Request for Quotation

State of West Virginia
Department of Health & Human Resources
Office of Purchasing
One Davis Square, Suite 100
Charleston, WV 25301

BID OPENING DATE: 5/17/11

ADDENDUM NO. 2

1. TO SCHEDULE VENDORS FOR ORAL PRESENTATIONS ON JULY 26, 2011, AS FOLLOWS:
   INGENIX - 9:00 A.M. TO 12:00 P.M.
   THOMSON REUTERS - 1:30 P.M. TO 4:30 P.M.

2. VENDORS WILL BE ADMITTED THIRTY (30) MINUTES PRIOR TO THEIR DESIGNATED TIME SLOT FOR SETUP.

3. ORAL PRESENTATIONS WILL BE HELD AT 350 CAPITOL STREET, ROOM 317, CHARLESTON, WV 25301.

4. VENDORS ARE ASKED TO RESPOND BY 1:30 P.M. JULY 21, 2011 TO DONNA SMITH, SENIOR BUYER,
   WITH A HEAD COUNT OF INDIVIDUALS WHO WILL BE IN ATTENDANCE.

5. ADDENDUM ACKNOWLEDGEMENT IS ATTACHED. THIS DOCUMENT SHOULD BE SIGNED AND RETURNED
   TO THE BUYER. FAILURE TO SIGN AND RETURN MAY RESULT IN DISQUALIFICATION OF YOUR PROPOSAL.

REQUISITION NO.: MED11015

ADDENDUM ACKNOWLEDGEMENT

I HEREBY ACKNOWLEDGE RECEIPT OF THE FOLLOWING CHECKED ADDENDUM(S) AND HAVE MADE THE
NECESSARY REVISIONS TO MY PROPOSAL, PLANS AND/OR SPECIFICATION, ETC.

ADDENDUM NO.5™

NO. 1
NO. 2
NO. 3
NO. 4
NO. 5

I UNDERSTAND THAT FAILURE TO CONFIRM THE RECEIPT OF THE ADDENDUM(S) MAY BE CAUSE FOR
REJECTION OF PROPOSAL.

SEE REVERSE FOR TERMS AND CONDITIONS

SIGNATURE
TELEPHONE
DATE

TITLE
FEIN

ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFP, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED "VENDOR"
1. **ACCEPTANCE**: Seller shall be bound by this order and its terms and conditions upon receipt of this order.

2. **APPLICABLE LAW**: The laws of the State of West Virginia and the BMS Purchasing Manual shall govern all rights and duties under the Contract, including without limitation the validity of this Purchase Order/Contract.

3. **NON-FUNDING**: All services performed or goods delivered under BMS Purchase Orders/Contracts are to be continued for the terms of the Purchase Order/Contract, contingent upon funds being appropriated by the Legislature or otherwise being made available. In the event funds are not appropriated or otherwise available for these services or goods, the Purchase Order/Contract becomes void and of no effect after June 30.

4. **COMPLIANCE**: Seller shall comply with all federal, state and local laws, regulations and ordinance including, but not limited to, the prevailing wage rates of the WV Division of Labor.

5. **MODIFICATIONS**: This writing is the parties’ final expression of intent. No modification of this order shall be binding unless agreed to in writing by the Buyer.

6. **ASSIGNMENT**: Neither this Order or any monies due, or to become due hereunder may be assigned by the Seller without the Buyer’s consent.

7. **WARRANTY**: The Seller expressly warrants that the goods and/or services covered by this order will: (a) conform to the specifications, drawings, samples or other description furnished or specified by the BUYER; (b) be merchantable and fit for the purpose intended; and/or (c) be free from defect in material and workmanship.

8. **CANCELLATION**: The director of the DHHR Office of Purchasing may cancel any Purchase Order/Contract upon 30 days written notice to the seller.

9. **SHIPPING, BILLING & PRICES**: Prices are those stated in this order. No price increase will be accepted without written authority from the Buyer. All goods or services shall be shipped on or before the date specified in the Order.

10. **LATE PAYMENTS**: Payment may only be made after the delivery of goods or services. Interest may be paid on late payments in accordance with the West Virginia Code.

11. **TAXES**: The State of West Virginia is exempt from the federal and state taxes and will not pay or reimburse such taxes.

12. **RENEWAL**: Any reference to automatic renewal is hereby deleted. The Contract may be renewed only upon contract null and void, and terminate such contract without further order.

13. **BANKRUPTCY**: In the event the vendor/contractor files for bankruptcy protection, the State may deem this contract null and void, and terminate such contract without further order.

14. **HIPAA BUSINESS ASSOCIATE ADDENDUM**: The West Virginia State Government HIPAA Business Associate Addendum (BAA), approved by the Attorney General, is available online at www.state.wv.us/admin/purchase/vrc/hipaa.htm and is hereby made part of the agreement provided that the Agency meets the definition of a Cover Entity (45 CFR § 160.103) and will be disclosing Protected Health Information (45 CFR § 160.103) to the vendor.

15. **CONFIDENTIALITY**: The vendor agrees that he or she will not disclose to anyone, directly or indirectly, any such personally identifiable information or other confidential information gained from the agency, unless the individual who is the subject of the information consents to the disclosure in writing or the disclosure in writing or the disclosure is made pursuant to the agency’s policies, procedure, and rules.

16. **LICENSING**: Vendors much be licensed and in good standing in accordance with any and all state and local laws and requirement by any state or local agency of West Virginia, including but not limited to, the West Virginia Secretary of State’s Officer, the West Virginia Insurance Commission, or any other state agency or political subdivision. Furthermore, the vendor much provide all necessary releases to obtain information to enable the Director or spending unit to verify that the vendor is licensed and in good standing with the above entities.
Request for Quotation

State of West Virginia
Department of Health & Human Resources
Office of Purchasing
One Davis Square, Suite 100
Charleston, WV 25301

BID OPENING DATE: MAY 17, 2011 1:30 PM

VENDOR MUST CLEARLY 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.

END OF ADDENDUM NO. 3

SEE REVERSE FOR TERMS AND CONDITIONS

WHEN RESPONDING TO RFP, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED “VENDOR”

<table>
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<th>VENDOR</th>
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<th>LINE</th>
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<th>CAT.NO.</th>
<th>ITEM NUMBER</th>
<th>UNIT PRICE</th>
<th>AMOUNT</th>
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SIGNATURE

COMPANY

DATE

END OF ADDENDUM NO. 3

BUREAU FOR MEDICAL SERVICES
350 CAPITOL STREET, ROOM 251
CHARLESTON, WV 25301-3706

RFQ NUMBER: MED11015

ADDRESS CORRESPONDENCE TO ATTENTION OF
DONNA D. SMITH
304-957-0218

SIGNATURE

TELEPHONE

DATE

TITLE

FEIN

ADDRESS CHANGES TO BE NOTED ABOVE

PAGE 2
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