



The following documentation is an electronically-submitted vendor response to an advertised solicitation from the *West Virginia Purchasing Bulletin* within the Vendor Self-Service portal at wvOASIS.gov. As part of the State of West Virginia's procurement process, and to maintain the transparency of the bid-opening process, this documentation submitted online is publicly posted by the West Virginia Purchasing Division at WVPurchasing.gov with any other vendor responses to this solicitation submitted to the Purchasing Division in hard copy format.

Header 5

List View

General Information

Contact

Default Values

Discount

Document Information

Clarification Request

Procurement Folder: 812924

Procurement Type: Central Contract - Fixed Amt

Vendor ID: 000000103695

Legal Name: KONICA MINOLTA BUSINESS SOLUTIONS USA INC

Alias/DBA:

Total Bid: \$0.00

Response Date: 12/29/2020

Response Time: 12:59

Responded By User ID: kmartinez

First Name: Kristin

Last Name: Martinez

Email: kmartinez@kmbs.konicai

SO Doc Code: CRFQ

SO Dept: 0323

SO Doc ID: WWV210000002

Published Date: 12/14/20

Close Date: 12/30/20

Close Time: 13:30

Status: Closed

Solicitation Description: ONBASE AND ANYDOC SUPPORT

Total of Header Attachments: 5

Total of All Attachments: 5

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	ANYDOC AND ONBASE SUPPORT MAINTENANCE/SUPPORT	0.00000	LS	60452.980000	0.00

Comm Code	Manufacturer	Specification	Model #
81112201			

Commodity Line Comments: Since the maintenance spans over 4 years for AnyDoc and OnBase, price changes every year:

2021	2022	2023	2024
\$55,000.04	\$50,000.70	\$50,000.04	\$50,450.00

Extended Description:

Vendors submitting bids online through wvOASIS should enter the total bid amount from the Exhibit A Pricing Page into the commodity line of wvOASIS and attached (or upload) a copy with their bid submittal.

Notice of State of West Virginia Confidentiality Policies and Information Security Accountability Requirements

Page 1 of 5

1.0 INTRODUCTION

The Executive Branch has adopted privacy and information security policies to protect confidential and personally identifiable information (hereinafter all referred to as Confidential Information). This Notice sets forth the vendor's responsibilities for safeguarding this information.

2.0 DEFINITIONS

- 2.1 Breach** shall mean the acquisition, access, use or disclosure of Confidential Information which compromises the security or privacy of such information and is caused by the acts or omissions, or willful misconduct, of the Vendor.
- 2.2 Confidential Information**, shall include, but is not limited to, trade secrets, personally identifiable information, protected health information, financial information, financial account number, credit card numbers, debit card numbers, driver's license numbers, State ID numbers, social security numbers, employee home addresses, employee marital status, employee maiden name, etc.
- 2.3 Security Incident** means any known successful or unsuccessful attempt by an authorized or unauthorized individual to inappropriately use, disclose, modify, access, or destroy any information.

3.0 BACKGROUND

Agencies maintain Confidential Information, including, but not limited to, trade secrets, personally identifiable information, protected health information, financial information, financial account numbers, credit card numbers, debit card numbers, driver's license numbers, State ID numbers, social security numbers, employee home addresses, etc. Federal laws, including, but not limited to, the Health Insurance Portability and Accountability Act, the Privacy Act of 1974, Fair Credit Reporting Act and State laws require that certain information be safeguarded. In some situations, Agencies delegate, through contract provisions, functions to vendors that involve the vendor's collection, use and/or disclosure of Confidential Information. WV State government must take appropriate steps to ensure its compliance with those laws and desires to protect its citizens' and employees' privacy, and therefore, must require that its vendors also obey those laws.

Utilization of safeguards can greatly minimize potential exposure to sensitive information, and vendors are expected to adhere to industry standard best practices in the management of data collected by, or on behalf of, the State, and in the vendor's possession for a business purpose. Even when sound practices and safeguards are in use, exposures can occur as the result of a

Notice of State of West Virginia
Confidentiality Policies and Information Security Accountability Requirements
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theft, loss, or compromise of data, or systems containing data. At these times, vendors must be accountable for the loss of data in their possession by ***immediately reporting*** the incident surrounding the loss, and by absorbing any cost associated with the appropriate response actions deemed by the State to be reasonable and necessary. Additional vendor funding may be needed for required activities, such as: rapid notification to affected persons, and provision of a call center to handle inquiries. Notification and call handling will use a State-specified method, format, language, and personnel staffing level.

4.0 POLICY

- 4.1** All vendors for the Executive Branch of West Virginia State government shall sign both the RFP or RFQ, as applicable, and the Purchase Order which contain the confidentiality statement, incident response accountability acknowledgement, and adopt this policy by reference.
- 4.2** Vendors must contact the Privacy Officer of the Agency with which they are contracting to obtain Agency-specific privacy policies, procedures and rules, when applicable.
- 4.3** For vendors' information, Agencies generally require at least the following minimum standards of care in the handling of their Confidential Information:
- 4.3.1** Confidential Information shall only be used or disclosed for the purposes designated in the underlying contract and at no time shall it be disclosed or used for a personal, non-work or non-contract related reason, unless specifically authorized in writing by the Agency.
- 4.3.2** In all circumstances, vendors shall have no ownership rights or interests in any data or information, including Confidential Information. All data collected by the vendor on behalf of the Agency, or received by the vendor from the Agency, is owned by the Agency. There are no exceptions to this provision.
- 4.3.3** In no circumstance shall a vendor use Confidential Information, or data, in any way detrimental to the Agency or to any individual whose records reside in the vendor's control. This prohibition shall not be construed to curtail a vendor's whistleblower rights under Federal and State law. If, in the process of making a good faith report under the provisions of W. Va. Code § 6C-1-1 et seq. or the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), (Pub. L. No. 104-191) as amended by the American Recovery and Reinvestment Act of 2009 (Pub. L. No. 111-5) (the "HITECH Act"), any associated regulations and the Federal regulations published at 45 CFR parts 160 and 164 (sometimes collectively referred to as "HIPAA") or any other relevant whistleblower law, a vendor finds it necessary to

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Confidentiality Policies and Information Security Accountability Requirements
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disclose Confidential Information to an appropriate authority in accordance with those statutes, the disclosure will not be treated as a Breach of the Agency's security, privacy or confidentiality policies, as long as the confidential nature of the information is explicitly conveyed to the authorized recipient.

- 4.3.4** The State may periodically monitor and/or audit use of the information systems and other record-keeping systems at a vendor location or a State location in an effort to ensure compliance with this policy. In addition, the State may audit, and require strengthening of, vendor policies and/or practices as they impact security of State data within the vendor's possession.
- 4.3.5** Any collection, use or disclosure of information that is determined by the Agency to be contrary to the confidentiality statement, law or Agency policy may result in termination of the underlying contract.
- 4.3.6** The confidentiality and incident response accountability statement contained within the RFP or RFQ, as applicable, and the Purchase Order shall survive termination of the underlying contract.
- 4.4** If there is an incident that involves theft, loss, or compromise of State Confidential Information, the following reporting and/or actions must be taken by the vendor, on its own behalf, or on behalf of its subcontractor:
- 4.4.1** If the event involves a theft, or is incidental to another crime, appropriate law enforcement officials shall be notified and a police report generated to document the circumstances of the crime, with a goal to establish whether the crime involved a motive to obtain the sensitive data. A copy of the police report will be forwarded in accordance with 4.4.2.3.
- 4.4.2** Notification of Breach.
- 4.4.2.1** Upon the **discovery** of Breach of security of Confidential Information, if the Confidential Information was, or is reasonably believed to have been, acquired by an unauthorized person, the vendor shall notify the individuals identified in 4.4.2.3 immediately by telephone call plus e-mail, web form or fax; or,
- 4.4.2.2** Within 24 hours by e-mail or fax of any **suspected** Security Incident, intrusion or unauthorized use or disclosure of Confidential Information, in violation of the underlying contract and this Notice, of potential loss of confidential data affecting the underlying contract.
- 4.4.2.3** Notification required by the above two sections shall be provided to:

Notice of State of West Virginia Confidentiality Policies and Information Security Accountability Requirements

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- (1) the Agency contract manager whose contact information may be found at www.state.wv.us/admin/purchase/vrc/agencyli.htm and,
- (2) unless otherwise directed by the Agency in writing, the Office of Technology at incident@wv.gov.

4.4.2.4 The vendor shall immediately investigate such actual or suspected Security Incident, Breach, or unauthorized use or disclosure of Confidential Information. Within 72 hours of the discovery, if an actual Breach has occurred, the vendor shall notify the individuals identified in 4.4.2.3 of the following: (a) What data elements were involved and the extent of the data involved in the Breach (e.g. number of records or affected individual's data); (b) The identity of the unauthorized persons known or reasonably believed to have improperly used or disclosed PHI or Confidential Information; (c) A description of where the Confidential Information is believed to have been improperly transmitted, sent, or utilized; (d) A description of the probable causes of the improper use or disclosure; and (e) Whether any Federal or State laws requiring individual notifications of Breaches are triggered.

4.4.2.5 Agency will coordinate with the vendor to determine additional specific actions that will be required of the vendor for mitigation of the Breach, which may include notification to the individual or other authorities.

4.4.2.6 All reasonable associated costs shall be borne by the vendor. This may include, but not be limited to costs associated with notifying affected individuals.

4.5 The State may require that a vendor provide evidence of adequate background checks, including a nationwide record search, for individuals who are entrusted by the vendor to work with State information.

4.6 The State requires that any vendor taking possession of State data have comprehensive policies and practices to adequately safeguard that information, and further that the sensitivity of the information is clearly identified and documented in writing, with signed acknowledgement by the vendor that the sensitivity is understood, before it is conveyed to the vendor. Vendor policy should articulate all safeguards in place for the State information, including provisions for destruction of all data, including backup copies of the data, at the end of the vendor's legitimate need to possess the data. All State-owned media containing State information will be returned to the State when no longer legitimately needed by the vendor.

4.7 All vendor owned devices that contain or transport any State Confidential Information must be encrypted using the AES algorithm, and industry standard methodology. This includes desktop and laptop computers (whole drive encryption – not file encryption), personal digital assistants (PDA), smart phones, thumb or flash-type drives, CDs, diskettes, backup tapes, etc.

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Acknowledgement

My signature certifies that I understand and will abide by the statements contained in this document.

Brian J. Cupka / EVP & General Counsel

Vendor Employee (Print Name)

DocuSigned by:

Brian Cupka

BT8A1156AD76A95
Vendor Employee (Signature)

12/28/2020

Date



Attachment A: Contract Information Form

Issued by the CTO

Policy No: WVOT-PO1012

Page 1 of 3

This form is to be used for all contracted individuals providing services within WVOT facilities, and must be completed and submitted as indicated PRIOR to the contract worker reporting to work. **All fields must be completed.**

State Agency Information:

Agency/Bureau/Division _____

Hiring Supervisor _____

Email _____ Phone _____

Contracting Company Information:

Contract Company Name Konica Minolta Business Solutions U.S.A, Inc

Contract Company Representative Kristin Martinez

Email kmartinez@kmb.s.konicaminolta.us Phone 614-423-3786

Contractor Information:

Contractor Name Konica Minolta Business Solutions U.S.A, Inc

Hourly Rate \$210/hr for OnBase; \$250/hr for AnyDoc

Email dkaye@kmb.s.konicaminolta.us Phone 562-447-2690

Has a criminal background check been performed on this Contractor? **Yes No** (circle one)
(Note: All results must be provided to the contractor's State manager.)

Projected Start Date _____ Projected End Date _____



Attachment A: Contract Information Form

Issued by the CTO

Policy No: WVOT-PO1012

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Area of Assignment (State Facility or Remote Location) _____

- Work Schedule:
- Sunday Hours: _____
 - Monday Hours: 8am-5pm
 - Tuesday Hours: 8am-5pm
 - Wednesday Hours: 8am-5pm
 - Thursday Hours: 8am-5pm
 - Friday Hours: 8am-5pm
 - Saturday Hours: _____

WVOT Supervisor/Manager _____

Job Title _____

Has the contractor been employed by the State or agency in the past? Yes No

Start date of previous employment _____

End date of previous employment _____

Hourly rate associated with previous employment \$195/hr

Will the contractor connect to the WVOT network with State-issued equipment? Yes No

Items needed by contractor:

- Computer Access
- VPN Access
- Software (List) _____
- Portable Devices (List) _____
- Building and Garage Access Card(s)

Items completed and/or furnished by contractor:



Attachment A: Contract Information Form

Issued by the CTO

Policy No: WVOT-PO1012

Page 3 of 3

- Proof of Criminal Background Check
- Proof of Residency Status and/or Work Permit
- Signed Confidentiality Statement
- Signed Policy Statement
- Other (List) _____

Other Contract Information:

Funding Source _____

Contract Cap Amount: Hours: _____ Dollar Amount: _____

Reason for Request (Project function this person will fill) _____

Approvals:

This form must be signed by all of the following individuals prior to contractor beginning work

Agency Director _____ Date _____

Agency Secretary _____ Date _____

Contractor Manager Kristin Martinez DocuSigned by: Kristin Martinez Date 12/29/2020

Chief Technology Officer David Kaye 7AF3A3DA7FDFE44E Date 12/29/2020

354EE1C717CF4E5...

Annex 2

State Wage Interchange System (SWIS)

**Performance Accountability and Customer Information Agency (PACIA) or
State Unemployment Insurance Agency (SUIA)**

Acknowledgement of Confidentiality Requirements and Restrictions

In accordance with Section VIII of the SWIS Data Sharing Agreement, which sets out the Responsibilities of the Parties, the names and signatures of everyone who will have access to Wage Data, personally identifiable information (PII) from Education Records, or Personal Information from Vocational Rehabilitation (VR) Records, including PACIA or SUIA employees, contractors, or agents properly authorized by the PACIA or SUIA to use the SWIS Clearinghouse in accordance with the provisions of Sections VI, VIII, and XI of the SWIS Data Sharing Agreement appear below. All authorized PACIA or SUIA employees, contractors, or agents below acknowledge their understanding of:

- the confidential nature of SWIS data, including Wage Data, PII from students' Education Records, and personal information in the possession of VR agencies received through the SWIS Data Sharing Agreement;
- the standards for the handling of such data as discussed in Sections VI, VIII, and XI of the SWIS Data Sharing Agreement, the SWIS Data Sharing Agreement/FERPA Written Agreement incorporated by reference therein, and any Supplemental FERPA Agreement(s) incorporated by reference therein; and
- their obligation to comply with such standards in carrying out their responsibilities under the SWIS Data Sharing Agreement.

All authorized PACIA or SUIA employees, contractors, or agents listed below attest that they:

- have been provided a copy of the SWIS Data Sharing Agreement, the SWIS Data Sharing Agreement/FERPA Written Agreement, and any Supplemental FERPA Agreement(s) incorporated by reference into the SWIS Data Sharing Agreement;
- have reviewed the SWIS Data Sharing Agreement and the other agreements incorporated therein; and
- agree to comply with the applicable standards contained in the SWIS Data Sharing Agreement, and the other agreements incorporated therein, in carrying out their SWIS-related duties.

Mailing address. Please mail the signed Acknowledgement of Confidentiality document to the current ETA SWIS support contractor, CDS2:

Command Decisions Systems & Solutions, Inc.
Attn.: SWIS
8761 Dorchester Road, Suite 200
North Charleston, SC 29420

(Fax: 843.552.8028)

In addition to the mailed original, a copy of the signed Acknowledgement document may be e-mailed to: SWIS@dol.gov and LStevens@cds2.com.

State:	
SUIA or PACIA Agency:	
SUIA or PACIA Contact Name:	
Title:	
Agency/Organization:	
<u>Signature of SUIA or PACIA Contact:</u>	
Date:	
Mailing Address:	
Telephone:	
Email Address:	

Please note: Signatures of Employees, contractors, or agents begin on next page.

<u>Employee Signature:</u>	
Date signed:	
Employee Name (Please print):	
Employee's Title:	
Employee's Business Unit:	
Employee's Supervisor:	
Title and Business Unit of Supervisor:	
Email of Supervisor:	
Phone Number of Supervisor:	
Is the Employee a staff member of the State SUIA?	<input type="checkbox"/> Yes <input type="checkbox"/> No
or a State PACIA?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the individual an employee of the State, a contractor, or agent?	<input type="checkbox"/> State <input type="checkbox"/> Contractor <input type="checkbox"/> Agent
Employee's work location including State agency, agent or contractor name, building number, street and city: <i>(Agency Name)</i> <i>(Building or floor or suite #)</i> <i>(Street)</i> <i>(City), (State) (Zip)</i>	
Employee Phone Number:	
Employee Email Address:	
Does the employee require ETA-approved individual credentials to access the password-protected SWIS Clearinghouse PACIA portal?	<input type="checkbox"/> Yes <input type="checkbox"/> No

<u>Employee Signature:</u>	
Date signed:	
Employee Name (Please print):	
Employee's Title:	
Employee's Business Unit:	
Employee's Supervisor:	
Title and Business Unit of Supervisor:	
Email of Supervisor:	
Phone Number of Supervisor:	
Is the Employee a staff member of the State SUIA?	<input type="checkbox"/> Yes <input type="checkbox"/> No
or a State PACIA?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the individual an employee of the State, a contractor, or agent?	<input type="checkbox"/> State <input type="checkbox"/> Contractor <input type="checkbox"/> Agent
Employee's work location including State agency, agent or contractor name, building number, street and city: <i>(Agency Name)</i> <i>(Building or floor or suite #)</i> <i>(Street)</i> <i>(City), (State) (Zip)</i>	
Employee Phone Number:	
Employee Email Address:	
Does the employee require ETA-approved individual credentials to access the password-protected SWIS Clearinghouse PACIA portal?	<input type="checkbox"/> Yes <input type="checkbox"/> No

<u>Employee Signature:</u>	
Date signed:	
Employee Name (Please print):	
Employee's Title:	
Employee's Business Unit:	
Employee's Supervisor:	
Title and Business Unit of Supervisor:	
Email of Supervisor:	
Phone Number of Supervisor:	
Is the Employee a staff member of the State SUIA?	<input type="checkbox"/> Yes <input type="checkbox"/> No
or a State PACIA?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the individual an employee of the State, a contractor, or agent?	<input type="checkbox"/> State <input type="checkbox"/> Contractor <input type="checkbox"/> Agent
Employee's work location including State agency, agent or contractor name, building number, street and city: <i>(Agency Name)</i> <i>(Building or floor or suite #)</i> <i>(Street)</i> <i>(City), (State) (Zip)</i>	
Employee Phone Number:	
Employee Email Address:	
Does the employee require ETA-approved individual credentials to access the password-protected SWIS Clearinghouse PACIA portal?	<input type="checkbox"/> Yes <input type="checkbox"/> No

<u>Employee Signature:</u>	
Date signed:	
Employee Name (Please print):	
Employee's Title:	
Employee's Business Unit:	
Employee's Supervisor:	
Title and Business Unit of Supervisor:	
Email of Supervisor:	
Phone Number of Supervisor:	
Is the Employee a staff member of the State SUIA?	<input type="checkbox"/> Yes <input type="checkbox"/> No
or a State PACIA?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the individual an employee of the State, a contractor, or agent?	<input type="checkbox"/> State <input type="checkbox"/> Contractor <input type="checkbox"/> Agent
Employee's work location including State agency, agent or contractor name, building number, street and city: <i>(Agency Name)</i> <i>(Building or floor or suite #)</i> <i>(Street)</i> <i>(City), (State) (Zip)</i>	
Employee Phone Number:	
Employee Email Address:	
Does the employee require ETA-approved individual credentials to access the password-protected SWIS Clearinghouse PACIA portal?	<input type="checkbox"/> Yes <input type="checkbox"/> No

<u>Employee Signature:</u>	
Date signed:	
Employee Name (Please print):	
Employee's Title:	
Employee's Business Unit:	
Employee's Supervisor:	
Title and Business Unit of Supervisor:	
Email of Supervisor:	
Phone Number of Supervisor:	
Is the Employee a staff member of the State SUIA?	<input type="checkbox"/> Yes <input type="checkbox"/> No
or a State PACIA?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the individual an employee of the State, a contractor, or agent?	<input type="checkbox"/> State <input type="checkbox"/> Contractor <input type="checkbox"/> Agent
Employee's work location including State agency, agent or contractor name, building number, street and city: <i>(Agency Name)</i> <i>(Building or floor or suite #)</i> <i>(Street)</i> <i>(City), (State) (Zip)</i>	
Employee Phone Number:	
Employee Email Address:	
Does the employee require ETA-approved individual credentials to access the password-protected SWIS Clearinghouse PACIA portal?	<input type="checkbox"/> Yes <input type="checkbox"/> No

<u>Employee Signature:</u>	
Date signed:	
Employee Name (Please print):	
Employee's Title:	
Employee's Business Unit:	
Employee's Supervisor:	
Title and Business Unit of Supervisor:	
Email of Supervisor:	
Phone Number of Supervisor:	
Is the Employee a staff member of the State SUIA?	<input type="checkbox"/> Yes <input type="checkbox"/> No
or a State PACIA?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the individual an employee of the State, a contractor, or agent?	<input type="checkbox"/> State <input type="checkbox"/> Contractor <input type="checkbox"/> Agent
Employee's work location including State agency, agent or contractor name, building number, street and city: (Agency Name) (Building or floor or suite #) (Street) (City), (State) (Zip)	
Employee Phone Number:	
Employee Email Address:	
Does the employee require ETA-approved individual credentials to access the password-protected SWIS Clearinghouse PACIA portal?	<input type="checkbox"/> Yes <input type="checkbox"/> No

(Please print as many Acknowledgements as needed. Thank you.)



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

State of West Virginia
Centralized Request for Quote
Info Technology

Proc Folder: 812924
Doc Description: ONBASE AND ANYDOC SUPPORT
Proc Type: Central Contract - Fixed Amt

Reason for Modification:

Date Issued	Solicitation Closes	Solicitation No	Version
2020-12-14	2020-12-30 13:30	CRFQ 0323 WWV2100000002	1

BID RECEIVING LOCATION

BID CLERK
DEPARTMENT OF ADMINISTRATION
PURCHASING DIVISION
2019 WASHINGTON ST E
CHARLESTON WV 25305
US

VENDOR

Vendor Customer Code:

Vendor Name : [Konica Minolta Business Solutions U.S.A., Inc.](#)

Address : [14300 West](#)

Street : [105th Street](#)

City : [Lenexa](#)

State : [Kansas](#)

Country : [United States](#)

Zip : [66215](#)

Principal Contact : [Kristin Martinez](#)

Vendor Contact Phone: [\(614\)804-8893](#)

Extension:

FOR INFORMATION CONTACT THE BUYER

Dusty J Smith
(304) 558-2063
dusty.j.smith@wv.gov

Vendor
Signature X

DocuSigned by:

Brian Cupka

B78A130C0D78495...

FEIN# [13-1921089](#)

DATE [12/23/2020](#)

All offers subject to all terms and conditions contained in this solicitation

ADDITIONAL INFORMATION

CCT

The West Virginia Purchasing Division is soliciting bids on behalf of WorkForce West Virginia to establish a one-year contract with optional renewals for software maintenance and support for OnBase and AnyDoc Software per attached documents.

No new licenses are being requested.

NOTE: Software maintenance for the Agency owned and operated OnBase and AnyDoc Software becomes effective upon the "effective start date" of the awarded contract. Agency Maintenance support expired on: 12/31/2019. Agency will not pay any reinstatement fees separately see 4.1.9 of the specifications for more information.

Vendors should bid accordingly.

QUESTIONS REGARDING THE SOLICITATION MUST BE SUBMITTED IN WRITING TO DUSTY.J.SMITH@WV.GOV PRIOR TO THE QUESTION PERIOD DEADLINE CONTAINED IN THE INSTRUCTIONS TO VENDORS SUBMITTING BIDS.

INVOICE TO	SHIP TO
WORKFORCE WEST VIRGINIA 1900 KANAWHA BLVD, EAST BLDG 3, 3RD FLOOR, SUITE 300 CHARLESTON WV 25305 US	WORKFORCE WEST VIRGINIA 1900 KANAWHA BLVD, EAST BLDG 3, 3RD FLOOR, SUITE 300 CHARLESTON WV 25305 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	ANYDOC AND ONBASE SUPPORT MAINTENANCE/SUPPORT	0.00000	LS		

Comm Code	Manufacturer	Specification	Model #
81112201			

Extended Description:

Vendors submitting bids online through wvOASIS should enter the total bid amount from the Exhibit A Pricing Page into the commodity line of wvOASIS and attached (or upload) a copy with their bid submittal.

SCHEDULE OF EVENTS

Line	Event	Event Date
1	Technical question due by 3pm	2020-12-21

DocuSign Envelope ID: 1EABD9D7-6500-4543-89DB-5B0F80294F15	Document Phase	Document Description	Page 3
WWW2100000002	Final	ONBASE AND ANYDOC SUPPORT	

ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

Exhibit A - Pricing Page for WorkForce West Virginia
 OnBase, AnyDoc Maintenance
 Site: 2699 Park Avenue, Suite 240, Huntington WV 25704

Item Number	Coverage	Restrictions (if any)	Quantity	2021		2022		2023		2024	
				Price Each	Extended Price	Price Each	Extended Price	Price Each	Extended Price	Price Each	Extended Price
AnyDoc v15											
OCR for AnyDoc											
1	Modules: Restricted, Form ID Exception, Verify Options: ODBC		16	\$367.10	\$5,873.66	\$378.12	\$6,049.87	\$389.46	\$6,231.37	\$401.14	\$2,005.23
2	Modules: Restricted, Scan Level 3, Quality Assurance	600,000 images/year	4	\$825.98	\$3,303.93	\$850.76	\$3,403.05	\$876.29	\$3,505.14	\$902.57	\$1,127.94
3	Modules: Restricted, Scan Level 3, Quality Assurance	300,000 images/year	2	\$1,651.97	\$3,303.93	\$1,701.53	\$3,403.05	\$1,752.57	\$3,505.14	\$1,805.15	\$1,127.94
4	Modules: Restricted, Full, Template Design & Test, Scan Level 3, Quality Assurance, Form ID, Form ID Exception, Extract, Verify, Commit Engines: 1D Bar Code, Caere OCR, ScanSoft, AEG OCR, AEG ICR, CGK OCR/ICR, AEGICGK Voting, Optical Mark, Reader Response Options: Conditional Procedures, ODBC	3,000,000 images/year	1	\$3,935.72	\$3,935.72	\$4,053.79	\$4,053.79	\$4,175.41	\$4,175.41	\$4,300.67	\$1,343.63
Exchangelit											
1	Source: OCR for AnyDoc®, DAO, ODBC, XML Destination: ODBC, DAO, XML, OnBase		1	\$1,376.64	\$1,376.64	\$1,417.94	\$1,417.94	\$1,460.48	\$1,460.48	\$1,504.29	\$469.97
Designit											
1	Modules: Form Design		1	\$458.88	\$458.88	\$472.65	\$472.65	\$486.83	\$486.83	\$501.43	\$156.66
Subtotal, AnyDoc				AnyDoc Maintenance Yearly Totals			\$18,800.35		\$19,364.36		\$19,945.29

Item Number	Coverage	Price each 2020	Quantity	2021		2022		2023		2024		
				Price Each	Extended Price	Price Each	Extended Price	Price Each	Extended Price	Price Each	Extended Price	
OnBase v15												
1	CTMPC1 Concurrent Client1-1001	\$305.96	2	\$315.14	\$630.28	\$324.59	\$649.19	\$334.33	\$668.66	\$344.36	\$688.72	
2	WFMPD1 Departmental Workflow Server	\$2,185.45	1	\$2,251.01	\$2,251.01	\$2,318.54	\$2,318.54	\$2,388.10	\$2,388.10	\$2,459.74	\$2,459.74	
3	DPMPW1 Document Import Processor	\$1,092.73	1	\$1,125.51	\$1,125.51	\$1,159.28	\$1,159.28	\$1,194.06	\$1,194.06	\$1,229.88	\$1,229.88	
4	OBMPW1 Multi-User Server	\$1,748.36	1	\$1,800.81	\$1,800.81	\$1,854.84	\$1,854.84	\$1,910.48	\$1,910.48	\$1,967.79	\$1,967.79	
5	CTMPN1 Named User Client 11-1001	\$152.99	86	\$157.58	\$13,551.85	\$162.31	\$13,958.41	\$167.18	\$14,377.16	\$172.19	\$14,808.48	
6	CTMPH1 Storage Integration for EMC Centera	\$4,370.91	1	\$4,502.04	\$4,502.04	\$4,637.10	\$4,637.10	\$4,776.21	\$4,776.21	\$4,919.50	\$4,919.50	
7	PTMPC1 Virtual Print Driver	\$1,092.73	1	\$1,125.51	\$1,125.51	\$1,159.28	\$1,159.28	\$1,194.06	\$1,194.06	\$1,229.88	\$1,229.88	
8	WFMPN1 Workflow Named User Client	\$131.12	37	\$135.05	\$4,996.98	\$139.11	\$5,146.89	\$143.28	\$5,301.30	\$147.58	\$5,460.34	
9	CLMPW1 COLD/ERM	\$2,185.45	1	\$2,251.01	\$2,251.01	\$2,318.54	\$2,318.54	\$2,388.10	\$2,388.10	\$2,459.74	\$2,459.74	
Subtotal, OnBase					\$32,235.01		\$33,202.06		\$34,198.13		\$35,224.07	
OnBase Extended support fee				Extended maintance cost due to OnBase version more than 5 years back		15%	\$4,835.25		\$4,980.31		\$5,129.72	\$5,283.61
Total Maintenance (OnBase+ Anydoc)					\$55,323.04		\$56,982.73		\$58,692.21		\$60,452.98	

*Total cost can change for AnyDoc and/Or OnBase maintenance if Customer purchases additional licenses or modules.