



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: 02-29-2024

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 2672 BMS230000001 2	Procurement Folder:	999526
Document Name:	PDL/PPL/HCPADL/SMAC SERVICES	Reason for Modification:	Change Order 1 To Renew Contract
Document Description:	PDL/PPL/HCPADL/SMAC SERVICES		
Procurement Type:	Central Master Agreement		
Buyer Name:			
Telephone:			
Email:			
Shipping Method:	Best Way	Effective Start Date:	2023-01-01
Free on Board:	FOB Dest, Freight Prepaid	Effective End Date:	2024-12-31

VENDOR				DEPARTMENT CONTACT	
Vendor Customer Code:	000000102111			Requestor Name:	Lakendra R Burdette
CHANGE HEALTHCARE PHARMACY SOLUTIONS INC				Requestor Phone:	(304) 558-0251
45 COMMERCE DR STE 5				Requestor Email:	lakendra.burdette@wv.gov
AUGUSTA	ME	99999			
US					
Vendor Contact Phone:	999-999-9999	Extension:			
Discount Details:					
	Discount Allowed	Discount Percentage	Discount Days		
#1	No	0.0000	0	<div style="font-size: 48px; font-weight: bold;">24</div> FILE LOCATION _____	
#2	No				
#3	No				
#4	No				

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

3-2460

Total Order Amount:	Open End
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Purchasing Division's File Copy

MCP 02/29/2024

PURCHASING DIVISION AUTHORIZATION
 DATE: *02/29/24*
 ELECTRONIC SIGNATURE ON FILE

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

ENCUMBRANCE CERTIFICATION
 DATE: *3-13-24*
 ELECTRONIC SIGNATURE ON FILE

5/12/2024

Extended Description:

Change Order No. 1 is issued to renew the original contract according to all terms, conditions, prices and specifications contained in the original contract including all authorized change orders.

Effective date of renewal 01/01/2024 through 12/31/2024

Renewal Years Remaining: 2

No other changes.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
1	85131701				0.000000
	Service From	Service To		Service Contract Amount	
	2023-01-01	2023-02-28		0.00	

Commodity Line Description: PDL/PPL/HCPADL/ SMAC Startup Costs-Year 1

Extended Description:

Lump Sum Cost for Initial Startup Costs
2 Month Startup.

Service Period: 01/01/2023-02/28/2023.

Total Cost: \$0.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
2	85131701				0.000000
	Service From	Service To		Service Contract Amount	
	2023-03-01	2023-12-31		512357.53	

Commodity Line Description: Annual Not To Exceed Costs-Year 1

Extended Description:

Annual Not To Exceed Costs-Year 1 (10 Months)

Service Period: 03/01/2023-12/31/2023

Total Costs: \$512,357.53

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
3	85131701				0.000000
	Service From	Service To		Service Contract Amount	
	2023-03-01	2023-12-31		0.00	

Commodity Line Description: Additional Services Hourly Rate-Year 1

Extended Description:

Additional Services (all inclusive hourly rate)
Year One (1) Hourly Rate (10 months):
\$174.9249

Service Period: 03/01/2023-12/31/2023

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
4	85131701				0.000000
	Service From	Service To		Service Contract Amount	
	2024-01-01	2024-12-31		537728.25	

Commodity Line Description: Annual Not To Exceed Costs-Year 2

Extended Description:

Annual Not To Exceed Costs-Year 2 (Optional Renewal Year 1) (12 Months)

Service Period: 01/01/2024-12/31/2024.

Cost not to exceed \$537,728.25.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
5	85131701				0.000000
	Service From	Service To		Service Contract Amount	
	2024-01-01	2024-12-31		0.00	

Commodity Line Description: Additional Services Hourly Rate-Year 2

Extended Description:

Additional Services Year 2 (Optional Renewal Year 1) (all inclusive hourly rate) X 100 (Estimated) (See Section 4.1.26).

Hourly rate \$180.1726

CHANGE HEALTHCARE

Vicki Cunningham
Director of Pharmacy Services
Bureau for Medical Services
350 Capitol Street
Charleston, WV 25301

Dear Ms. Cunningham,

I am writing to notify the West Virginia Department of Health and Human Resources that Change Healthcare Pharmacy Solutions, Inc. agrees to renew the current West Virginia PDL/PPL/SMAC contract (CMA BMS23*01) according to all terms, conditions, prices and specifications contained in the original contract, including all authorized change orders.

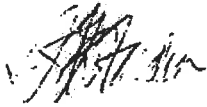
Effective date of renewal: 01/01/2024 through 12/31/2024

Remaining renewals: Two

All provisions of the original contract and subsequent change orders not modified herein shall remain in full force and effect.

Please contact me if you have any questions or need additional information.

Change Healthcare Pharmacy Solutions, Inc.



November 8, 2023

Authorizing Signature

Date

Dan Hardin, Senior Vice President and General Manager,
Pharmacy Benefit Solutions
C: 630.300.4407
E: dhardin@optum.com

Agree to renew
Alex Greenham



STATE OF WEST VIRGINIA
DEPARTMENT OF HUMAN SERVICES

Cynthia A. Persily, Ph.D.
Cabinet Secretary

Date: 01/17/2024

To: MIS/OT

From: Kelly J. Dowden, WVPBC
Director, BMS Procurement Services

A handwritten signature in black ink, appearing to read "KJD".

Re: PF999526, CMA BMS23*01-Change Order 1-Blanket Contract Renewal

The West Virginia Bureau for Medical Services (BMS) respectfully requests Blanket approval for Change Order 1 and all subsequent renewal periods of the above referenced master agreement with Change Healthcare Pharmacy Solutions Inc for PDL/PPL/HCPADL/SMAC SERVICES. Change Order No. 1 is issued to renew the original contract according to all terms, conditions, prices and specifications contained in the original contract including all authorized change orders. The estimated cost for this change order is \$556,000.00.

Effective date of renewal 1/01/2024 through 12/31/2024

Renewal Years Remaining: Two (2)

The original contract, including all terms, conditions, prices, specifications, and change orders contained therein remain in full force and effect. No other changes.

Thank you for your time and consideration in this matter. If you have questions or need additional information, please feel free to contact me at 304-352-4286 or jimmy.k.dowden@wv.gov.






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

Cynthia A. Persily, Ph.D.
Cabinet Secretary

Cynthia Beane
Commissioner

DATE: February 12, 2024

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

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

RE: PF999526, CMA BMS23*01 – Change Order 1
Dept 0511

The West Virginia Bureau for Medical Services (BMS) respectfully requests the approval of the above-referenced CMA for contract renewal request with effect date 01/01/2024 through 12/31/2025 with three (3) renewals remaining for Change Healthcare Pharmacy Solution Inc.

The services from the contract are needed to ensure the BMS is operating the most cost-effective and therapeutically effective pharmacy program, in addition to ensuring that generic drugs are priced as cost-effectively as possible.

The change order is being submitted at this time due to timing of payments, timing of document receipts and timing of MIS/OT approval.

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.

*Backlog
approved
discussed
with
TB*

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	PDL/PPL/HCPADL/ SMAC Startup Costs-Year 1				0.00

Comm Code	Manufacturer	Specification	Model #
85131701			

Commodity Line Comments:

Extended Description:

Lump Sum Cost for Initial Startup Costs
 2 Month Startup.
 Service Period: 01/01/2023-02/28/2023.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
2	Annual Not To Exceed Costs-Year 1				512357.53

Comm Code	Manufacturer	Specification	Model #
85131701			

Commodity Line Comments:

Extended Description:

Annual Not To Exceed Costs-Year 1 (10 Months)
 Service Period: 03/01/2023-12/31/2023

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
3	Additional Services Hourly Rate-Year 1				17492.49

Comm Code	Manufacturer	Specification	Model #
85131701			

Commodity Line Comments:

Extended Description:

Additional Services (all inclusive hourly rate) X 100 (Estimated) (See Section 4.1.26)-1 Year One (1) Hourly Rate (10 months).
 Service Period: 03/01/2023-12/31/2023

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
4	Annual Not To Exceed Costs-Year 2				537728.25

Comm Code	Manufacturer	Specification	Model #
85131701			

Commodity Line Comments:

Extended Description:

Annual Not To Exceed Costs-Year 2 (Optional Renewal Year 1) (12 Months)
 Service Period: 01/01/2024-12/31/2024

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
5	Additional Services Hourly Rate-Year 2				18017.26

Comm Code	Manufacturer	Specification	Model #
* 85131701			

Commodity Line Comments:

Extended Description:

Additional Services Year 2 (Optional Renewal Year 1) (all inclusive hourly rate) X 100 (Estimated) (See Section 4.1.26).
 Service Period: 01/01/2024-12/31/2024

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
6	Annual Not To Exceed Costs-Year 3				553560.10

Comm Code	Manufacturer	Specification	Model #
85131701			

Commodity Line Comments:

Extended Description:

Annual Not To Exceed Costs-Year 3 (Optional Renewal Year 2) (12 Months)
 Service Period: 01/01/2025-12/31/2025

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
7	Additional Services Hourly Rate-Year 3				18557.78

Comm Code	Manufacturer	Specification	Model #
85131701			

Commodity Line Comments:

Extended Description:

Additional Services Year 3 (Optional Renewal Year 2) (all inclusive hourly rate) X 100 (Estimated) (See Section 4.1.26).
 Service Period: 01/01/2025-12/31/2025

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
8	Annual Not To Exceed Costs-Year 4				569866.91

Comm Code	Manufacturer	Specification	Model #
85131701			

Commodity Line Comments:

Extended Description:

Annual Not To Exceed Costs-Year 4 (Optional Renewal Year 3) (12 Months)
 Service Period: 01/01/2026-12/31/2026

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
9	Additional Services Hourly Rate-Year 4				19114.52

Comm Code	Manufacturer	Specification	Model #
85131701			

Commodity Line Comments:

Extended Description:

Additional Services Year 4 (Optional Renewal Year 3) (all inclusive hourly rate) X 100 (Estimated) (See Section 4.1.26).
 Service Period: 01/01/2026-12/31/2026

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	PDL/PPL/HCPADL/ SMAC Startup Costs-Year 1				0.00

Comm Code	Manufacturer	Specification	Model #
85131701			

Commodity Line Comments:

Extended Description:

Lump Sum Cost for Initial Startup Costs
 2 Month Startup.
 Service Period: 01/01/2023-02/28/2023.

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
2	Annual Not To Exceed Costs-Year 1				512357.53

Comm Code	Manufacturer	Specification	Model #
85131701			

Commodity Line Comments:

Extended Description:

Annual Not To Exceed Costs-Year 1 (10 Months)
 Service Period: 03/01/2023-12/31/2023

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
3	Additional Services Hourly Rate-Year 1				17492.49

Comm Code	Manufacturer	Specification	Model #
85131701			

Commodity Line Comments:

Extended Description:

Additional Services (all inclusive hourly rate) X 100 (Estimated) (See Section 4.1.26)-I Year One (1) Hourly Rate (10 months).
 Service Period: 03/01/2023-12/31/2023

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
4	Annual Not To Exceed Costs-Year 2				537728.25

Comm Code	Manufacturer	Specification	Model #
85131701			

Commodity Line Comments:

Extended Description:

Annual Not To Exceed Costs-Year 2 (Optional Renewal Year 1) (12 Months)
 Service Period: 01/01/2024-12/31/2024

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
5	Additional Services Hourly Rate-Year 2				18017.26

Comm Code	Manufacturer	Specification	Model #
* 85131701			

Commodity Line Comments:

Extended Description:

Additional Services Year 2 (Optional Renewal Year 1) (all inclusive hourly rate) X 100 (Estimated) (See Section 4.1.26).
 Service Period: 01/01/2024-12/31/2024

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
6	Annual Not To Exceed Costs-Year 3				553560.10

Comm Code	Manufacturer	Specification	Model #
85131701			

Commodity Line Comments:

Extended Description:

Annual Not To Exceed Costs-Year 3 (Optional Renewal Year 2) (12 Months)
 Service Period: 01/01/2025-12/31/2025

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7	Additional Services Hourly Rate-Year 3				18557.78

Comm Code	Manufacturer	Specification	Model #
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Commodity Line Comments:

Extended Description:

Additional Services Year 3 (Optional Renewal Year 2) (all inclusive hourly rate) X 100 (Estimated) (See Section 4.1.26).
 Service Period: 01/01/2025-12/31/2025

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
8	Annual Not To Exceed Costs-Year 4				569866.91

Comm Code	Manufacturer	Specification	Model #
85131701			

Commodity Line Comments:

Extended Description:

Annual Not To Exceed Costs-Year 4 (Optional Renewal Year 3) (12 Months)
 Service Period: 01/01/2026-12/31/2026

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
9	Additional Services Hourly Rate-Year 4				19114.52

Comm Code	Manufacturer	Specification	Model #
85131701			

Commodity Line Comments:

Extended Description:

Additional Services Year 4 (Optional Renewal Year 3) (all inclusive hourly rate) X 100 (Estimated) (See Section 4.1.26).
 Service Period: 01/01/2026-12/31/2026



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

Mark D. Scott
Cabinet
Secretary

Heather D. Abbott
Chief Information
Officer

**TO: Stephanie Pettry, Procurement Specialist
Department of Human Services**

**FROM: Heather D. Abbott, Chief Information Officer
Office of Technology**

**SUBJECT: INFORMATION TECHNOLOGY PROCUREMENT
HR005029 PF999526, CMA BMS23*01 IS&C NUMBER: 2024-8281**

DATE: February 7, 2024

West Virginia Code §5A-6-4(a) permits the Chief Information Officer to review and approve technology purchases for suitability to ensure such purchases comport with the State of West Virginia's overall strategic information technology goals.

West Virginia Code §5A-6-4c requires the Chief Information Officer to review and approve "technology projects."

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 '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 Information 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 PF999526, CMA BMS23*01-Change Order 1-Blanket Contract Renewal for All Optional Years, the Office of Technology has determined:

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.

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West Virginia Secretary of State — Online Data Services

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.

CHANGE HEALTHCARE PHARMACY SOLUTIONS, INC.

see attached

Organization Information								
Org Type	Effective Date	Established Date	Filing Date	Charter	Class	Sec Type	Termination Date	Termination Reason
C Corporation	10/2/2007		10/2/2007	Foreign	Profit			

Organization Information			
Business Purpose	5412 - Professional, Scientific and Technical Servies - Professional, Scientific and Technical Servies - Accounting/Tax Prep/Bookkeeping/Payroll Services (CPAs)		Capital Stock
Charter County		Control Number	97263
Charter State	ME	Excess Acres	
At Will Term		Member Managed	
At Will Term Years		Par Value	
Authorized Shares		Young Entrepreneur	Not Specified

Addresses	
Type	Address
Mailing Address	424 CHURCH STREET, SUITE 1400 NASHVILLE, TN, 37219
Notice of Process Address	C T CORPORATION SYSTEM 5098 WASHINGTON ST W STE 407 CHARLESTON, WV, 253131561
Principal Office Address	424 CHURCH STREET, SUITE 1400 NASHVILLE, TN, 37219 USA
Type	Address

Officers	
Type	Name/Address
Director	NEIL E. DE CRESCENZO 100 AIRPARK CENTER EAST NASHVILLE, TN, 37217
President	NEIL EDMUND DE CRESCENZO 100 AIRPARK CENTER EAST NASHVILLE, TN, 37217
Secretary	ELIZABETH ANN SODERBERG 11000 OPTUM CIRCLE, EDEN PRAIRIE, MN, 55344
Treasurer	PETER M. GILL 9900 BREN ROAD EAST MINNETONKA, MN, 55343
Type	Name/Address

DBA			
DBA Name	Description	Effective Date	Termination Date
GHS DATA MANAGEMENT	TRADENAME	10/2/2007	
GOOLD HEALTH SYSTEMS, INC.	FORCED DBA	10/2/2007	9/6/2018
DBA Name	Description	Effective Date	Termination Date

Name Changes	
Date	Old Name
9/6/2018	GOOLD HEALTH SYSTEMS

Date	Old Name
------	----------

Date	Amendment
9/6/2018	NAME CHANGE: FROM GOOLD HEALTH SYSTEMS
Date	Amendment

Annual Reports

Filed For
2023
2022
2021
2020
2019
2018
2017x
2017
2016
2015
2014
2013
2012
2011
2010
2009
Date filed

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For more information, please contact the Secretary of State's Office at 304-558-8000.

Monday, February 26, 2024 — 10:14 AM

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- Any Words (i)
- All Words (i)
- Exact Phrase (i)

e.g. 123456789, Smith Corp

"CHANGE HEALTHCARE PHARMACY SOLUTIONS INC" x

- Classification v
- Excluded Individual v
- Excluded Entity v
- Federal Organizations v
- Exclusion Type v
- Exclusion Program v
- Location v
- Dates v

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COMPLIANCE VERIFICATION CHECKLIST FOR REQUISITION SUBMISSION

<i>Purchasing Division Use:</i> Buyer: <u>C0#1 d/c#</u> Date: <u>2/29/24</u> Solicitation No. <u>C0#1</u> <u>Renewal</u>	Agency: BMS Procurement Officer Submitting Requisition: Althea Greenhowe Requisition No. CMA 0511 BMS23*1 PF No.: 999526
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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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4	Justification for price increases/backdating/other	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5	Bond Rider (Construction)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" 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: _____

Tara Hb