



Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

State of West Virginia Master Agreement

Order Date: 10-21-2024

CORRECT ORDER NUMBER MUST
APPEAR ON ALL PACKAGES, INVOICES,
AND SHIPPING PAPERS. QUESTIONS
CONCERNING THIS ORDER SHOULD BE
DIRECTED TO THE DEPARTMENT
CONTACT.

Order Number:	CMA 0511 3117 BMS2100000006 3	Procurement Folder:	762875
Document Name:	THIRD PARTY LIABILITY (TPL) SERVICES	Reason for Modification:	
Document Description:	THIRD PARTY LIABILITY (TPL) SERVICES	Change Orde 2	
Procurement Type:	Central Master Agreement	To add Commodity Line	
Buyer Name:			
Telephone:			
Email:			
Shipping Method:	Best Way	Effective Start Date:	2021-04-01
Free on Board:	FOB Dest, Freight Prepaid	Effective End Date:	2025-03-31

VENDOR	DEPARTMENT CONTACT																				
Vendor Customer Code: 000000103904 HEALTH MANAGEMENT SYSTEMS INC 5615 HIGH POINT DR IRVING TX 75038 US Vendor Contact Phone: 8057294298 Extension: Discount Details: <table><thead><tr><th></th><th>Discount Allowed</th><th>Discount Percentage</th><th>Discount Days</th></tr></thead><tbody><tr><td>#1</td><td>No</td><td>0.0000</td><td>0</td></tr><tr><td>#2</td><td>No</td><td></td><td></td></tr><tr><td>#3</td><td>No</td><td></td><td></td></tr><tr><td>#4</td><td>No</td><td></td><td></td></tr></tbody></table>		Discount Allowed	Discount Percentage	Discount Days	#1	No	0.0000	0	#2	No			#3	No			#4	No			Requestor Name: Lakendra R Burdette Requestor Phone: (304) 352-4319 Requestor Email: lakendra.burdette@wv.gov 2025 FILE LOCATION _____
	Discount Allowed	Discount Percentage	Discount Days																		
#1	No	0.0000	0																		
#2	No																				
#3	No																				
#4	No																				

INVOICE TO	SHIP TO
PROCUREMENT OFFICER: 304-352-4286 HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	PROCUREMENT OFFICER: 304-352-4286 HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

CR 11-14-24

Purchasing Division's File Copy

Total Order Amount:

Open End

PURCHASING DIVISION AUTHORIZATION
DATE: *Tara H. 11/14/24*
ELECTRONIC SIGNATURE ON FILE

ATTORNEY GENERAL APPROVAL AS TO FORM
DATE: *John S. Gray*
ELECTRONIC SIGNATURE ON FILE

ENCUMBRANCE CERTIFICATION
DATE: *11-19-24*
ELECTRONIC SIGNATURE ON FILE

11/19/2024

Extended Description:

Change Order

Change Order No. 02 is issued to add a commodity line for West Virginia Children's Healthcare Insurance Program (WVCHIP) to enable utilization of the Premium Reimbursement Program. There will be a slight adjustment to the contract overall cost due to the introduction of the new commodity line. This change will result in an estimated cost increase of less than 10%. The service period for this commodity line will be 11/01/2024-03/31/2025

No other changes.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
1	93151507				0.000000
Service From		Service To		Service Contract Amount	
2021-04-01		2021-06-30		0.00	

Commodity Line Description: Implementation for BMS TPL Mandatory Services

Extended Description:

Implementation for BMS TPL Mandatory Services (3 Months)

Implementation period must not exceed 3 months.

Implementation Cost: \$0.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
2	93151507				0.000000
Service From		Service To		Service Contract Amount	
2021-07-01		2024-03-31		0.00	

Commodity Line Description: Years 1-3 Recoveries

Extended Description:

Years 1-3 Mandatory

Percentage Fee for Recoveries
(Cost-Avoidance/TPL Additions;
Post-Payment Recovery;
TPL Credit Balance Audits;
Medicare, Tri-Care, and
Commercial Recovery;
Trauma Recovery;
and Estate Recovery)

Percentage Fee: 10.95%

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
3	93151507				0.000000
Service From		Service To		Service Contract Amount	
2021-07-01		2024-03-31		0.00	

Commodity Line Description: Years 1-3 Third Party Adds

Extended Description:

Years 1-3 Mandatory

Verified Their Party Adds (PMPM)-BMS

Per Policy Rate: \$27.50

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
4	93151507				0.000000
	Service From	Service To		Service Contract Amount	
	2021-04-01	2021-06-30		0.00	

Commodity Line Description: Implementation for BMS RAC Optional Services

Extended Description:

Implementation for BMS RAC Services (3 Months)-Optional

Implementation period must not exceed 3 months.

Implementation Cost: \$0.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
5	93151507				0.000000
	Service From	Service To		Service Contract Amount	
	2021-07-01	2024-03-31		0.00	

Commodity Line Description: Years 1-3 RAC Recovery-Overpayment-Optional

Extended Description:

Years 1-3

Percentage Fee for RAC Overpayments (Medical/Dental/DME)-BMS Optional

Percentage Fee: 16.00%

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
6	93151507				0.000000
	Service From	Service To		Service Contract Amount	
	2021-07-01	2024-03-31		0.00	

Commodity Line Description: Years 1-3 RAC Recovery-Underpayment-Optional

Extended Description:

Years 1-3 Optional

Percentage Fee for RAC Underpayments (Medical/Dental/DME)-BMS Optional

Percentage Fee: 16.00%

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
7	93151507				0.000000
	Service From	Service To		Service Contract Amount	
	2021-04-01	2021-06-30		0.00	

Commodity Line Description: Implementation for Medicare Buy-In-Optional

Extended Description:

Implementation for Medicare Buy-In-(3 Months)-Optional

Implementation period must not exceed 3 months.

Implementation Cost: \$0.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
8	93151507				0.000000
Service From		Service To		Service Contract Amount	
2021-07-01		2024-03-31		0.00	

Commodity Line Description: Years 1-3 Medicare Buy-In (PMPM)-Optional

Extended Description:

Years 1-3 Optional

Medicare Buy-In (PMPM)-Optional

Rate: \$.95

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
9	93151507				0.000000
Service From		Service To		Service Contract Amount	
2021-04-01		2021-06-30		0.00	

Commodity Line Description: Implementation for Prem Reimb Pgm-Optional

Extended Description:

Implementation for Premium Reimbursement Program(s)-BMS (3 Months)-Optional

Implementation period must not exceed 3 months.

Implementation Cost: \$0.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
10	93151507				0.000000
Service From		Service To		Service Contract Amount	
2021-07-01		2024-03-31		0.00	

Commodity Line Description: Years 1-3 Prem Reimb Pgm (PMPM)-Optional

Extended Description:

Years 1-3 Optional

Premium Reimbursement Program(s) (PMPM) Optional

Rate: \$35.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
11	93151507				0.000000
Service From		Service To		Service Contract Amount	
2021-04-01		2021-06-30		0.00	

Commodity Line Description: Implementation for Work Incentive/Prem Pgm-Optional

Extended Description:

Implementation for Work Incentive/Premium Program(s)-(3 Months)-Optional

Implementation Cost: \$0.00

Implementation period must not exceed 3 months.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
12	93151507				0.000000
	Service From	Service To		Service Contract Amount	
	2021-07-01	2024-03-31		0.00	

Commodity Line Description: Years 1-3 Work Incentive/Prem Pgm(PMPM)-Optional

Extended Description:

Years 1-3 Optional

Work Incentive/Prem Pgm(s) (PMPM)-Optional

Rate: \$20.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
13	93151507				0.000000
	Service From	Service To		Service Contract Amount	
	2021-07-01	2024-03-31		0.00	

Commodity Line Description: Years 1-3 Enhancements

Extended Description:

Years 1-3 Optional

Enhancement Hours-Optional

Hourly Rate: \$115.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
14	93151507				0.000000
	Service From	Service To		Service Contract Amount	
	2024-04-01	2025-03-31		0.00	

Commodity Line Description: Optional Renewal Year One Recoveries

Extended Description:

Optional Renewal Year 1 (12 Months) Mandatory

Percentage Fee for Recoveries
(Cost-Avoidance/TPL Additions;
Post-Payment Recovery;
TPL Credit Balance Audits;
Medicare, Tri-Care, and
Commercial Recovery;
Trauma Recovery;
and Estate Recovery)

Percentage Fee: 10.95%

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
15	93151507				0.000000
	Service From	Service To		Service Contract Amount	
	2024-04-01	2025-03-31		0.00	

Commodity Line Description: Optional Renewal Year One Third Party Adds

Extended Description:

Optional Renewal Year 1 (12 Months) Mandatory

Verified Their Party Adds (PMPM)

Per Policy Rate: \$27.50

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
16	93151507				0.000000
Service From		Service To		Service Contract Amount	
2024-04-01		2025-03-31		0.00	

Commodity Line Description: Optional Renewal Year One RAC Recovery-Overpayment-Optional

Extended Description:

Optional Renewal Year 1 (12 Months) Optional

Percentage Fee for RAC Overpayments (Medical/Dental/DME)-Optional

Percentage Fee: 16.00%

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
17	93151507				0.000000
Service From		Service To		Service Contract Amount	
2024-04-01		2025-03-31		0.00	

Commodity Line Description: Optional Renewal Year One RAC Recovery-Underpayment-Optional

Extended Description:

Optional Renewal Year 1 (12 Months) Optional

Percentage Fee for RAC Underpayments (Medical/Dental/DME)-Optional

Percentage Fee: 16.00%

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
18	93151507				0.000000
Service From		Service To		Service Contract Amount	
2024-04-01		2025-03-31		0.00	

Commodity Line Description: Optional Renewal Year One Medicare Buy-In (PMPM)-Optional

Extended Description:

Optional Renewal Year 1 (12 Months) Optional

Medicare Buy-In-(PMPM) Optional

Rate: \$.95

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
19	93151507				0.000000
Service From		Service To		Service Contract Amount	
2024-04-01		2025-03-31		0.00	

Commodity Line Description: Optional Renewal Year One Prem Reimb Pgm (PMPM)-Optional

Extended Description:

Optional Renewal Year 1 (12 Months) Optional

Premium Reimbursement Program(s)
(PMPM) Optional

Rate: \$35.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
20	93151507				0.000000
	Service From	Service To	Service Contract Amount		
	2024-04-01	2025-03-31	0.00		

Commodity Line Description: Optional Renewal Year One Work Incentive/Prem Pgm(PMPM)-Opt

Extended Description:
 Optional Renewal Year 1 (12 Months) Optional
 Year One Work Incentive/Prem Pgm(PMPM)-Optional
 Rate: \$20.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
21	93151507				0.000000
	Service From	Service To	Service Contract Amount		
	2024-04-01	2025-03-31	0.00		

Commodity Line Description: Optional Renewal Year One Enhancements

Extended Description:
 Optional Renewal Year 1 (12 Months) Optional
 Enhancement Hours-Optional
 Hourly Rate: \$115.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
22	93151507				0.000000
	Service From	Service To	Service Contract Amount		
	2024-11-01	2025-03-31	0.00		

Commodity Line Description: WVCHIP Premium Invoicing and Follow-up Assistance

Extended Description:
 Change Order 2
 WVCHIP Premium Invoicing and Follow-up Assistance
 Rate: \$9.00

WVCHIP Premium Invoicing and Follow-up Assistance Proposal

July 2024

Project Dates

Start Date: November 1, 2024*

End Date: March 31, 2025**

*Project start date is dependent on completion of implementations

**Services will continue through master contract end date should additional option years be executed

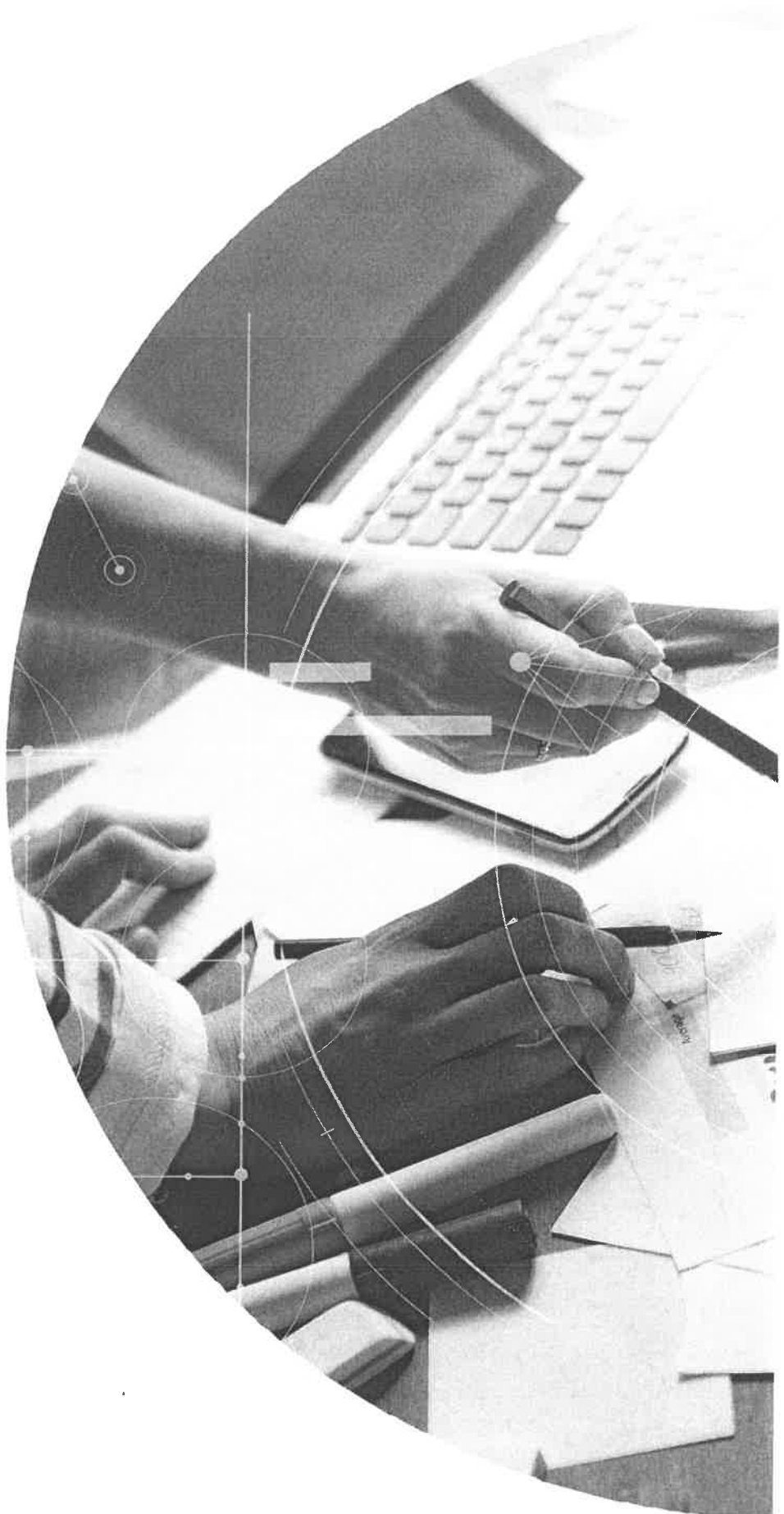
Contact Information

Michelle Hayes

Program Director

michelle.hayes@gainwelltechnologies.com

614.706.5197



Overview

West Virginia Children's Health Insurance Program (WVCHIP) has requested the assistance of Health Management Systems, Inc, (a Gainwell Technologies company) (HMS) to assist with their Premium Collection process. The request entails HMS to invoice, post payments to accounts, and help track any necessary refunds that would be issued by WVCHIP.

Assumptions

The following assumptions have been made by HMS in compiling this proposal:

1. WVCHIP Premium program has approximately 8,126 members enrolled representing approximately 4,700 families
2. HMS may utilize outgoing IVR calls for premium collections, depending on the individual account status
3. HMS will provide an incoming IVR system to direct calls
4. Direct calls from members, meaning calls opting out of the IVR, will be handled by WVCHIP Customer Service
5. WVCHIP will provide reporting to HMS regularly (at a minimum monthly) for members enrolled or disenrolled in the program
 - a. Reporting File must include member demographics including mailing address, premium amount due, and phone number
6. WVCHIP will provide daily payment posting files (Webpayments & LockboxPayments) to HMS along with file layouts.

Proposed Solution

At program inception and initial enrollment, HMS will send a one-time welcome letter to members including an explanation of the premium collection process.

- Monthly invoice will be sent to members for premiums due, including payment stub.
- A past due premium notification will be sent to members who have missed three (3) consecutive payments
 - This notice will be sent in addition to the monthly invoice
 - Past Due premium notification will provide program information as well as premium amounts past due

- Daily payment file(s) will be ingested and posted to the HMS system to maintain collection tracking
- Provide an Incoming IVR System to direct calls
 - Members will be directed to HMS for any premium collection questions
 - Non premium collection questions will be routed to WVCHIP Customer Service
- HMS will provide a monthly report of the following:
 - Payments received and processed for each member, including any backlog in premiums
 - Correspondence sent
 - This report will also capture members who have overpaid their premium balance for WVCHIP to process refunds
 - Calls received

Fees*

PMPM calculated under assumption of 7,139 members monthly

Service/Program	12 Month Term: PMPM Proposed Rate	12 Month Term: Estimated Annual Fees
Work Incentive/ Premium Program(s) (PMPM)	\$ 9.00	\$ 771,012

***These figures are based off the assumption and proposed solution. Should there be any changes to either, additional costs could apply.**

HMS has, by this signed Proposal document, authority to engage in assisting with the WVCHIP Premium Collection process as set forth herein and be paid the Nine Dollar (\$9.00) PMPM Rate above. HMS shall invoice, post payments to accounts, and help WVCHIP track any necessary refunds that would be issued by WVCHIP. The parties agree that this service and the corresponding fee are hereby added to West Virginia Contract No. BMS21000000001.

Except as modified herein, all provisions of the original contract and subsequent change orders and other modifications, including all terms, conditions, prices, and specifications shall remain unchanged and in full force and effect.

Agreed to by Health Management Systems, Inc.

SIGNATURE: 

PRINTED NAME: Mark Knickrehm

PRINTED TITLE: President and CEO

DATE: September 23, 2024

Agreed to by West Virginia Bureau of Medical Services

SIGNATURE: 

PRINTED NAME: Stacey L Shamblin

PRINTED TITLE: Deputy Commissioner, CHIP

DATE: September 24, 2024

Ok




APPROVED
[Signature]
11/14/24

STATE OF WEST VIRGINIA
DEPARTMENT OF HUMAN SERVICES
BUREAU FOR MEDICAL SERVICES

Cynthia A. Persily, Ph.D.
Cabinet Secretary

Cynthia Beane
Commissioner

DATE: September 30, 2024

TO: Crystal Hustead
Senior Buyer
State of West Virginia Purchasing Division

FROM: Althea Greenhowe *Althea Greenhowe*
Procurement Specialist, Senior
Office of Shared Administration

RE: PF762875, CMA BMS21*06 – Change Order 2
Dept 0511

The West Virginia Bureau for Medical Services (BMS) respectfully requests the approval of the above-referenced Change Order two (2) to add a commodity line for West Virginia Children's Healthcare Insurance Program (WVCHIP) to enable utilization of the Premium Reimbursement Program.

There will be a slight adjustment to the contract overall cost due to the introduction of the new commodity line. This change will result in an estimated cost increase of less than 10%. The service period for this commodity line will be 11/01/2024-03/31/2025.

Please feel free to contact me if additional documentation or details are needed. I can be reached at 304-352-3924 or althea.m.greenhowe@wv.gov. Thank you for your time and consideration in this matter.





Lyle, Tara L <tara.l.lyle@wv.gov>

Fwd: CMA BMS 21*06

1 message

Greenhowe, Althea M <althea.m.greenhowe@wv.gov>

Thu, Nov 14, 2024 at 10:03 AM

To: Crystal G Hustead <crystal.g.hustead@wv.gov>, Tara L Lyle <tara.l.lyle@wv.gov>

----- Forwarded message -----

From: Dowden, Jimmy K <jimmy.k.dowden@wv.gov>

Date: Thu, Nov 14, 2024 at 10:02 AM

Subject: Re: CMA BMS 21*06

To: Greenhowe, Althea M <althea.m.greenhowe@wv.gov>

Cc: Lakendra Burdette <lakendra.burdette@wv.gov>, Mandy D Carpenter <mandy.d.carpenter@wv.gov>

Althea,

Please see comments below:

1. Would the Treasurer's Office approval be needed for this change order? And, should we have had it for the project? I looked in the file but didn't see any approvals or explanation if it wasn't needed. **(The original contract did not include Treasurer's office approval, so there is no Treasurer's office approval included in the change order).**
2. The quote is noted for 12 months but the commodity line service dates are 11/1/24 to 3/31/25. **This change order only includes services through the current contract period, which expires 03/31/25, even though they gave us pricing for a year. Page one of the SOW includes the project dates of 11/1/24-03/31/25.**
3. On the quote, under the FEES section it states "These figures are based off the assumption and proposed solution. Should there be any changes to either, additional costs could apply." We understand the number of members may fluctuate but it appears this won't be fixed, firm pricing based on this statement. We wouldn't be able to allow additional costs that weren't a part of the original contract or new changes. **WVCHIP has confirmed that there are no plans to make any changes that impact cost at this time.**



Jimmy Dowden, WVPBC

Director, Procurement Services

West Virginia Department of Human Services

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On Thu, Nov 14, 2024 at 9:28 AM Greenhowe, Althea M <althea.m.greenhowe@wv.gov> wrote:

Can you review and respond?

Thanks!

----- Forwarded message -----

From: Lyle, Tara L <tara.l.lyle@wv.gov>

Date: Thu, Nov 14, 2024 at 9:26 AM

Subject: Re: CMA BMS 21*06

To: Hustead, Crystal G <crystal.g.hustead@wv.gov>, Althea M Greenhowe <althea.m.greenhowe@wv.gov>

Althea,

Frank reviewed this for me and we've got some questions.

1. Would the Treasurer's Office approval be needed for this change order? And, should we have had it for the project? I looked in the file but didn't see any approvals or explanation if it wasn't needed.
2. The quote is noted for 12 months but the commodity line service dates are 11/1/24 to 3/31/25.
3. On the quote, under the FEES section it states "These figures are based off the assumption and proposed solution. Should there be any changes to either, additional costs could apply." We understand the number of members may fluctuate but it appears this won't be fixed, firm pricing based on this statement. We wouldn't be able to allow additional costs that weren't a part of the original contract or new changes.

Thanks,
Tara



Althea Greenhowe

Procurement Specialist, Senior

Office of Shared Administration

West Virginia Departments of Health, Health Facilities, and Human Services

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COMPLIANCE VERIFICATION CHECKLIST FOR REQUISITION SUBMISSION

<i>Purchasing Division Use:</i> Buyer: <u>Crystal Huskad</u> Date: <u>10/21/24</u> Solicitation No. <u>CMA BMS21*06</u>	Agency: DoHS-BMS Procurement Officer Submitting Requisition: Althea Greenhowe Requisition No. CRFP BMS21*01 CMA BMS 21*06 PF No.: 762875 762875
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This checklist **MUST** be completed by a state agency's designated procurement officer and submitted with the Purchase Requisition to the Purchasing Division. The purpose of the checklist is to verify that an agency procurement officer has obtained and included required documentation necessary for the Purchasing Division to process the requisition without future processing disruptions. At the agency's preference, the agency **MUST** either submit the checklist by attaching it to the requisition's Header **OR** by placing it in the requisition's Procurement Folder.

FOR ALL SOLICITATION TYPES:

	Compliance Check Type	Required	Provided, if Required	Not Required	Purch. Div. Confirmation
1	Specifications and Pricing Page included	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Use of correct specification template	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Use of correct requisition type [CRQS → CCT or CPO] or [CRQM → CMA]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Use of most current terms and conditions (www.state.wv.us/admin/purchase/TCP.pdf)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Maximum budgeted amount in wvOASIS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Suggested vendors in wvOASIS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Capitol Building Commission pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Financing (Governor's Office) pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Fleet Management Division pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Compliance Check Type	Required	Provided, if Required	Not Required	Purch. Div. Confirmation
10	Insurance requirements				
	Commercial General Liability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Automobile Liability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Workers' Compensation/Employer's Liability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Cyber Liability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Builder's Risk/Installation Floater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Professional Liability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Office of Technology CIO pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	Treasurer's Office (banking) pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FOR CHANGE ORDERS/RENEWALS:

1	Two-party agreement	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2	Standard change order language	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3	Office of Technology CIO approval	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4	Justification for price increases/backdating/other	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Bond Rider (Construction)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6	Secretary of State Verification	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7	State debarment verification	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8	Federal debarment verification	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**The items pre-checked are required before a Purchase Requisition may be submitted to the Purchasing Division. Failure to complete and verify this documentation may result in rejection of the requisition back to the agency. It is up to the agency procurement officer to determine if pre-approvals, insurance, or other documentation is needed for the purchase. The referenced information below may be used to make this determination.*

For Purchasing Division Use Only:

I have reviewed the requisition identified above and find that it is sufficient to advertise publicly to the vendor community. My review does not preclude the possibility that the vendor community, or some other entity, will identify an area of concern; however, should such issues or concerns arise, they will be reviewed and addressed as may be appropriate.

Signature: Christopher Husted




STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
OFFICE OF TECHNOLOGY
State Capitol
Charleston, West Virginia 25305

Allan L. McVey
Cabinet Secretary

Joshua D. Spence
Chief Technology Officer

MEMORANDUM

TO: Alicia Sodder, Administrative Services Manager 1
Department of Health and Human Resources

FROM: Joshua D. Spence, Chief Technology Officer 
Office of Technology

SUBJECT: INFORMATION TECHNOLOGY PROCUREMENT
HR001693; BMS21*01; IS&C NUMBER: 2021-2617 Expedite

DATE: February 11, 2021

West Virginia Code §5A-6-4(a)(3) permits the Chief Technology Officer to "evaluate the economic justification, system design and suitability of information equipment and related services, and review and make recommendations on the purchase, lease or acquisition of information equipment and contracts for related services by the state spending units."

West Virginia Code §5A-6-4c requires that the Chief Technology Officer review and approve "a major information technology project."

West Virginia Code §5A-6-5 requires that "any state spending unit that pursues an information technology purchase that does not meet the definition of a 'major technology project' and that is required to submit a request for proposal to the State Purchasing Division prior to purchasing goods or services shall obtain the approval of the Chief Technology Officer, in writing, of any proposed purchase of goods or services related to its information technology and telecommunication systems."

After conducting a review of your request for expedited blanket approval for the award of CRFP BMS21*01 for Third Party Liability (TPL) services, which includes a three (3) year base, with three optional one (1) year renewals, the Office of Technology has determined:

X That your request is approved.

That your request is not subject to the review and approval provisions contained in Chapter 5A, Article 6 of the Code, therefore, it does not need approval by the Office of Technology.

This memorandum constitutes this office's official review and a copy should be attached to your purchase order and any other correspondence related to this request.

If you have questions, or need additional information, please contact Consulting Services at Consulting.Services@wv.gov.

- ☐ Any Words ⓘ
- ☐ All Words ⓘ
- ☐ Exact Phrase ⓘ

e.g. 123456789, Smith Corp

"HEALTH MANAGEMENT SYSTEMS INC"

×

Classification



Excluded Individual



Excluded Entity



Federal Organizations



Exclusion Type



- ✓ Ineligible (Proceedings Pending)
- ✓ Ineligible (Proceedings Complete)
- ✓ Prohibition/Restriction
- ✓ Voluntary Exclusion

Exclusion Program



Location



Dates



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Business and Licensing

Online Data Services Help

Business Organization Detail

NOTICE: The West Virginia Secretary of State's Office makes every reasonable effort to ensure the accuracy of information. However, we make no representation or warranty as to the correctness or completeness of the information. If information is missing from this page, it is not in the The West Virginia Secretary of State's database.

HEALTH MANAGEMENT SYSTEMS, INC.

Organization Information									
Org Type	Effective Date	Established Date	Filing Date	Charter	Class	Sec Type	Termination Date	Termination Reason	
C Corporation	3/27/1991		3/27/1991	Foreign	Profit				

Organization Information			
Business Purpose	5415 - Professional, Scientific and Techincal Servies - Professional, Scientific and Techincal Servies - Computer Systems Design and Related Services (design, programming, facilities mgmt)	Capital Stock	0.0000
Charter County		Control Number	0
Charter State	NY	Excess Acres	0
At Will Term		Member Managed	
At Will Term Years		Par Value	0.000000
Authorized Shares	0	Young Entrepreneur	Not Specified

Addresses

Type	Address
Local Office Address	209 WEST WASHINGTON STREET CHARLESTON, WV, 25302
Mailing Address	5615 HIGH POINT DRIVE IRVING, TX, 75038 USA
Notice of Process Address	C T CORPORATION SYSTEM 5098 WASHINGTON ST W STE 407 CHARLESTON, WV, 253131561
Principal Office Address	5615 HIGH POINT DRIVE IRVING, TX, 75038 USA
Type	Address

Officers

Type	Name/Address
Director	STEPHEN COSTALAS 5615 HIGH POINT DRIVE IRVING, TX, 75038
Director	MARK KNICKREHM 5615 HIGH POINT DRIVE IRVING, TX, 75038
President	MARK KNICKREHM 5615 HIGH POINT DRIVE IRVING, TX, 75038
Secretary	STEPHEN COSTALAS 5615 HIGH POINT DRIVE IRVING, TX, 75038
Treasurer	CHRIS KNIBB 5615 HIGH POINT DRIVE IRVING, TX, 75038
Type	Name/Address

DBA

DBA Name	Description	Effective Date	Termination Date
HEALTH MANAGEMENT SYSTEMS OF AMERICA, INC.	TRADENAME	5/30/1995	
HMSA, INC.	TRADENAME	1/17/1996	
THIRD PARTY LIABILITY RECOVERY SERVICES	FORCED DBA	3/27/1991	

DBA Name	Description	Effective Date	Termination Date
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Mergers

Merger Date	Merged	Merged State	Survived	Survived State
6/2/2015	HMS BUSINESS SERVICES, INC.	NY	HEALTH MANAGEMENT SYSTEMS, INC.	NY
Merger Date	Merged	Merged State	Survived	Survived State

Date	Amendment
6/2/2015	MERGER: MERGING HMS BUSINESS SERVICES, INC.; A QUALIFIED NY CORPORATION WITH AND INTO HEALTH MANAGEMENT SYSTEMS, INC., A QUALIFIED NY CORPORATION, THE SURVIVOR
Date	Amendment

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