

## STATE OF CONNECTICUT DEPARTMENT OF SOCIAL SERVICES

# CONTRACT AMENDMENT

Contractor:

VALUEOPTIONS, INC

Contractor Address:

240 CORPORATE BOULEVARD, NORFOLK, CT 23502

Contract Number:

999VOI-MED-04 / 11DSS1216AL

Amendment Number:

**A3** 

Amount as Amended:

\$921,013.00

Contract Term as Amended: 12/15/11 - 06/30/16

The contract between Value Options, Inc. (the Contractor) and the Department of Social Services (the Department), which was last executed by the parties and approved by the Office of the Attorney General on 12/23/13, is hereby further amended as follows:

- 1. The total maximum amount payable will not increase and the total maxim payable under this contract shall not exceed \$921,013.00.
- 2. The term of the contract is extended for an additional twelve (12) and the end date of the contract is changed from 07/01/2015 to 06/30/16.
- 3. The Dun & Bradstreet (DUNS) number assigned to ValaucOptions, Inc. is: 08-819-2141.
- The address for the Department of Social Services on the cover sheet of the original contract is amended as follows:

Department of Social Services 55 Farmington Avenue Hartford, CT 06106

- 5. Amendments to Part I, Section labeled BUDGET/PAYMENT. The section labeled BUDGET/PAYMENT is hereby amended as follows:
  - by supplementing to the payment schedule and terms of the original contract, Amendment (A1) and Amendment (A2) with the payment terms for the period between 7/1/15 through 6/30/16 as follows:

Following the approved and signed amendment the Department will issue one advanced payment in the amount of \$20,142.30 on or before July 15, 2015. The Contractor shall submit to DSS an invoice for expenses accrued on a monthly basis according to the following schedule. Each invoice must be signed and dated and submitted to the Contract Manager (DSS) for review and approval. The actual invoice must include a complete breakout of expenditures for the billing period.

	INVOICE TO DSS	PAYMENT TO VALUE OPTIONS		
i	Initial Payment on or before July 15, 2015	\$20,142.30		
	Received by August 15, 2015 and monthly with the last invoice due to the Department no later than August 15, 2016	Received on or before the 30 <sup>th</sup> of each month with the last payment to be received on or before September 30, 2016		

6. **Amendments to Part I.** Part I is supplemented by adding after the section labeled, BUDGET/PAYMENT, on page 5, by adding a section labeled NOTICES, as follows:

#### **NOTICES**

a. In case of notice(s) to the Contractor:

ValueOptions, Inc. Attn: General Counsel 240 Corporate Boulevard Norfolk, VA 23502 (860) 263-7143, Stephen.robbins@valueoptions.corm

b. In case of notice(s) to the Department regarding this contract

### Olga Coleman-Williams

Contract Administration Unit Department of Social Services 55 Farmington Avenue Hartford, CT 06105 (860) 424-5661, or olga.coleman-williams@ct.gov

c. In case of notice(s) to the Department regarding this contract:

#### Maureen Reault

Division of Health Services/ Behavioral Health Unit, Department of Social Services 55 Farmington Avenue Hartford, CT 06105 (860) 424-5843, Maureen.Reault@ct.gov

- 7. Amendment to Part I. Part I, labeled CONTRACT FOR SERVICES in A2 is hereby amended as follows:
  - a. By deleting section 2.b.v. in its entirety and replacing it with the following:
    - v. The Contractor shall develop training schedules for the contract period between July 1, 2015 through June 30, 2016 to provide training to RCH paraprofessionals and Homemaker-Home Health Aides. The training class must have at a minimum ten (10) students and may include both RCH and HHA students.

- b. By supplementing after 2.b.v. a new section 2.b.vi.
  - vi. Recertification: The Contractor will increase their scope of work to include the onsite supervision of medication administration to members that reside in Residential Care Homes for the purpose of recertification for RCH Paraprofessionals that currently provide such services at the RCHs.

Recertification refers to; RCH Paraprofessionals who have received training and certification by Value Options, Inc. under the original and subsequent contract going forward. Individuals, whose certification has expired, must be recertified no later than 30 days after the expiration date on the original and or most recent certificate".

All terms and conditions of the original contract, and any subsequent amendments thereto, which were not modified by this Amendment remain in full force and effect.

# SIGNATURES AND APPROVALS

### 999VOI-MED-04/11DSS1216AL A3

The Contractor IS a Business Associate under the Health Insurance Portability and Accountability Act of 1996 as amended.

Documentation necessary to demonstrate the authorization to sign must be attached.

CONTR	ACTOR -	VAT	HEOR	PTIONS	INC
COLLIN	TOTOK -	4 7 3 1	$\omega \omega \mathbf{U}$	TIOLIO	

Douglas Th.	
Douglas Thompson	
Executive Vice President and CFO	

6 / 25 / 2015

Date

DEPARTMENT OF SOCIAL SERVICES

MINIO ON

6 30 15 Date

OFFICE OF THE ATTORNEY GENERAL

ASST. / ASSOC. ATTORNEY GENERAL (Approved as to form)

12801 Plabin

2/2//)5 Date