

AMENDMENT

It is agreed by and between the State of Vermont, Department of Vermont Health Access (hereafter called the "State") and Onpoint Health Data (hereafter called the "Contractor") that the contract on the subject of data services, including collection, processing, editing, validation testing, consolidation, and data management, herein collectively referred to as the Vermont Healthcare Claims Uniform Reporting and Evaluation System (VHCURES), effective May 16, 2011, is hereby amended, effective December 11, 2012, as follows:

1) By deleting on page 1 of 32, Section 3 (Maximum Amount) and substituting in lieu thereof the following Section 3:

Maximum Amount. In consideration of the services to be performed, as stated in the original contract, the State agrees to pay the Contractor, in accordance with the payment provisions specified in Attachment B, a sum not to exceed \$1,551,750.

2) By deleting on page 1 of 32, Section 4 (Contract Term) and substituting in lieu thereof the following Section 4:

Contract Term. The period of the Contractor's performance shall begin upon signature of the State and end on December 31, 2013. As approved by the State, pre-award costs occurring on January 1, 2011 and thereafter, otherwise reimbursable according to the terms of Attachment A of this agreement may be allowed. This contract may be extended for an additional one year period subject to the agreement of both parties.

3) By adding to Attachment A, Specification of Work, Section 5, the following:

5.4 The Contractor will complete seven (7) phases of work as follows:

Phase 1: Blueprint Evaluation & Reporting

- Construct member attribution to Vermont Blueprint practices
- Determine non-Blueprint comparison group method for evaluations
- Build data to support evaluation of and reporting on Blueprint and other financial models
- Blueprint evaluation reporting
- Blueprint financial reporting and projections
- Blueprint practice reporting
- **Phase 1 Deliverables** - Blueprint financial reporting, projections, and Blueprint evaluation for commercial, Medicaid, and Medicare claims data with accompanying graphics and written report

Phase 2: High-Level Requirements for Clinical Data Effort

- Establish stakeholder work group to include project leads from Onpoint and Vermont, as well as subject matter experts in claim data, clinical data, and Blueprint program

- Validate and enhance Blueprint integrated clinical and claims data analytic requirements and needs
- Obtain data usage approvals, as necessary
- **Phase 2 Deliverables** - Analytics Requirements document and description of required source data. This document will describe Vermont's needs and data required to meet these needs; it will not outline potential data solutions.

Phase 3: Healthy Living Workshop and VCCI Data Assessment

- Link Blueprint program information and other data sources with claims data
- **Phase 3 Deliverables** - Assessment document detailing HLW, VCCI, and other data sources that have been analyzed, the results of data profiling, and recommendations on how these data can be used to deliver on the Analytics Requirements document identified in Phase 2. Included in this assessment will be the relative strengths/weakness of the data sources to support the stated requirements. An outcome of this phase may be a need to modify project goals.

Phase 4: DocSite (Clinical, SASH, CHT) Data Assessment

- Link Blueprint program information and DocSite data with claims data
- **Phase 4 Deliverables** - Assessment document detailing DocSite sources that have been analyzed, the results of data profiling, matching rates, and recommendations on how these data can be used to deliver on the Analytics Requirements document identified in Phase 2. Included in this assessment will be the relative strengths/weakness of the data sources to support the stated requirements. After Phase 4, a tollbooth review will be held to modify and approve direction for phases 6 and 7.

Phase 5: Initial Customized Report Development

- Develop reporting capabilities based upon the new linked claim and clinical data
- **Phase 5 Deliverables** - Critical reports and analyses required for Blueprint evaluation and reporting. Order of deliverables is as follows: Healthy Living, VCCI, Clinical/SASH/CHT.

Phase 6: Integrated Database & Report Suite Development

- Onpoint will integrate claims and clinical data and expand reporting capabilities
- **Phase 6 Deliverable** - A suite of reports based on integrated data from multiple claim and clinical data sources

Phase 7: Self-service Reporting Capabilities

- Onpoint will incorporate reports from phases 5 and 6 into the Onpoint DRS portal for Blueprint and other approved user reporting

- **Phase 7 Deliverable** - DRS reports and tools, developed by the Contractor, to incorporate integrated claim and clinical data

- 4) **By deleting on page 8 of 32, Attachment A, Exhibit 1, and substituting for it Exhibit 1 to Attachment A which is included within this amendment on page 7.**
- 5) **By deleting on page 9 of 32, Attachment B in its entirety and substituting in lieu thereof the following Attachment B:**

The maximum dollar amount payable under this agreement is not intended as any form of a guaranteed amount. The Contractor will be paid for services specified in Attachment A, for services actually performed, 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 maximum amount payable under this contract for service and expenses shall not exceed \$1,551,750 including maximum payable travel expenses specified below under section 3. The maximum allowable payable under this contract, excluding the maximum payable travel expenses, shall be subdivided as follows:

A. Custom Medicaid Studies	\$ 122,450.00
B. Custom Blueprint Studies	\$ 269,950.00
C. Blueprint Chronic Conditions special study	\$ 15,750.00
D. Special Reports and Studies for Other Departments	\$ 114,950.00
E. Phases 1-7 in Table 1, below	<u>\$1,002,650.00</u>
Total	\$1,525,750.00

The hourly rate for staff is as follows:

- A. Custom Medicaid Studies
Principal: \$250/hour
Senior Manager: \$225/hour
Analyst: \$125/hour
Data: \$125/hour
- B. Custom Blueprint Studies
Principal: \$250/hour
Senior Manager: \$225/hour
Analyst: \$125/hour
Data: \$125/hour
- C./D. Special Reports and Studies for Other Departments
Principal: \$250/hour
Senior Manager: \$225/hour

Analyst: \$125/hour

2. Payments for subcontractors will only be made upon approval (See Attachment C, # 15).
3. The State shall reimburse Contractor for reasonable and necessary expenses incurred in performance of this contract. Total travel expenses under the contract shall not exceed \$26,000.00. Travel estimate covers the costs associated with monthly on-site visits per year. Reasonable expenses for State approved travel will be reimbursed on an as-incurred basis at the state required per diems and limits as outlined in Bulletin 3.4. The Contractor will not be reimbursed for other expenses, including supplies, benefits, or insurance.
4. Contractor will submit an invoice on a monthly basis to the State for services provided and expenses incurred under this contract #18943 during the previous month. Payments to the contractor relating to this contract as outlined in the scope by work will be rendered only after review and acceptance of the State's Director of Data Analysis. Contractor shall subdivide invoicing for separate reports provided under A. Custom Medicaid Studies; B. Custom Blueprint Studies; C Blueprint Chronic Conditions special study ; D. Special Reports and Studies for Other Departments: and, E Phase 1-7. Each invoice must include: a unique invoice number, contract number, dates of service, itemized hours by assigned staff multiplied by hourly rates, a list of allowable expenses incurred, and itemized billing must be documented to reflect linkage with the Plan of Operations. All billing for mileage shall include the points of origin and destination and the number of miles traveled. Only actual charges will be paid as outlined in bulletin 3.4.

Invoices shall be submitted to:

Kate Jones
Department of Vermont Health Access
312 Hurricane Lane
Williston, VT 05495
kate.jones@state.vt.us

Contractor's remit address:

Onpoint Health Data
16 Association Drive
PO Box 360
Manchester, ME 0435 1-0360

Table 1: Total Estimated Cost of Phases 1-7

Task	Staff	Estimated Hours	Contract Rates	Pricing	Phase Totals
Phase 1	Sr Manager	620	\$225.00	\$139,500	
	Analyst	632	\$125.00	\$79,000	
	Principal - Compass	300	\$250.00	\$75,000	
	Principal - Gottlieb	40	\$250.00	\$10,000	
				-	\$303,500
Phase 2	Sr Manager	171	\$225.00	\$38,475	
	Analyst	19	\$125.00	\$2,375	
				-	\$40,850
Phase 3	Sr Manager	66	\$225.00	\$14,850	
	Analyst	94	\$125.00	\$11,750	
				-	\$26,600
Phase 4	Sr Manager	96	\$225.00	\$21,600	
	Analyst	144	\$125.00	\$18,000	
				-	\$39,600
Phase 5	Sr Manager	415	\$225.00	\$93,375	
	Analyst	425	\$125.00	\$53,125	
				-	\$146,500
Phase 6	Sr Manager	768	\$225.00	\$172,800	
	Analyst	1,126	\$125.00	\$140,750	
				-	\$313,550
Phase 7	Sr Manager	328	\$225.00	\$73,800	
	Analyst	466	\$125.00	\$58,250	
				-	\$132,050
Subtotal Staff Costs					\$1,002,650
Estimated Travel (1 trip each month for two staff)					\$26,000
Total Estimated Cost					\$1,028,650

The total cost for each employee category, as specified above, includes any indirect rate that covers the administrative expenses, occupancy fees, utilities, repair and maintenance of equipment, office maintenance, audit and legal fees, insurance, telephone, postage, supplies, etc. The State does not guarantee the assignment of any minimum number of hours or other work under this contract.

This amendment consists of 7 pages. Except as modified by this amendment and any previous amendments, all provisions of this contract, (#18943) dated May 16, 2011, shall remain unchanged and in full force and effect.

STATE OF VERMONT:

CONTRACTOR:

Mark Larson, Commissioner
AHS/DVHA

James H. Harrison, President/CEO
Onpoint Health Data

