



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

State of West Virginia
Delivery Order

Order Date: 10-31-2022

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:	CDO 0511 2676 BMS2300000019 1	Procurement Folder:	1120427
Document Name:	CDO for CMA BMS21*06 September 2022	Reason for Modification:	
Document Description:	CDO for CMA BMS21*06 September 2022		
Procurement Type:	Central Delivery Order		
Buyer Name:	Crystal G Hustead		
Telephone:	(304) 558-2402		
Email:	crystal.g.hustead@wv.gov		
Shipping Method:	Best Way		
Free on Board:	FOB Dest, Freight Prepaid	Master Agreement Number: CMA 0511 BMS2100000006 1	

VENDOR		DEPARTMENT CONTACT	
Vendor Customer Code:	000000103904	Requestor Name:	James W Atkins
HEALTH MANAGEMENT SYSTEMS INC 5615 HIGH POINT DR		Requestor Phone:	(304) 352-4319
IRVING	TX 75038	Requestor Email:	james.w.atkins@wv.gov
US			
Vendor Contact Phone:	8057294298	Extension:	
Discount Details:			
	Discount Allowed	Discount Percentage	Discount Days
#1	No	0.0000	0
#2	No		
#3	No		
#4	No		

23
 FILE LOCATION _____

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

Purchasing Division's File Copy

Total Order Amount: \$298,231.07

CH 10/31/22
 PURCHASING DIVISION AUTHORIZATION
 SIGNED BY: Tara Lyle
 DATE: 2022-10-31
 ELECTRONIC SIGNATURE ON FILE

ENTERED
 ENCUMBRANCE CERTIFICATION
Beverly Tolson
 DATE: 11-4-2022
 ELECTRONIC SIGNATURE ON FILE

Extended Description:

Confirming Delivery Order for services provided during the month of September 2022 under invoice 080913.
Total: \$298,231.07

Line	Commodity Code	Quantity	Unit	Unit Price	Total Price
1	93151507	0.00000		\$0.0000	\$41,041.07
Service From	Service To	Manufacturer	Model No	Delivery Date	
2022-08-20	2022-09-19				

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%

Confirming order for services provided under invoice
080913 (September 2022)

$374,804.29 \times 0.1095 = \$41,041.07$

Line	Commodity Code	Quantity	Unit	Unit Price	Total Price
2	93151507	0.00000		\$0.0000	\$216,040.00
Service From	Service To	Manufacturer	Model No	Delivery Date	
2022-09-01	2022-09-30				

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

Confirming order for services provided under invoice
080913(September 2022)

$7,856.00 \times \$27.50 = \$216,040.00$

Line	Commodity Code	Quantity	Unit	Unit Price	Total Price
3	93151507	0.00000		\$0.0000	\$16,310.00
Service From	Service To	Manufacturer	Model No	Delivery Date	
2022-09-01	2022-09-30				

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

Confirming order for services under invoice
080913 (September 2022)

466 x \$35.00 = \$16,310.00

Line	Commodity Code	Quantity	Unit	Unit Price	Total Price
4	93151507	0.00000		\$0.0000	\$24,840.00
Service From	Service To	Manufacturer	Model No	Delivery Date	
2022-09-01	2022-09-30				

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

Confirming order for services provided under invoice
080913 (September 2022)

1,242.00 x \$20.00 = \$24,840.00



Invoice

Invoice#: 080913
 Invoice Date: 10/6/2022
 Page: 1 of 1

PO Box 27151
 New York, NY 10087-7151

WV Dept of Health & Human Resources
 Stuart A. Epling
 Bureau of Medical Services
 350 Capitol Street, Room 251
 Charleston WV 25301

Robert Price
 Agree

Purchase Order/Contract#: CMA BMS21*06

Description	Comments	Service Period	Recoveries/Qty	UOM	Rate	Amount Due
TPL Recoveries		08/20/2022 to 09/19/2022	\$374,804.29	%	10.95%	\$41,041.07
Verified CAV Adds		09/01/2022 to 09/30/2022	7,856.00	EA	\$27.50	\$216,040.00
Management Fee HIPP (PMP)		09/01/2022 to 09/30/2022	466.00	EA	\$35.00	\$16,310.00
Management Fee MWIN/per member		09/01/2022 to 09/30/2022	1,242.00	EA	\$20.00	\$24,840.00
Total						\$298,231.07

OK

I HEREBY CERTIFY THAT THE ITEMS LISTED HEREON HAVE
 BEEN RECEIVED AND APPROVED FOR PAYMENT

PROGRAM APPROVAL SIGNATURE: *Andrea Woodell*
 PRINTED NAME: Andrea Woodell
 DATE: 10/7/22

Terms: Due in 30 Days.
 Please indicate the above invoice number on your remittance.
 Tax ID: 13-2770433

Remittance Address:
 Health Management Systems Inc
 PO Box 27151
 New York, NY 10087-7151
 If you would like to remit electronically,
 please contact ARGroup@gainwelltechnologies.com

If you have any questions, please contact
 Program Director:
 Michelle Hayes
 v: 937.673.9978
 e: michelle.hayes@gainwelltechnologies.com

LOCKBOX SUMMARY

080913 10/06/22

1	2	3	4 (2-3)	4A	4B	5	6 [7 (4+4A-5-6)]	8 [9 (7*8)]		
DEPOSIT DATES	TOTAL RECOVERIES RECEIVED IN LOCKBOX	LOCKBOX PAYMENTS NOT IDENTIFIED BY HMS	LOCKBOX PAYMENTS BILLED BY HMS	STATE PAYMENTS BILLED BY HMS	STATE PAYMENTS NOT IDENTIFIED BY HMS	OVER-PAYMENTS	TOTAL REFUNDS	NET RECOVERY	PERCENTAGE TO HMS	DOLLARS DUE TO HMS
08/20/2022 to 09/23/2022 CI	\$253,627.78	\$19,860.55	\$233,767.23	\$0.00	\$0.00					
08/20/2022 to 09/23/2022 CI Refunds	*Total Refunds	\$0.00	\$0.00	\$0.00	\$0.00	\$222.82	\$0.00	\$233,544.41	10.95%	\$25,573.11
08/20/2022 to 09/23/2022 Zero Deposit Payments (E	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	10.95%	\$0.00
08/20/2022 to 09/23/2022 Zero Deposits Payments (E	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.00%	\$0.00
08/20/2022 to 09/23/2022 Non commercial Billing Pa	\$122,623.74	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	10.95%	\$0.00
08/20/2022 to 09/23/2022 Non commercial CHIP	\$878.05	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$122,623.74	10.95%	\$13,427.30
08/20/2022 to 09/23/2022 Non Commercial Refunds	*Total Refunds	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$878.05	10.95%	\$96.15
08/20/2022 to 09/23/2022 Commercial Disallowance	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	10.95%	\$0.00
08/20/2022 to 09/23/2022 MCB & MCA Disallowance	\$73.99	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	10.95%	\$0.00
Total	\$377,203.56	\$19,860.55	\$233,767.23	\$0.00	\$0.00	\$222.82	\$0.00	\$357,120.19	10.95%	\$39,104.66

NOTE: THE ABOVE FIGURES DO NOT INCLUDE RECOUPMENTS AND REFUNDS ASSOCIATED WITH ANY PROVIDER DISALLOWANCE PROJECTS BEING INVOICED DURING THE MONTH.

Net Total	Commercial Insurance	Non Commercial Insurance	State Medicare	State Medicaid	CHIP	Other
	\$233,767.23	\$222.82	\$233,544.41	\$16,260.01	\$19,860.55	\$269,907.79
				\$81,838.66		\$81,838.66
				\$25,383.12		\$25,383.12
				\$73.99		\$73.99
Total	\$0.00	\$233,767.23	\$222.82	\$233,544.41	\$123,575.78	\$377,203.56

-\$222.82 minus over-payments
 \$233,544.41 equal Commercial/Tricare Net Amt
 \$0.00

- \$ 41,041.07 Recoveries =sum(\$374,804.29*10.95%)
- \$ 216,040.00 Cost Avoid
- \$ 16,310.00 MWIN Mgt Fee
- \$ 24,840.00 HIPP Mgt Fee
- \$ 298,231.07**

\$ 233,544.41
\$ 123,575.78
\$ 18,562.15
\$ (878.05)
\$ 374,804.29

Credit Bal Rec
chip trauma



STATE OF WEST VIRGINIA
DEPARTMENT OF HEALTH AND HUMAN RESOURCES
BUREAU FOR MEDICAL SERVICES

Procurement Services

350 Capitol Street, Room 251
Charleston, West Virginia 25301-3712
Telephone: (304) 558-1700 Fax: (304) 558-4398

Bill J. Crouch
Cabinet Secretary

Cynthia E. Beane
Commissioner

TO: Robert L. Price, CPPB, CPPO, NIGP-CPP
Administrative Services Manager II

FROM: James Atkins II *JAI*
BMS Procurement Services

DATE: October 13, 2022

RE: PF1120427, CDO BMS23*19

The West Virginia Bureau for Medical Services (BMS) respectfully requests approval of the above-referenced CDO for services performed by Health Management Systems, Inc. for the service period 08/20/2022 to 9/30/2022 under PF762875 CMA BMS21*06.

The invoice was released for processing on 10/12/2022. The total cost of the invoice is \$298,231.07.

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 304-352-4319 or James.w.Atkins@wv.gov

Robert Price
Agree