

AMENDMENT

It is hereby agreed by and between the State of Vermont, Agency of Human Services, Department of Vermont Health Access (hereafter referred to as the "State" or the "Department") and HP Enterprise Services, LLC, a Delaware limited liability company (hereafter referred to as the "Contractor") that the Title XIX Medicaid Contract for operation of the Vermont Medicaid Management Information System (MMIS), entered into January 01, 2004 (hereafter referred to as the "Contract"), is hereby amended effective upon execution by the Department's Director, as follows:

Replace in Amendment # 11, Item #1, page 1 of 10, with the following:

"5. Maximum amount: The State agrees to pay Contractor pursuant to the payment provisions specified in Attachment B, a sum not to exceed \$ 101,486,636.41.

Replace in Amendment #11, on page 2 of 11, Operational Invoice/Payment Schedule for the period of January 1, 2012 – December 31, 2012 and substituting in lieu thereof the following updated Operational Invoice/Payment Schedule:

January 1, 2012- December 31, 2012

VOLUME PARAMETERS	Claims Processing	Drug Transactions
High Estimate	7,500,000	4,500,000
Median Estimate	6,000,000	3,500,000
Low Estimate	4,500,000	2,500,000
FIXED PRICE		Annual Amount
Claims Processing		\$ 7,844,903
Drug Payment Transactions		\$ 202,932
Provider Relations		\$ 1,623,459
Management Reporting (Business Objects, CRLS, MAR, SURS)		\$ 507,331
Subtotal		\$ 10,178,626
Added Services (As Utilized)		
Clinical Specialist		\$ 98,275
DAIL Project Coordinator		\$ 53,607
Translator Services		\$ 100,000
Radiology Management Services *	\$34.25/PA	\$ 685,000
Subtotal		\$ 936,882
		\$ 11,227,007

Amount invoiced each Month: \$848,218

**Dollars represented as Annual Amount is for estimation purposes only based on 20K processed annually.
 Actual invoice will be rate (\$34.25) times actual Prior Authorizations processed.*

By adding Attachment F Part XI Narrative and Price Proposal Submitted for Additional Services as Utilized dated November 1, 2011, which is an attachment of this amendment on page 3.

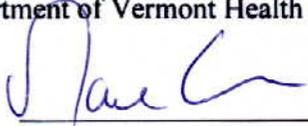
STATE OF VERMONT, DEPARTMENT OF VERMONT HEALTH ACCESS
CONTRACT FOR PERSONAL SERVICES
HP ENTERPRISE SERVICES, LLC

CONTRACT #8430
AMENDMENT # 12
PAGE 2 OF 7

This amendment consists of 7 pages. Except as modified by this amendment and any previous Amendments, all provisions of this contract (#8430), dated January 1, 2004, shall remain unchanged and in full force and effect.

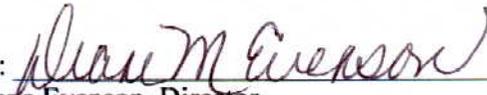
STATE OF VERMONT

Department of Vermont Health Access

By: 
Mark Larson, Commissioner
Department of Vermont Health Access

CONTRACTOR:

HP Enterprise Services, LLC

By: 
Diane Evenson, Director
US Government, State and Local

Date: March 19, 2012

Date: March 16, 2012

Attachment F, Part XI
 HP Narrative and Price Proposal November 1, 2011

Medical Assistance Provider Incentive Repository (MAPIR)

Core MAPIR Ongoing Development and Support:

The State of Vermont has indicated participation in the development of the core MAPIR application in coordination with State of Pennsylvania as evidenced by the attached signed letter of intent (Exhibit A). DVHA agrees to the payment schedule presented below under Total Cost Per State related to the ongoing development and support of the core MAPIR application. However, by mutual agreement and in accordance with the approved statement of work, pricing may be adjusted if the number of members in the MAPIR Collaborative increases or decreases.

Services Provided	Time Period	Payment Date	Quarterly Price Per State
MAPIR: Enhancements, Ongoing Support and Maintenance	Oct. 2011 – Dec. 2011	December 2011	\$59,538.00
MAPIR: Enhancements, Ongoing Support and Maintenance	Jan. 2012 - March 2012	March 2012	\$59,538.00
MAPIR: Enhancements, Ongoing Support and Maintenance	April 2012 - June 2012	June 2012	\$59,538.00
MAPIR: Enhancements, Ongoing Support and Maintenance	July 2012 – Sept. 2012	September 2012	\$59,538.00
MAPIR: Enhancements, Ongoing Support and Maintenance	Oct. 2012 – Dec. 2012	December 2012	\$59,538.00
TOTAL FOR 15 MONTHS			\$297,690.00

Exhibit B to this document titled MAPIR Enhancements, Ongoing Development and Support Statement of Work details scope of work to be performed.

VT Specific MAPIR Integration/Customization:

The scope of this effort is specific to the integration of the Core MAPIR enhancements into the VT MMIS environment, any associated custom effort required for Vermont specific needs and ongoing production maintenance activities.

The hours provided below are estimates only. HPES will produce a monthly bill for the actual hours used each month. The bill will include the hours used for each activity listed below. HPES will be reimbursed at the modification hourly rate for additional CSR Hours as described in Section 11 of Amendment #5 of this contract.

Installation and Customization of Core MAPIR release C:

MAPIR Installation and Customization	Hours
Environmental Changes (DB2/WebSphere/Stored procedures)	200
MAPIR Installation	120
State Configuration	80
Interface Development	
MMIS4 Modification	80
MMIS1 Modification	80
Additional Customization	60
Project Management	
Project Management	80
Testing	
Testing of Installation and Customization	120
Grand Total	820

Installation and Customization of Core MAPIR release D:

MAPIR Installation and Customization	Hours
Environmental Changes (DB2/WebSphere/Stored procedures)	200
MAPIR Installation	120
State Configuration	80
Interface Development	
Additional Customization	80
Project Management	
Project Management	60
Testing	
Testing of Installation and Customization	110
Grand Total	650

VT MAPIR Application Production Support

For the purposes of planning, HP estimates approximately 20 hours per month associated with the ongoing technical support of the VT production environment in addition to the installation and customization estimates presented above.

ACA Section 1104 Compliance

Section 1104 of the ACA (H.R.3590) establishes new requirements for the administrative transactions that will improve the utility of the existing HIPAA transactions and reduce administrative costs. All HIPAA covered entities must comply with the CACQ CORE operating rules. HP will evaluate the new operating rules for the EDI 270/271 and 276/277 transactions for impact to the existing MMIS under this scope of work. Specifically, HP will evaluate the Connectivity and Security Rules and Data content Rules defined for ACA Section 1104 as described below. These rules apply for EDI 270/271 and 276/277 by January 1, 2013.

- Connectivity and Security Rules (270/271 and 276/277)
 - Internet based connectivity and transmission supported
 - Both SOAP/WSDL and Multi-part MIME protocols supported
 - Authentication supports either Name/Password or X.509 Token
- Data Content Rules (270/271)
 - Generic requests for eligibility must affirm or deny coverage in ~50 service categories
 - Specific (service category level) requests for these ~50 categories must be responded to appropriately
 - Deductible, coinsurance and copay requirements must be reported by service category if applicable
 - Remaining deductible must be reported. (Spendedown and Patient Liability are not exactly deductible within these operating rules).

The assessment and requirements analysis will be done by a project team consisting of subject matter experts and technical staff for each MMIS component. The team will determine the impact of the HIPAA transaction modifications to the MMIS business rules and system functions. Under this project, HP will complete an impact assessment, requirements definition and work plan.

2012 Estimated Costs

Activity	Start	Finish	Hours*	Cost
Assessment	02/01/2012	03/15/2012	250	\$27,250
Requirements Definition	03/01/2012	05/15/2012	300	\$32,700
Workplan Deliverable	03/01/2012	05/31/2012	50	\$5,450

*The hours provided below are estimates only. HPES will produce a monthly bill for the actual hours used each month. The bill will include the hours used for each activity listed below. HPES will be reimbursed at the modification hourly rate for additional CSR Hours as described in Section 11 of Amendment #5 of this contract

ICD-10 Phase 3 Remediation

The scope of this effort is specific to the Phase 3 of the ICD-10 project related to the remediation of all the impacted systems, policies and processes to support both ICD-9 and ICD-10 code sets beginning October 1, 2013. These estimates are based on the approved ICD-10 Phase 2 Deliverable – Work Effort Estimate document V.1 exhibit C for the work to be performed during the period of 01/01/2012 through 12/31/2012.

2012 Staffing Plan

Project Role	Responsibility	FTE	Man - Months
Project Manager	overall project management	1	12
ICD-10 Coder/Analyst	cross-walk updated lists, edits, testing	2	24
Reference Maintenance Analyst	edits and audit updates	1	12
Documentation Specialist	create/update internal and external documentation, assist with training curriculum and material development	.75	6
Provider Training Specialist	internal training curriculum development; external communication and education	2	12
SE (Information Analyst)	systems remediation	4	42
SE (Information Specialist)	systems remediation	3	36
ICD-10 Test Lead	direct testing efforts	1	10
Tester	testing	2	12
Total Staffing Effort		19.75	166

2012 Estimated Costs

Activity	Hours*	Cost
Project Management	1,680	\$189,420.00
Crosswalk Design/Development	5,040	\$568,260.00
System Remediation	10,920	\$1,231,230.00
Testing	3,080	\$347,270.00
Training	1,680	\$189,420.00
Documentation	630	\$71,032.50
Sub-Total	23,030	\$2,596,632.50
Third Party Costs		Cost
	Hours	
PES Remediation	500	\$56,375.00
OCR Software Remediation	24	\$2,706.00
Total Third Party Costs	524	\$59,081.00¹
2012 Total Project Costs		\$2,655,713.50

*The hours provided are estimates only for planning purposes. HPES will produce a monthly bill for the actual hours used each month. The bill will include the hours used for each activity listed above. HPES will be reimbursed at \$112.75 per hour for ICD-10 remediation project work.

¹ HPES assumes that any other third party charges incurred for this project will be passed through to DVHA at cost.