

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. 5

TO: OHIO DEPARTMENT OF MENTAL HEALTH
FROM: ROBERT BLAIR, DIRECTOR, DEPARTMENT OF ADMINISTRATIVE SERVICES
SUBJECT: COMPETITIVE SEALED PROPOSAL - PRE-ADMISSION SCREENING RESIDENT REVIEW (PASRR)
LEVEL II

Attached is page 2 to this contract. Remove this page from the existing contract and replace with the attached page on the effective and/or revision date.

This amendment is issued to remove an item from the cost page required for FY2011 and not needed for FY2012 and add a category for FY2012. This amendment does not change the total not-to-exceed cost for this Contract.

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 Web site at the following address:

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

Affected Contractor(s):

0000170510
Ascend Management Innovations, LLC.
227 French Landing Drive
Suite 250
Nashville, TN 37228
praby@ascendami.com

ATTACHMENT NINE
COST SUMMARY

TITLE: PRE-ADMISSION SCREENING RESIDENT REVIEW (PASRR) LEVEL II
 RFP Number: CSP904309
 INDEX Number: DMH001
 UNSPSC Number: 93140000

Offeror's "Not to Exceed Cost".

1. Offeror must submit a detailed line item budget, with a budget narrative based on the Deliverables.
2. An indirect cost rate is not permissible.
3. There is no reimbursement for travel and other related expenses.
4. The State will not be liable for any costs the Offeror does not identify in the proposal.

OAKS Number: 16252 COST SUMMARY

Routine	*IT Support	Nurse	Total Not-to-Exceed	
\$315.00	N/A	\$270.00	\$1,365,300.00	Year 1 (FY2010)
\$315.00	N/A	\$270.00	\$1,800,000.00	Year 2 (FY2011)
\$315.00	\$100,000.00	*N/A	\$1,800,000.00	Year 3 (FY2012)

Withdrawn Applications			
No assessment completed	Partial assessment completed		
\$ 75.00	\$120.00		Year 1 (FY2010)
\$ 75.00	\$120.00		Year 2 (FY2011)
*\$ 75.00	*\$120.00		*Year 3 (FY2012)

Withdrawn applications will be paid at the flat rate indicated, the total not-to-exceed cost for the withdrawn applications will be driven by demand, and the State will initiate the withdrawal request.

CONTRACTOR INDEX

CONTRACTOR AND TERMS:

BID CONTRACT NO.: CSP904309-1 (06/30/10)

0000170510
 Ascend Management Innovations, LLC.
 227 French Landing Drive
 Suite 250
 Nashville, TN 37228

TERMS: Net 30 Days

Remit To Address
 0000170510
 Ascend Management Innovations, LLC.
 227 French Landing Drive
 Suite 250
 Nashville, TN 37228

CONTRACTOR'S CONTACT: Ms. Pam Raby

Telephone: 877-431-1388
 Fax: (615) 620-3420
 E-Mail: praby@ascendami.com

*Remove the Nurse category cost for FY2012 and add the withdrawn applications fees being the same as FY2011.

SUMMARY OF AMENDMENTS

Amendment Number	Revision Date	Description
*5	6/29/11	Remove the Nurse category cost for FY2012 and add the withdrawn applications fees being the same as FY2011.
4	6/23/11	Contract renewal for the period of 7/1/11 through 6/30/12 and add a new category. No additional funds are added to this Contract.
3	07/14/10	Increase the total not-to-exceed by \$434,700.00.
2	06/24/10	Contract renewal for the period of July 1, 2010 through June 30, 2011.
1	07/23/09	Addition to Cost Summary listing the Flat Rates for Withdrawn Applications.

*Add amendment number 5.