 30, 2016 (SFY 2016)	Unit Amount July 1, 2016 - June 30, 2017 (SFY 2017)	Budget Maximum For Services Provided July 1, 2016 - June 30, 2017 (SFY 2017)
1a	Data Quality Program Management	\$10,000 per month	\$120,000.00	\$10,000 per month	\$120,000.00
2a	Project Management of Statewide Blueprint Data Quality Initiatives	\$4,000 per month	\$48,000.00	\$4,000 per month	\$48,000.00
2b	Milestone payments for Data Quality Initiatives	\$15,000 twice per year (based on eligibility)	\$30,000.00	\$15,000 twice per year (based on eligibility)	\$30,000.00
3	Project Management for Onboarding New Blueprint Data Quality Initiatives	\$5,000 per month	\$60,000.00	\$5,000 per month	\$60,000.00
4	Involvement in Projects Supporting Data Quality Work	\$6,000 per month	\$72,000.00	\$6,000 per month	\$72,000.00
5a	DocSite Migration and Operations Project and Vendor Management	\$8,194.44 per month	\$81,944.40	\$5,000.00 per month	\$60,000.00
5b	Blueprint Clinical Registry Program Management of Operations and Vendor Management	\$7,233.44 per month	\$72,334.40	\$4,000.00 per month	\$48,000.00
5c (was 1b)	Milestone payments for DocSite success criteria validation and remediation of Independent Review findings (if any)	Two payments of \$2,500 each (based on eligibility)	\$5,000.00		
6a	VITL project management services for hosting environment setup	\$125 per hour	\$6,000.00		\$2,500.00

Task	Description	Unit Amount July 1, 2015 - June 30, 2016 (SFY 2016)	Budget Maximum For Services Provided July 1, 2015 - June 30, 2016 (SFY 2016)	Unit Amount July 1, 2016 - June 30, 2017 (SFY 2017)	Budget Maximum For Services Provided July 1, 2016 - June 30, 2017 (SFY 2017)
6b	VITL hardware setup and support services for Rackspace® hosting environment	\$125 per hour	\$21,625.00		
6c	Milestone payment for verification of complete hosting environment build for Blueprint Clinical Registry	One payment of \$21,335 (based on eligibility)	\$21,335.00		
6d	Software licenses to operate Blueprint Clinical Registry	documented, actual costs	\$45,390.10	documented, actual costs	\$20,000.00
7	Build for Operational Instance of DocSite	\$150 per hour	\$20,250.00		
8	DocSite Validation and Functional Testing and Transition Support	\$150 per hour	\$11,133.00		
9a	Establish Message Processing Functionality for DocSite Software	\$150 per hour	\$20,250.00		
9b	Interface Testing and Validation	\$150 per hour	\$3,000.00		
10a	Establish Reporting Services for DocSite Software	\$150 per hour	\$12,000.00		
10b	Reporting Testing and Validation	\$150 per hour	\$15,000.00		
11a	Initial application and network penetration testing and vulnerability scan for Blueprint Clinical Registry	\$201.42 per hour	\$98,929.45		
11b	Milestone payments for security documentation and remediation of findings (if any)	Two payments of \$5,000 each (based on eligibility)	\$10,000.00		
11c	Quarterly penetration tests	\$5,940 per test	\$5,940.00	\$5,940 per test	\$23,760.00

Task	Description	Unit Amount July 1, 2015 - June 30, 2016 (SFY 2016)	Budget Maximum For Services Provided July 1, 2015 - June 30, 2016 (SFY 2016)	Unit Amount July 1, 2016 - June 30, 2017 (SFY 2017)	Budget Maximum For Services Provided July 1, 2016 - June 30, 2017 (SFY 2017)
12a	Verification of source code delivery from Covisint	\$150 per hour	\$9,000.00		
12b	Milestone payment for rebuild of DocSite from source code in State's hosting environment (at VITL's Rackspace®) prior to expiration of Covisint's software warranty period	One payment of \$15,000 (based on eligibility)	\$15,000.00		
13	Replace Covisint Connection Functions with Rhapsody	\$125 per hour	\$13,150.00		
14	Transition and Connect Production Data Feeds to Blueprint Clinical Registry	\$150 per hour	\$161,187.00		
15a1	Hosting for Blueprint Clinical Registry	\$9467.17 per month	\$94,671.70	\$9467.17 per month	\$113,606.04
15a2	Encryption of backups for Blueprint Clinical Registry	\$100.00 per month	\$200.00	\$100.00 per month	\$1,200.00
15b	Network Assets Allocated to Blueprint Clinical Registry	\$1,200 per month	\$14,400.00	\$1,200 per month	\$14,400.00
15c	VITL Hosting Support (Ongoing)	\$125.00 per hour	\$15,500.00	\$125.00 per hour	\$30,000.00
16 & 18	Technical Support of Blueprint Clinical Registry & Delivery of Clinical Data Extracts from the Blueprint Clinical Registry	\$150 per hour	\$127,699.50	\$150 per hour	\$138,376.50
17a	Blueprint Registry User Support Milestone	One-time \$8,000 for set up	\$8,000.00		
17b	Blueprint Registry User Support Monthly	monthly \$3,333.00 for support	\$13,334.00	monthly \$3,333.00 for support	\$39,996.00

Task	Description	Unit Amount July 1, 2015 - June 30, 2016 (SFY 2016)	Budget Maximum For Services Provided July 1, 2015 - June 30, 2016 (SFY 2016)	Unit Amount July 1, 2016 - June 30, 2017 (SFY 2017)	Budget Maximum For Services Provided July 1, 2016 - June 30, 2017 (SFY 2017)
N/A	Cyber Liability and Related Professional Liability Insurance	Documented, actual costs	\$28,577.00	Documented, actual costs	\$28,577.00
N/A	Expenses and Travel	State of Vermont approved mileage and per-diem rates, and reasonable and necessary out-of-pocket expenses	\$18,000.00	State of Vermont approved mileage and per-diem rates, and reasonable and necessary out-of-pocket expenses	\$9,000.00
Total State Fiscal Year Budget			\$1,298,850.55		\$859,415.54
Total Contract Budget					\$2,158,266.09

Department of Vermont Health Access Financial Report Form															
As of Date:	6/30/2016														
Contractor Name:	Capitol Health Associates, LLC	Grant/Contract Number:	29244_Am#1												
Grantee/Contractor's Contact Person:	Rue, Katesamith	Reporting Period:	July 1, 2015 - June 30, 2016												
Grantee/Contractor's Email Address:	hck@capitolhealthdc.com														
	TOTAL CONTRACT BUDGET	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March	April	May	June	TOTAL EXPENDITURES TO DATE	BALANCE
Phase A Description															
Task 1a: Data Quality Program Management	\$ 120,000.00													\$ -	\$ 120,000.00
Task 1b: Milestone payments for DocSite success criteria validation and remediation of Independent Review findings (if any)	\$ 5,000.00													\$ -	\$ 5,000.00
Task 2: Project Management of Statewide Blueprint Data Quality Initiatives	\$ 48,000.00													\$ -	\$ 48,000.00
Task 2b: Milestone payments for Data Quality initiatives	\$ 30,000.00													\$ -	\$ 30,000.00
Task 3: Project Management for Onboarding New Blueprint Data Quality Initiatives	\$ 60,000.00													\$ -	\$ 60,000.00
Task 4: Involvement in Projects Supporting Data Quality	\$ 72,000.00													\$ -	\$ 72,000.00
Task 5a: DocSite Migration and Operations Project and Vendor Management	\$ 81,944.44													\$ -	\$ 81,944.44
Task 5b: BCR Program Management of Operations and Vendor Management	\$ 72,334.44													\$ -	\$ 72,334.44
Task 6a: VITL Project management services for hosting environment setup	\$ 6,000.00													\$ -	\$ 6,000.00
Task 6b: VITL Project management services for "Backspace" hosting environment	\$ 21,625.00													\$ -	\$ 21,625.00
Task 6c: Milestone payment for verification of complete hosting environment build for Blueprint Clinical Registry	\$ 21,335.00													\$ -	\$ 21,335.00
Task 6d: Software licenses to operate Blueprint Clinical Registry	\$ 45,939.10													\$ -	\$ 45,939.10
Task 7: Build for Operational Instances of DocSite	\$ 20,250.00													\$ -	\$ 20,250.00
Task 8: DocSite Validation and Functional Testing and Transition Support	\$ 11,133.00													\$ -	\$ 11,133.00
Task 9a: Establish Message Processing functionality for DocSite Software	\$ 20,250.00													\$ -	\$ 20,250.00
Task 9b: Interface Testing and Validation	\$ 3,000.00													\$ -	\$ 3,000.00
Task 10a: Establish Reporting Services for DocSite Software	\$ 12,000.00													\$ -	\$ 12,000.00
Task 10b: Reporting Testing and Validation	\$ 15,000.00													\$ -	\$ 15,000.00
Task 11a: Initial application and network penetration testing and vulnerability scan for Blueprint Clinical Registry	\$ 99,930.00													\$ -	\$ 99,930.00
Task 11b: Milestone payments for security assessment and remediation (if any)	\$ 10,000.00													\$ -	\$ 10,000.00
Task 11c: Ongoing remediation (if any)	\$ 5,940.00													\$ -	\$ 5,940.00
Task 12a: Verification of source code delivery from GovSint	\$ 9,000.00													\$ -	\$ 9,000.00
Task 12b: Milestone payment for rebuild of DocSite from source code in State's hosting environment (at VITL's "Backspace") prior to expiration of GovSint's software license	\$ 15,000.00													\$ -	\$ 15,000.00
Task 13: Replicate GovSint Connection Functions with BlueSentry	\$ 13,150.00													\$ -	\$ 13,150.00
Task 14: Transition and Connect Production Data Feeds to Blueprint Clinical Registry	\$ 161,187.05													\$ -	\$ 161,187.05
Task 15a: Hosting for Blueprint Clinical Registry	\$ 94,671.70													\$ -	\$ 94,671.70
Task 15b: Encryption of backups for Blueprint Clinical Registry	\$ 200.00													\$ -	\$ 200.00
Task 15c: Network Assets Allocated to Blueprint Clinical Registry	\$ 14,400.00													\$ -	\$ 14,400.00
Task 15d: VITL Hosting Support (Ongoing)	\$ 15,500.00													\$ -	\$ 15,500.00
Task 16: Technical Support of Blueprint Clinical Registry	\$ 127,700.00													\$ -	\$ 127,700.00
Task 17: Blueprint Registry User Support	\$ 21,334.00													\$ -	\$ 21,334.00
Task 18: Other Liability and Related Professional Liability Insurance and Travel	\$ 28,572.00													\$ -	\$ 28,572.00
Task 19: Other Liability and Related Professional Liability Insurance and Travel	\$ 18,000.00													\$ -	\$ 18,000.00
TOTAL CONTRACT AMOUNT	\$ 1,298,857.73	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,298,857.73
SIGNATURE OF AUTHORIZING OFFICIAL:															
State Only:	\$ 1,298,857.73	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,298,857.73
Program code: 41692															

Please Note: Only certain white cells are unlocked for editing, please enter the funding amount on the same line as the specific subcategory; the highlighted main categories will autofill. For categories with no listed subcategories, please enter a title in the space provided for each subcategory being billed.

Department of Vermont Health Access Financial Report Form														
As of Date:	6/30/2016													
Contractor Name:	Capitol Health Associates, LLC													
Grantee/Contractor's Contact Person:	Hans Kosenusmith hck@capitolhealthac.com													
Grantee/Contractor's Email Address:														
Contract Number:	29244, Am#2													
Reporting Period:	July 1, 2016 - June 30, 2017													
Phase & Description	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March	April	May	June	TOTAL EXPENSES TO DATE	BALANCE
Phase & Description														
Task 1a: Data Quality Program Management	\$ 120,000.00												\$ 120,000.00	
Task 2a: Project Management of Statewide Blueprint Data Quality Initiatives	\$ 46,000.00												\$ 46,000.00	
Task 2b: Milestone payments for Data Quality Initiatives	\$ 30,000.00												\$ 30,000.00	
Task 3: Project Management for Onboarding New Blueprint Data Quality Initiatives	\$ 60,000.00												\$ 60,000.00	
Task 4: Involvement in Projects Supporting Data Quality Work	\$ 72,000.00												\$ 72,000.00	
Task 5a: DocSite Migration and Operations Project and Vendor Management	\$ 60,000.00												\$ 60,000.00	
Task 5b: RFP Process Management of Operations and Vendor Management	\$ 46,000.00												\$ 46,000.00	
Task 5c: (formerly 1b): Milestone payments for DocSite success criteria validation and remediation of Independent Review Findings (if any)	\$ 2,500.00												\$ 2,500.00	
Task 6a: VIT project management services for hosting Radspace® hosting environment													\$ -	
Task 6b: Milestone payment for verification of complete hosting environment build for Blueprint Clinical Registry													\$ -	
Task 6c: Software license to operate Blueprint Clinical Registry	\$ 20,000.00												\$ 20,000.00	
Task 7: Build for Operational Instance of DocSite													\$ -	
Task 8: DocSite Validation and Functional Testing and Transition Support													\$ -	
Task 9a: Establish Message Processing Functionality for DocSite Software													\$ -	
Task 9b: Interface Testing and Validation													\$ -	
Task 10a: Establish Reporting services for DocSite Software													\$ -	
Task 10b: Reporting, Testing and Validation													\$ -	
Task 11a: Initial application and network penetration testing and vulnerability scan for Blueprint Clinical Registry													\$ -	
Task 11b: Milestone payments for security penetration and remediation of findings (if any)	\$ 23,760.00												\$ 23,760.00	
Task 11c: Verification of findings (if any)													\$ -	
Task 12a: Verification of source code delivery from Consultant													\$ -	
Task 12b: Milestone payment for rebuild of DocSite from source code in State's hosting environment (at VIT's Radspace®) prior to expiration of Covisint's software warranty period													\$ -	
Task 13: Replicate Consultant Connection Functions with Radspace®													\$ -	
Task 14: Transition and Connect Production Data Feeds to Blueprint Clinical Registry	\$ 113,606.04												\$ 113,606.04	
Task 15a: Encryption of backups for Blueprint Clinical Registry	\$ 1,200.00												\$ 1,200.00	
Task 15b: Network Asset Allocated to Blueprint Clinical Registry	\$ 14,400.00												\$ 14,400.00	
Task 15c: VIT Hosting Support (Ongoing)	\$ 30,000.00												\$ 30,000.00	
Task 16: Technical Support of Blueprint Clinical Registry	\$ 138,376.50												\$ 138,376.50	
Task 17: Blueprint Registry User Support	\$ 39,996.00												\$ 39,996.00	
Cyber Liability and Related Professional Liability Insurance	\$ 26,577.00												\$ 26,577.00	
Travel Expenses and Travel	\$ 5,000.00												\$ 5,000.00	
TOTAL CONTRACT AMOUNT	\$ 859,415.54	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 859,415.54	\$ -
SIGNATURE OF AUTHORIZING OFFICIAL:														
Program code: 41692	\$ 859,415.54	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 859,415.54
State Only:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Please Note: Only on-line white cells are unlocked for editing, please enter the funding amount on the same line as the specific subcategory; the highlighted main categories will autofill. For categories with no listed subcategories, please enter a title in the space provided for each subcategory being billed