

**STATE OF VERMONT
DEPARTMENT OF VERMONT HEALTH ACCESS
VERMONT INFORMATION TECHNOLOGY LEADERS**

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CONTRACT #43142
AMENDMENT #3**

**STATE OF VERMONT
CONTRACT AMENDMENT**

It is hereby agreed by and between the State of Vermont, Department of Vermont Health Access (the "State") and Vermont Information Technology Leaders, with a principal place of business in Burlington, Vermont (the "Contractor") that the contract between them originally dated as of January 1, 2022, Contract #43412 (the "Contract") is hereby amended as follows:

- I. By deleting Section 9.viii from Attachment A in its entirety.**
- II. By deleting Attachment B, Section 9, Table 1.2 in its entirety and replacing it as set forth below:**

Table 1.2: Payment Provisions – DDI

Project	Deliverable Detail	Payment Cycle	Amount Per Deliverable	Maximum Payable Amount
5. Connecting Patients, Providers & Other Users to Health Data	5.i. Implement a minimum of 90 interface connections as specified, not to exceed 130 total.	Upon completion	\$7,500.00 each for a maximum of \$975,000	\$1,744,000.00
	5.ii VHIE Results Delivery procurement strategy, RFP and summary of responses	Upon completion	\$62,000.00	
	5.iii Implement a new VHIE Results Delivery solution.	Upon completion	\$62,000.00	
	5.iv eHealth Exchange Hub cutover plan	Upon completion	\$50,000.00	
	5.v Implementation and testing of VHIE connection to eHealth Exchange Hub	Upon completion	\$50,000.00	
	5.vi User education and training resources to support the launch of a new provider portal	Upon completion	\$95,000.00	
	5.vii List of live organizations transitioned for use of the new portal	Upon completion	\$20,000.00 each connection for a maximum of \$350,000.00	
	5.viii Demonstration of enhanced provider portal functionality: prescription fill history	Upon completion	\$75,000.00	
	5.ix Demonstration of eHealth Exchange querying live in provider portal	Upon completion	\$25,000.00	
6. Final Implementation of the VHIE Unified Health Data Architecture	6.i Test plan for the Data Repository upgrade from FHIR R3 to R4	Per specifications in the DED	\$120,000.00	\$950,299.00
	6.ii. Attest to the application of standard FHIR R4 release for clinical resources	Per specifications in the DED	\$75,000.00	

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Project	Deliverable Detail	Payment Cycle	Amount Per Deliverable	Maximum Payable Amount
	6.iii Attest to the application of standard FHIR R4 release for claims resources	Per specifications in the DED	\$70,299.00	
	6.iv. Design for use of State's Mulesoft/Okta infrastructure for development of API(s)	Per specifications in the DED	\$40,000.00	
	6.v. Attest to the completion of Patient or Provider API testing.	Per specifications in the DED	\$40,000.00	
	6.vi Provide technical specifications for access and use of Patient or Provider API and attestation of live API functionality	Per specifications in the DED	\$30,000.00	
	6.vii Plan for defining and prioritizing API needs.	Per specifications in the DED	\$30,000.00	
	6.viii Education materials on use of the API to access patient health data.	Per specifications in the DED	\$25,000.00	
	6.ix Technical documentation for API users, including but not limited to security and deployment protocols.	Per specifications in the DED	\$20,000.00	
	6.x Maintain legacy operations to ensure complete transition from legacy systems to current operating systems; required costs to be approved in advance through proposal delivered by Contractor to State no later than June 30, 2022	Upon approval	\$500,000.00	
7. Leveraging the Unified Technical Architecture to Support and Enhance Public Health Efforts	7.i. Design an approach to integrating the State's Immunization Registry (IMR) with the VHIE, utilizing the State's MuleSoft and Okta solutions.	Per specifications in the DED	\$50,000.00	\$175,000.00
	7.ii. Execute deliverables as approved in the designed approach to IMR and VHIE integration.	Per specifications in the DED	\$30,000.00	
	7.iii. Expand Immunization Bidirectionality (IBID) program to include all NVRH VACMAN pins, followed by at least five additional Health Care Organizations containing one or more VACMAN	Upon completion	\$15,000.00 per health care organization, plus a one-time \$5,000	

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	pins as agreed to by VDH and Contractor and as prioritized by VDH.		incentive payment for completing three by June 2023.	
8. Enhancing Medicaid Operations with Health Data and Data Services available through the VHIE	Specifications of delivery will be articulated in this contract, which will be augmented through the Specifications Order process as noted in Section 11.	Upon completion	\$300,000.00	\$300,000.00
9. Streamlining HIE Architecture and adding data types	9.i To enhance reporting infrastructure, design and develop implementation strategy of data architecture for data tables, data elements, indices, referential integrity, reporting data model, and access points.	Per specifications in the DED	\$200,000.00	\$678,000.00
	9.ii Develop a stakeholder engagement plan for documenting current and future VHIE reporting needs.	Per specifications in the DED	\$54,000.00	
	9.iii Execute implementation activities to occur in 2022 as directed by approved reporting	Per specifications in the DED	\$254,000.00	

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	infrastructure implementation strategy.			
	9.iv Continue the coordination of the Part II+ Group of the Health Information Exchange Steering Committee as described in the State's Health Information Technology (Exchange) Strategic Plan.	Per specifications in the DED	\$10,000.00	
	9.v Continue the coordination of a program of education for mental health and substance use disorder treatment organizations, including but not limited to Vermont's Designated Agencies and Specialized Service Agencies, focused on VHIE capabilities and potential uses of the VITLAccess provider portal.	Per specifications in the DED	\$10,000.00	
	9.vi Develop requirements specifications for ingesting social determinants of health data onto the VHIE with consideration for standards set by the USCDI and the Gravity Project.	Per specifications in the DED	\$30,000.00	
	9.vii Design an implementation approach for ingestion of social determinants of health data, due no later than August 2022, and begin implementation as approved by State.	Per specifications in the DED	\$120,000.00	
12. VHIE Enhancement: Data Quality Services	12.1. Strategy document outlining planned Model activities for 2022	Upon completion	\$97,500.00	\$97,500.00
	12.2.i. Monthly report of accomplishments and plans with a summary of activities, to be submitted to the State.	Monthly (June 2022– June 2023)	\$17,500.00	\$227,500.00
	12.2.ii. Engage FQHCs via Data Roadshow events: sharing available data and services and soliciting ideas for enhancements, supporting both FQHC engagement and continuous improvement of Model supports.	Per event	\$7,000.00	\$28,000.00
	12.2.iii. Complete an annual security risk assessment conducted by an external firm, to occur before 8/31/2022	Upon completion	\$15,000.00	\$15,000.00

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	12.2.iv Immunization data transfer and data quality planning and subject matter expertise: a. Documentation of FQHC immunization data needs including panel management uses b. Plan for distribution of COVID-19 immunization data that Contractor provides to VRHA	Upon completion	\$7,500.00 per lettered deliverable (a-b)	\$35,000.00
	12.2.iv c. Documentation of FQHC EHR capabilities for ingestion of immunization data, and d. Documentation of initial data validation and data quality work done to make immunization data usable by the FQHCs	Upon Completion	\$10,000.00 per lettered deliverable (c-d)	
	12.vi. Operational support for Data Quality Services implementation	Upon completion	\$2,000.00	\$2,000.00
	12.3. a. integration of vaccine data on behalf of FQHCs through flat file data transfers from VITL to Bi-State b. Bi-Directional immunization training development and strategic planning with VDH for onboarding and inclusion of FQHC;	Upon Completion	\$12,500 per lettered deliverable (a-b) 25,000.00	\$25,000.00
	12.4. VRHA to deliver training series including at least 4 webinars / recorded videos open to health centers and broader Vermont Health care community	Upon Completion	\$5,000.00 per event	\$20,000.00
13. FHIR Part 2	13.i.a Create an interface from each DA/SSA to the HIE to receive clinical data via EHR vendor	Per specifications in the DED	\$141,000.00	\$141,000.00
	13.i.b Develop Services Agreements that are appropriate for ingestion and sharing of Part 2 data.	Upon completion	\$15,000.00	\$15,000.00
	13.i.c Negotiate and execute Services Agreements with each DA/SSA, as appropriate	Upon completion	\$2,000.00 per agreement	\$24,000.00
	13.ii Develop and implement data storage requirements for the FHIR clinical data repository and the Reporting Database until use case(s) are defined.	Per specifications in the DED	\$100,000.00	\$100,000.00

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Project	Deliverable Detail	Payment Cycle	Amount Per Deliverable	Maximum Payable Amount
	13.iii. Develop an implementation approach that incorporates security standards to designate sensitive data and restrict disclosure to ensure the recipient of resources with security-tags is obligated to enforce the handling caveats of the tags and carry the security labels forward as appropriate.	Per specifications in the DED	\$100,000.00	\$100,000.00
Total DDI Amount				\$4,677,299.00

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Taxes Due to the State. Contractor further certifies under the pains and penalties of perjury that, as of the date this contract amendment is signed, the Contractor is in good standing with respect to, or in full compliance with a plan to pay, any and all taxes due the State of Vermont.

Child Support (Applicable to natural persons only; not applicable to corporations, partnerships or LLCs). Contractor is under no obligation to pay child support or is in good standing with respect to or in full compliance with a plan to pay any and all child support payable under a support order as of the date of this amendment.

Certification Regarding Suspension or Debarment. Contractor certifies under the pains and penalties of perjury that, as of the date this contract amendment is signed, neither Contractor nor Contractor’s principals (officers, directors, owners, or partners) are presently debarred, suspended, proposed for debarment, declared ineligible or excluded from participation in federal programs, or programs supported in whole or in part by federal funds.
<http://bgs.vermont.gov/purchasing-contracting/debarment>

Contractor further certifies under pains and penalties of perjury that, as of the date that this contract amendment is signed, Contractor is not presently debarred, suspended, nor named on the State’s debarment list at:
<http://bgs.vermont.gov/purchasing-contracting/debarment>.

Cybersecurity Standard Update 2023-01: Contractor confirms that all products and services provided to or for the use of the State under this Agreement shall be in compliance with State of Vermont Cybersecurity Standard Update 2023-01, which prohibits the use of certain branded products in State information systems or any vendor system that is supporting State information systems, and is available on-line at:
<https://digitalservices.vermont.gov/cybersecurity/cybersecurity-standards-and-directives>.

State and Federal Terms for Products and Services. Contractor agrees that “STATE OF VERMONT-FEDERAL TERMS SUPPLEMENT (Non-Construction) for all Contracts and Purchases of Products and Services Using Federal Funds (Revision date: July 28, 2022)” which is attached as Attachment G to this Contract, applies to any products or services provided to the State, at any time, when using federal funds.

This document consists of 7 pages. Except as modified by this Amendment No. 3 all provisions of the Contract remain in full force and effect.

WE THE UNDERSIGNED PARTIES AGREE TO BE BOUND BY THIS CONTRACT

STATE OF VERMONT

CONTRACTOR

DEPARTMENT OF VERMONT HEALTH ACCESS

VERMONT INFORMATION TECHNOLOGY LEADERS, INC.

DocuSigned by:

Andrea De La Bruere

4/26/2023

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DocuSigned by:

Beth Anderson

4/26/2023

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