

STATE OF OHIO
DEPARTMENT OF ADMINISTRATIVE SERVICES
GENERAL SERVICES DIVISION
OFFICE OF PROCUREMENT SERVICES
4200 SURFACE ROAD, COLUMBUS, OH 43228-1395

AMENDMENT FOR CHANGE
AMENDMENT NO. 1

TO: Ohio Department of Health
FROM: HUGH QUILL, DIRECTOR, DEPARTMENT OF ADMINISTRATIVE SERVICES
SUBJECT: TERM CONTRACT - Call Management Services for the Ohio Department of Health Help Me Grow Helpline

Attached are pages 1, 2 and 4 to this contract. Remove these pages from the existing contract and replace with the attached pages on the effective and/or revision date.

This amendment is issued to delete all of the OAKS ID numbers and replace them with one (1) number.

All other prices, terms and conditions remain unchanged.

Questions regarding this Amendment and/or the Requirements Contract may be directed to:

Ross Leider, CPPB
ross.leider@das.state.oh.us

This amendment, the main Requirements Contract and any additional amendments thereto are available from the DAS website at the following address:



<http://www.ohio.gov/procure>

Affected Contractor(s):

52902
CMR Inc.
350 East 1st Avenue
Suite 220
Columbus, OH 43201



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REQUIREMENTS CONTRACT:

CONTRACT NUMBER: CSP901812

EFFECTIVE DATES: 7/01/11 TO 06/30/13

The Department of Administrative Services has accepted Proposals submitted in response to Request for Proposal (RFP) No. CSP901812 that opened on . The evaluation of the Proposal responses has been completed. The Offeror listed herein has been determined to be the highest ranking Offeror and has been awarded a Contract for the services listed. The respective Proposal response including, Contract Terms & Conditions, any Proposal amendment, special Contract Terms & Conditions, specifications, pricing schedules and any attachments incorporated by reference and accepted by DAS become a part of this Services Contract.

This Requirements Contract is effective beginning and ending on the dates noted above unless, prior to the expiration date, the Contract is renewed, terminated, or cancelled in accordance with the Contract Terms and Conditions.

This Requirements Contract is available to the as applicable.

The agency is eligible to make purchases of the contracted services in any amount and at any time as determined by the agency. The State makes no representation or guarantee that department will purchase the volume of services as advertised in the Request for Proposal.

Questions regarding this and/or the Services Contract may be directed to:

Ross Leider, CPPB
ross.leider@das.state.oh.us

This Requirements Contract and any Amendments thereto are available from the DAS Web site at the following address:



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COST SUMMARY FORM

Title: Call Center Services for the Ohio Department of Health Help Me Grow Helpline

CSP901812

UNSPSC CATEGORY CODE: 85100000

BUDGET: \$150,000

1. The successful Offeror shall be expected to process approximately 40,000 to 50,000 calls per year.
2. Offerors shall indicate the administrative cost to be charged to Ohio Department of Health for the processing of each category of call, which may include but not be limited to: automated, live, transferred, and transcribed calls. Offerors shall reflect administrative costs for each of the parameters set forth in the table below:

*OAKS ID NUMBER: 13070	CATEGORY	OAKS ID #	COST
	One time set-up fee.	*N/A	N/A
	Monthly service fee.	*N/A	\$ 4,100.00
Not to Exceed monthly cost for service fee			

Cost per script change. (Per hour) (Billed in 15 minute increments)	*N/A	\$ 95.00
Script changes as directed by the ODH Contract Manager will require billing on the following months invoice		

Cost per call if the caller utilizes an automated system that identifies the address by entering a 10-digit phone number or leaves a name and address on the message system and the Contractor subsequently transcribes, creates, and processes an order.	**N/A	\$.67
Cost per call if call is answered by an operator.	**N/A	\$ 3.25
Cost per order card that is transcribed.	**N/A	\$.50
Cost per listened message from prerecorded information line.	**N/A	\$.25
Cost per call for completed follow-up survey calls.	**N/A	\$ 2.25
Cost per dial out for a survey attempt.	**N/A	\$.10
Not to Exceed cost per call charges		

*Add one OAKS ID number to use for agency purchase orders.

** Remove the individual OAKS ID numbers and replace with N/A. Always use OAKS ID number 13070.

SUMMARY OF ADMENDMENTS

ADMENDMENT NUMBER	REVISION DATE	DESCRIPTION
*1	8/11/11	Change the OAKS ID numbers from multiple numbers to one (1) number.

*Add amendment 1 to Contract.