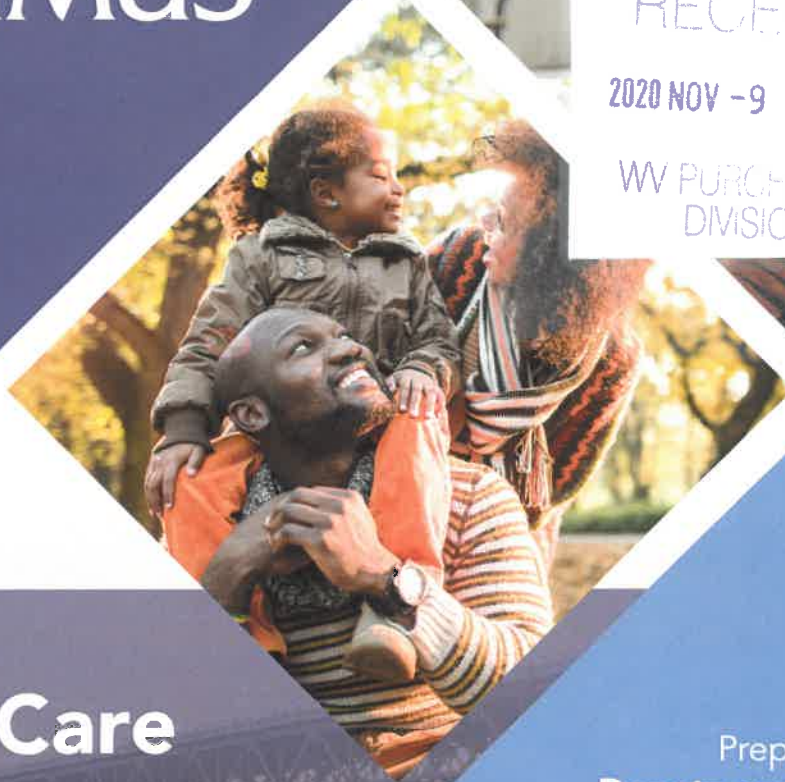


MAXIMUS®

RECEIVED  
2020 NOV -9 AM 9:46  
WV PURCHASING  
DIVISION



Quote to Provide

# Managed Care Enrollment Broker Services

Prepared For  
Department of Health and  
Human Resources Bureau  
for Medical Services



Maximus US Services, Inc.

CRFQ BMS2100000001

November 10th, 2020

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**DESIGNATED CONTACT**

**ADDENDUM ACKNOWLEDGMENTS**

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Signed Addendum 2

**PURCHASING AFFIDAVIT**

**COST PROPOSAL**

November 6, 2020

Crystal Husted  
Department of Health and Human Resources, Bureau for Medical Services  
2019 Washington Street, East  
Charleston, WV 25305  
(304) 558-2402

Solicitation Number: CRFQ BMS210000001 – Managed Care Enrollment Broker Services

Dear Ms. Husted,

Maximus U.S. Services, Inc. (Maximus), a wholly owned subsidiary of Maximus, Inc., is pleased to present our quote for Managed Care Enrollment Broker Services to the West Virginia Department of Health and Human Services, Bureau for Medical Services (BMS). We certify that we meet all mandatory requirements and qualifications stated in the RFQ.

Since 2015, we have worked in partnership with BMS to design and deliver high-quality enrollment broker services that educate enrollees and foster a positive member experience. Our commitment and proven experience to deliver exceptional services for Mountain Health Trust go beyond enrollment broker services. With our Social Determinants of Health pilot program, we have helped to meet the unique needs of West Virginia citizens and connect them with community-based programs and resources to effect positive health outcomes.

During our years serving as West Virginia's Medicaid Enrollment Broker, we have valued our partnership with the state. We offer residents of the state best in class service and support BMS through major programmatic changes, including expansions in covered populations and changes to the managed care landscape. Maximus looks forward to continuing to support BMS and the individuals in the Mountain Health Trust and Children's Health Insurance Program.

For this RFQ, we have submitted a competitive, responsive quote addressing all BMS requirements. Our years of experience in West Virginia and elsewhere will translate into the highest quality consumer experience for individuals in the program. We welcome the opportunity to address any questions regarding our quote. Should you have any questions or if any follow up is needed related to this RFQ please feel free to contact me through any channel provided below.

Sincerely,




Kaila Iglehart (Nov 6, 2020 11:48 EST)

Kaila Iglehart  
Manager, Contracts (Legal)  
1891 Metro Center Drive  
Reston, VA 20190  
Mobile: 706.888.0699  
[kailaiglehart@maximus.com](mailto:kailaiglehart@maximus.com)

**Following an internal reorganization and rebranding, Maximus Health Services, Inc. is now part of Maximus US Services, Inc. which is wholly-owned by Maximus, Inc.**



**DESIGNATED CONTACT:** Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract.

 Manager, Contracts  
\_\_\_\_\_  
(Name, Title)  
Kaila Iglehart, Manager, Contracts  
\_\_\_\_\_  
(Printed Name and Title)  
1891 Metro Center Drive, Reston, VA 20190  
\_\_\_\_\_  
(Address)  
(703) 251-8500/(703) 251-8240  
\_\_\_\_\_  
(Phone Number)/ (Fax Number)  
MaximusHealthProposals@maximus.com  
\_\_\_\_\_  
(email address)

**CERTIFICATION AND SIGNATURE:** By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that I am authorized by the vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration.

Maximus US Services, Inc.  
\_\_\_\_\_  
(Company)

 Kaila Iglehart, Manager, Contracts  
\_\_\_\_\_  
(Authorized Signature) (Representative Name, Title)

Kaila Iglehart, Manager, Contracts  
\_\_\_\_\_  
(Printed Name and Title of Authorized Representative)

Nov 5, 2020  
\_\_\_\_\_  
(Date)

(703) 251-8500/(703) 251-8240  
\_\_\_\_\_  
(Phone Number) (Fax Number)

**ADDENDUM ACKNOWLEDGEMENT FORM**  
**SOLICITATION NO.: CRFQ BMS210000001**

**Instructions:** Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

**Acknowledgment:** I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

**Addendum Numbers Received:**

*(Check the box next to each addendum received)*

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6  |
| <input checked="" type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7  |
| <input type="checkbox"/> Addendum No. 3            | <input type="checkbox"/> Addendum No. 8  |
| <input type="checkbox"/> Addendum No. 4            | <input type="checkbox"/> Addendum No. 9  |
| <input type="checkbox"/> Addendum No. 5            | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Maximus US Services, Inc.

Company

  
Karla Iglehart (Nov 5, 2020 10:43 EST)

Authorized Signature

Nov 5, 2020

Date

**NOTE:** This addendum acknowledgment should be submitted with the bid to expedite document processing.

# SOLICITATION NUMBER: CRFQ BMS2100000001

## Addendum Number: 1

The purpose of this addendum is to modify the solicitation identified as **CRFQ BMS2100000001** ("Solicitation") to reflect the change(s) identified and described below.

### Applicable Addendum Category:

- Modify bid opening date and time
- Modify specifications of product or service being sought
- Attachment of vendor questions and responses
- Attachment of pre-bid sign-in sheet
- Correction of error
- Other

### Description of Modification to Solicitation:

1. To extend the bid opening date to November 10, 2020 at 1:30 PM ET

\*\*\*Answers to vendor questions will be addressed in a forthcoming addendum\*\*\*

**Additional Documentation:** Documentation related to this Addendum (if any) has been included herewith as Attachment A and is specifically incorporated herein by reference.

### Terms and Conditions:

1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

**ADDENDUM ACKNOWLEDGEMENT FORM**  
**SOLICITATION NO.: CRFQ BMS210000001**

**Instructions:** Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

**Acknowledgment:** I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

**Addendum Numbers Received:**


(Check the box next to each addendum received)

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6  |
| <input checked="" type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7  |
| <input type="checkbox"/> Addendum No. 3            | <input type="checkbox"/> Addendum No. 8  |
| <input type="checkbox"/> Addendum No. 4            | <input type="checkbox"/> Addendum No. 9  |
| <input type="checkbox"/> Addendum No. 5            | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Maximus US Services, Inc.

Company

  
kaila iglehart (Oct 30, 2020 15:05 EDT)

Kaila Iglehart, Manager, Contracts

Authorized Signature

Oct 30, 2020

Date

**NOTE:** This addendum acknowledgement should be submitted with the bid to expedite document processing.

**SOLICITATION NUMBER: CRFQ BMS2100000001**  
**Addendum Number: 2**

---

The purpose of this addendum is to modify the solicitation identified as (“Solicitation”) to reflect the change(s) identified and described below.

**Applicable Addendum Category:**

- Modify bid opening date and time
- Modify specifications of product or service being sought
- Attachment of vendor questions and responses
- Attachment of pre-bid sign-in sheet
- Correction of error
- Other

**Description of Modification to Solicitation:**

1. To provide answers to vendor questions

No other changes

Bid opening remains 11/10/2020 at 1:30 PM ET

**Additional Documentation:** Documentation related to this Addendum (if any) has been included herewith as Attachment A and is specifically incorporated herein by reference.

**Terms and Conditions:**

1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.



# ATTACHMENT A

**ADDENDUM ACKNOWLEDGEMENT FORM**  
**SOLICITATION NO.: BMS210000001**

**Instructions:** Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

**Acknowledgment:** I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

**Addendum Numbers Received:**


(Check the box next to each addendum received)

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6  |
| <input checked="" type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7  |
| <input type="checkbox"/> Addendum No. 3            | <input type="checkbox"/> Addendum No. 8  |
| <input type="checkbox"/> Addendum No. 4            | <input type="checkbox"/> Addendum No. 9  |
| <input type="checkbox"/> Addendum No. 5            | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Maximus US Services, Inc.

Company

  
kaila iglehart (Oct 30, 2020 15:06 EDT)

Kaila Iglehart, Manager, Contracts

Authorized Signature

Oct 30, 2020

Date

**NOTE:** This addendum acknowledgment should be submitted with the bid to expedite document processing.

Revised 6/8/2012

STATE OF WEST VIRGINIA  
Purchasing Division

**PURCHASING AFFIDAVIT**

**CONSTRUCTION CONTRACTS:** Under W. Va. Code § 5-22-1(i), the contracting public entity shall not award a construction contract to any bidder that is known to be in default on any monetary obligation owed to the state or a political subdivision of the state, including, but not limited to, obligations related to payroll taxes, property taxes, sales and use taxes, fire service fees, or other fines or fees.

**ALL CONTRACTS:** Under W. Va. Code §5A-3-10a, no contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

**EXCEPTION:** The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. Code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

**DEFINITIONS:**

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the Insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

"Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceeds five percent of the total contract amount.

**AFFIRMATION:** By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (W. Va. Code §81-5-3) that: (1) for construction contracts, the vendor is not in default on any monetary obligation owed to the state or a political subdivision of the state, and (2) for all other contracts, that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

**WITNESS THE FOLLOWING SIGNATURE:**

Vendor's Name: Maximus US Services, Inc.

Authorized Signature: [Signature]

Date: 10/15/2020

State of Virginia

County of Fauquier to-wit:

Taken, subscribed, and sworn to before me this 5<sup>th</sup> day of November, 2020.

My Commission expires 4/30/24, 20  .

AFFIX SEAL HERE

Patrice A. Stinson  
NOTARY PUBLIC  
Commonwealth of Virginia  
Reg. # 7199377  
My Commission Expires 4/30/2024

NOTARY PUBLIC [Signature]



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  
 Service - Misc

<b>Proc Folder:</b> 761466	<b>Reason for Modification:</b> ADDENDUM 2 TO PROVIDE ANSWERS TO VENDOR QUESTIONS AND CORRECT COMMODITY LINE DESCRIPTIONS
<b>Doc Description:</b> MANAGED CARE ENROLLMENT BROKERAGE SERVICES	
<b>Proc Type:</b> Central Master Agreement	

Date Issued	Solicitation Closes	Solicitation No	Version
2020-10-29	2020-11-10 13:30	CRFQ 0511 BMS2100000001	3

**BID RECEIVING LOCATION**

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

**VENDOR**

**Vendor Customer Code:**  
000000162265

**Vendor Name:**  
Maximus US Services, Inc.

**Address:** 1891

**Street:** Metro Center Drive

**City:** Reston

**State:** VA **Country:** USA **Zip:** 20190

**Principal Contact:** Kaila Iglehart,  
Manager, Contracts

**Vendor Contact Phone:** (703) 215-8500 **Extension:**

**FOR INFORMATION CONTACT THE BUYER**

Crystal G Hustead  
(304) 558-2402  
crystal.g.hustead@wv.gov

Vendor  
Signature X   
kaila iglehart (Nov 6, 2020 20:21 EST)

**FEIN# 26-0307682**

**DATE** Nov 6, 2020

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



**ADDITIONAL INFORMATION**

THE WEST VIRGINIA PURCHASING DIVISION FOR THE AGENCY, WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES, BUREAU FOR MEDICAL SERVICES "BMS" (HEREINAFTER REFERRED TO AS THE "BUREAU" OR "BMS") IS SOLICITING BIDS TO ESTABLISH AN OPEN-END CONTRACT TO PROVIDE ENROLLMENT BROKERAGE SERVICES FOR ELIGIBLE PARTICIPANTS IN THE MEDICAID MANAGED CARE PROGRAM PER THE ATTACHED DOCUMENTS.

\*\*\*QUESTIONS REGARDING THE SOLICITATION MUST BE SUBMITTED IN WRITING TO CRYSTAL.G.HUSTEAD@WV.GOV PRIOR TO THE QUESTION PERIOD DEADLINE CONTAINED IN THE INSTRUCTIONS TO VENDORS SUBMITTING BIDS\*\*\*

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Implementation-BMS	0	0	\$0.00	\$0.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**

Implementation Costs-BMS: Staffing, Computer (including software), Facilities, Consulting Services, and Other Costs

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
2	Base Year One-200,000-300,000 members	300,000	9	\$0.329	\$888,300.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**

Base Year One-PMPM rate X 300,000 members X 9 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
3	Base Year One-300,000-400,000 members	400,000	9	\$0.313	\$1,126,800.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Base Year One-PMPM rate X 400,000 members X 9 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
	Base Year One-400,001-500,000 members	500,000	9	\$0.297	\$1,336,500.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Base Year One-PMPM rate X 500,000 members X 9 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
5	Base Year One->/=500,001 members	501,000	9	\$0.282	\$1,271,538.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Base Year One-PMPM rate X 500,001 members X 9 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
	Optional Renewal Year One-200,000-300,000 members	300,000	12	\$0.329	\$1,184,400.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year One-PMPM rate X 300,000 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
7	Optional Renewal Year One-300,000-400,000 members	400,000	12	\$0.313	\$1,502,400.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year One-PMPM rate X 400,000 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
	Optional Renewal Year One-400,001-500,000 members	500,000	12	\$0.297	\$1,782,000.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year One-PMPM rate X 500,000 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
9	Optional Renewal Year One->/=500,001 members	501,000	12	\$0.282	\$1,695,384.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year One-PMPM rate X 500,001 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
	Optional Renewal Year Two-200,000-300,000 members	300,000	12	\$0.329	\$1,184,400.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year Two-PMPM rate X 300,000 members X 12 Months



INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
11	Optional Renewal Year Two-300,000-400,000 members	400,000	12	\$0.313	\$1,502,400.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year Two-PMPM rate X 400,000 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
	Optional Renewal Year Two-400,001-500,000 members	500,000	12	\$0.297	\$1,782,000.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year Two-PMPM rate X 500,000 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
13	Optional Renewal Year Two->/=500,001 members	501,000	12	\$0.282	\$1,695,384.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year Two-PMPM rate X 500,001 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
	Optional Renewal Year Three-200,000-300,000 members	300,000	12	\$0.329	\$1,184,400.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year Three-PMPM rate X 300,000 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
15	Optional Renewal Year Three-300,000-400,000 members	400,000	12	\$0.313	\$1,502,400.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year Three-PMPM rate X 400,000 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
	Optional Renewal Year Three-400,001-500,000 members	500,000	12	\$0.297	\$1,782,000.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year Three-PMPM rate X 500,000 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
17	Optional Renewal Year Three->/=500,001 members	501,000	12	\$0.282	\$1,695,384.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year Three-PMPM rate X 500,001 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
	Base Year One-Ad Hoc Hourly Rate Information Technology	5,000	1	\$50.84	\$254,200.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Base Year One Ad Hoc Hourly Rate Information Technology  
Estimated 5000 hours X hourly rate

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
19	Opt. Renewal Yr 1-Ad Hoc Hourly Rate Information Technology	5,000	1	\$50.84	\$254,200.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year One Ad Hoc Hourly Rate Information Technology  
Estimated 5000 hours X hourly rate

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
20 Opt. Renewal Yr 2-Ad Hoc Hourly Rate Information Technology	5,000	1	\$50.84	\$254,200.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year Two Ad Hoc Hourly Rate Information Technology  
Estimated 5000 hours X hourly rate



INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
21	Opt. Renewal Yr 3-Ad Hoc Hourly Rate Information Technology	5,000	1	\$50.84	\$254,200.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**

Optional Renewal Year Three Ad Hoc Hourly Rate Information Technology  
Estimated 5000 hours X hourly rate

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
22 Base Year One-Ad Hoc Hourly Rate Non- Information Technology	5,000	1	\$35.748	\$178,740.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**

Base Year One Ad Hoc Hourly Rate Non- Information Technology  
Estimated 5000 hours X hourly rate

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
23	Opt.Renew.Yr1 -Ad Hoc Hrly Rate Non- Information Technology	5,000	1	\$35.748	\$178,740.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year One Ad Hoc Hourly Rate Non- Information Technology  
Estimated 5000 hours X hourly rate

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
24 Opt.Renew.Yr2 -Ad Hoc Hrly Rate Non- Information Technology	5,000	1	\$35.748	\$178,740.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year Two Ad Hoc Hourly Rate Non- Information Technology  
Estimated 5000 hours X hourly rate

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
25	Opt.Renew.Yr3 -Ad Hoc Hrly Rate Non- Information Technology	5,000	1	\$35.748	\$178,740.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**

Optional Renewal Year Three Ad Hoc Hourly Rate Non- Information Technology  
Estimated 5000 hours X hourly rate

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
26 Implementation-WVCHIP	0	0	\$0.00	\$0.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**

Implementation Costs-WVCHIP: Staffing, Computer (including software), Facilities, Consulting Services, and Other Costs

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
27	WVCHIP: Base Year One-15,000 members	15,000	9	\$0.329	\$44,415.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Base Year One-PMPM rate X 15,000 members X 9 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
	WVCHIP: Base Year One-15,001-20,000 members	20,000	9	\$0.313	\$56,340.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Base Year One-PMPM rate X 20,000 members X 9 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
29	WVCHIP: Base Year One-20,001-25,000 members	25,000	9	\$0.297	\$66,825.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Base Year One-PMPM rate X 25,000 members X 9 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
	WVCHIP: Base Year One->/=25,001 members	25,001	9	\$0.282	\$63,452.54

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Base Year One-PMPM rate X 25,001 members X 9 Months



INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
31	WVCHIP: Optional Renewal Year One- =15,000 members	15,000	12	\$0.329	\$59,220.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year One-PMPM rate X 15,000 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
	WVCHIP: Optional Renewal Year One-15,001-20,00 members	20,000	12	\$0.313	\$75,120.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year One-PMPM rate X 20,000 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
33	WVCHIP: Optional Renewal Year One-20,001-25,000 members	25,000	12	\$0.297	\$89,100.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year One-PMPM rate X 25,000 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
	WVCHIP: Optional Renewal Year One->/ =25,001 members	25,001	12	\$0.282	\$84,603.38

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year One-PMPM rate X 25,001 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
35	WVCHIP: Optional Renewal Year Two-</ =15,000 members	15,000	12	\$0.329	\$59,220.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year Two-PMPM rate X 15,000 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
	WVCHIP: Optional Renewal Year Two-15,001-20,000 members	20,000	12	\$0.313	\$75,120.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year Two-PMPM rate X 20,000 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
37	WVCHIP: Optional Renewal Year Two-20,001-25,000 members	25,000	12	\$0.297	\$89,100.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year Two-PMPM rate X 25,000 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
	WVCHIP: Optional Renewal Year Two->/ =25,001 members	25,001	12	\$0.282	\$84,603.38

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year Two-PMPM rate X 25,001 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
39	WVCHIP: Optional Renewal Year Three- =15,000 members	15,000	12	\$0.329	\$59,220.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year Three-PMPM rate X 15,000 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
	WVCHIP: Optional Renewal Year Three-15,001-20,000 members	20,000	12	\$0.313	\$75,120.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year Three-PMPM rate X 20,000 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
41	WVCHIP: Optional Renewal Year Three-20,001-25,000 members	25,000	12	\$0.297	\$89,100.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year Three-PMPM rate X 25,000 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
	WVCHIP: Optional Renewal Year Three->/ =25,001 members	25,001	12	\$0.282	\$84,603.38

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year Three-PMPM rate X 25,001 members X 12 Months

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
43	WVCHIP: Base YR 1-Ad Hoc Hourly Rate Information Technology	5,000	1	\$50.84	\$254,200.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**

Base Year One Ad Hoc Hourly Rate Information Technology  
Estimated 5000 hours X hourly rate

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
44 WVCHIP: Opt. Renew. Yr 1-Ad Hoc Hourly Rate Information Tech	5,000	1	\$50.84	\$254,200.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**

Optional Renewal Year One Ad Hoc Hourly Rate Information Technology  
Estimated 5000 hours X hourly rate

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
45	WVCHIP: Opt. Renew. Yr 2-Ad Hoc Hourly Rate Information Tech	5,000	1	\$50.84	\$254,200.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year Two Ad Hoc Hourly Rate Information Technology  
Estimated 5000 hours X hourly rate

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
46 WVCHIP: Opt. Renew. Yr 3-Ad Hoc Hourly Rate Information Tech	5,000	1	\$50.84	\$254,200.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**  
Optional Renewal Year Three Ad Hoc Hourly Rate Information Technology  
Estimated 5000 hours X hourly rate



INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
47	WVCHIP: Base Yr 1-Ad Hoc Hourly Rate Non- Information Tech.	5,000	1	\$35.748	\$178,740.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**

Base Year One Ad Hoc Hourly Rate Non- Information Technology  
Estimated 5000 hours X hourly rate

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
48 WVCHIP:Opt.Renew.Yr1 -Ad Hoc Hrly Rate Non- Information Tech	5,000	1	\$35.748	\$178,740.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**

Optional Renewal Year One Ad Hoc Hourly Rate Non- Information Technology  
Estimated 5000 hours X hourly rate

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
49	WVCHIP:Opt.Renew.Yr2 -Ad Hoc Hrly Rate Non- Information Tech	5,000	1	\$35.748	\$178,740.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**

Optional Renewal Year Two Ad Hoc Hourly Rate Non- Information Technology  
Estimated 5000 hours X hourly rate

INVOICE TO	SHIP TO
HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US	HEALTH AND HUMAN RESOURCES BUREAU FOR MEDICAL SERVICES 350 CAPITOL ST, RM 251 CHARLESTON WV 25301-3709 US

Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
50 WVCHIP:Opt.Renew.Yr3 -Ad Hoc Hrly Rate Non- Information Tech	5,000	1	\$35.748	\$178,740.00

Comm Code	Manufacturer	Specification	Model #
85121700			

**Extended Description:**

Optional Renewal Year Three Ad Hoc Hourly Rate Non- Information Technology  
Estimated 5000 hours X hourly rate

**SCHEDULE OF EVENTS**

Line	Event	Event Date
1	VENDOR QUESTION DEADLINE	2020-10-13

	Document Phase	Document Description	Page 27
BMS210000001	Final	MANAGED CARE ENROLLMENT BROKERAGE SERVICES	

**ADDITIONAL TERMS AND CONDITIONS**

See attached document(s) for additional Terms and Conditions





# WV Forms for Signature

Final Audit Report

2020-11-07

Created:	2020-11-07
By:	Erin Green (eringreen@maximus.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAA4w7G9bq0KNYg7dUf1PxM0_gy4BamK_ce

## "WV Forms for Signature" History

-  Document created by Erin Green (eringreen@maximus.com)  
2020-11-07 - 0:54:15 AM GMT- IP address: 138.88.85.168
-  Document emailed to kaila iglehart (kailaiglehart@maximus.com) for signature  
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-  Email viewed by kaila iglehart (kailaiglehart@maximus.com)  
2020-11-07 - 1:21:36 AM GMT- IP address: 73.7.236.50
-  Document e-signed by kaila iglehart (kailaiglehart@maximus.com)  
Signature Date: 2020-11-07 - 1:21:49 AM GMT - Time Source: server- IP address: 73.7.236.50
-  Agreement completed.  
2020-11-07 - 1:21:49 AM GMT