

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: LIMITED DISTRIBUTION - DEPARTMENT OF ADMINSTRATIVE SERVICES (DAS), HUMAN RESOURCES DIVISION (HRD)

FROM: ROBERT BLAIR, DIRECTOR, DEPARTMENT OF ADMINISTRATIVE SERVICES

SUBJECT: COMPETITIVE SEALED PROPOSAL - STATE OF OHIO EMPLOYEE POPULATION HEALTH MANAGEMENT (PHM) PROGRAM

Attached are pages 41 and 42 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 advise of additional and expanded work requirements effective 07/01/11.

All other prices, terms and conditions remain unchanged.

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

Carol Clingman
carol.clingman@das.state.oh.us

This Amendment, the main Requirements Contract and any additional amendments thereto are available from the DAS Web site at the following address:

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

Affected Contractor(s):

139748
Innovative Resource Group, LLC
dba APS Healthcare Midwest
751 Northwest Blvd., Suite 301
Columbus, OH 43212
criehl@apshealthcare.com

Rates are identified as follows (Year 3: July 1, 2011 – June 30, 2012):

PHM Program Fees Pricing Methodology:			
PROGRAM AREA	PEPM	PEPM Total	Program Annual Totals (based on 51,895 employees per month)
a. General Contractor		\$0.84	\$522,475
b. Disease Management		\$2.86	\$1,781,565
1). COPD	\$0.35		\$218,376
2). Coronary Artery Disease	\$0.49		\$308,039
3). Congestive Heart Failure	\$0.27		\$169,179
4). Diabetes	\$1.05		\$654,744
5). Asthma	\$0.69		\$431,227
c. Health Decision Support		\$0.44	\$274,176
d. HRA		\$0.29	\$179,701
e. LM (phone)		\$0.48	\$299,942
f. LM (Web portal/on-line programs)		\$0.15	\$92,493
g. Incentive Management		\$0.17	\$105,706
h. Worksite Health Screenings		\$0.46	\$284,912
i. Communication		\$0.43	\$267,930
j. Health Action Plan		\$0.25	\$152,455
Total Projected Fees for all PHM Services (Year Three Pricing) and subject to ROI calculation		\$6.37	\$3,961,355

Description	Cost
Provide new file feeds to third parties for a onetime creation fee, cost dependant upon layout complexity.	\$4,500 - \$9,000
Provide additional biometric screening events beyond current 50 sites per year.	\$5,700 per site
Modify the Columbus Service Office service hours to 8:00 am – 7:00 pm Monday through Friday and 9:00 am – 2:00 pm on Saturdays.	No Charge
Process physician biometric forms beginning July 1, 2011.	\$14 per form
Process contract run-out activities, for length of time the State of Ohio determines necessary, following contract expiration date. Specific deliverables for this include: a. Receive file feeds from biometric and web site vendors b. Tracking of individual incentive activities c. Reporting incentives earned in the previous month to the State of Ohio d. Deliver incentive file to the State of Ohio for previous month's incentives e. Reconcile reported data with amounts applied to the State f. Deliver incentive/biometric data files to Thomson Reuters	\$5,000 per month

* To advise of additional and expanded work requirements effective 07/01/11.

CONTRACTOR INDEX

CONTRACTOR AND TERMS:

CONTRACT NO.: CSP902609 (06/30/12)

OAKS Vendor ID No.: 139748

Innovative Resource Group, LLC
dba APS Healthcare Midwest
44 South Broadway, 12th floor
White Plains, NY 10601

TERMS: Net 30 Days

CONTRACTOR'S CONTACT:

Primary:

Verdene Thompson, RNC, CCM, MSHA
Executive Director, Ohio Service Center
751 Northwest Blvd., Suite 301
Columbus, OH 43212

Telephone: (800) 305-3720 x 5660
FAX: (614) 255-0763
E-mail: vthompson@apshealthcare.com

Secondary:

Julie Fisher
Sr Vice President, Business & Product Development
Westchester One
44 South Broadway, Suite 1200
White Plains, NY 10601

Telephone: (914)288-4798
FAX: (914) 288-4605
E-mail: jfisher@apshealthcare.com

PAYMENT ADDRESS:

Innovative Resource Group
PO Box 890903
Charlotte, NC 28289-0903
Attn: Accounts Receivable

To remit by means of Wire/ACH, contact the Contractor's Primary Contact for account information.

SUMMARY OF AMENDMENTS

Amendment Number	Revision Date	Description
1	06/29/11	To advise of additional and expanded work requirements effective 07/01/11.