

Additional Information Regarding Vendors Performing Work in Replacement of State Employees

This document contains copies of purchase order contracts obtained by OMB by which a nongovernmental person or entity agrees with any department, commission, board, council, agency, or public corporation to provide services, valued at one hundred fifty thousand dollars (\$150,000) or more, which are substantially similar to and in replacement of work normally performed by an employee of the department, commission, board, council, agency or public corporation. For additional supporting contract documents, you may submit a public records request to the Department of Administration in accordance with the Rhode Island Access to Public Records Act ("APRA"), R.I. Gen. Laws § 38-2-1 *et seq.* APRA forms, procedures and other information for the Department of Administration are available at <http://www.admin.ri.gov/publicrecords/index.php>.

Fiscal Year: FY20

Agency: Executive Office of Health and Human Services

Vendor Name: CONNECTICUT PEER REVIEW ORGANIZATION INC

Total Amount Paid to Vendor for Services: \$578,901.47

Summary of Services Rendered to Agency:

Identifying Code	Service Type	Description	Amount	Notes
PO 3496677	Financial Services: Other		\$ 578,901.47	

Note: Some of the above payments may have been made under the terms of a master price agreement (MPA). MPAs are solicited as requests for proposals or requests for quotes and may have cap limits for pricing and cap limits for project cost. MPAs provide agencies with access to qualified vendors, expedited process, and opportunities for mini-bids. Such purchases are made directly under the MPA and do not require a separate and unique contract. All MPAs are public and can be viewed at <http://www.purchasing.ri.gov/MPA/MPASearch.aspx>.

Contents:

Item Number	Document ID	Description	Notes
Item 1	PO 3496677	Purchase Order contract	

ITEM 1



**State Of Rhode Island
 Department of Administration
 Division of Purchases
 One Capitol Hill
 Providence, RI 02908-5860**

Blanket Releases
 3496677, 0

V E N D O R	CONNECTICUT PEER REVIEW ORGANIZATION INC DBA QUALIDIGM 1290 SILAS DEANE HWY STE 401 WETHERSFIELD, CT 06109 United States
--	---

Purchase Order Number	3496677-14
Revision Number	0
Reference Contract Number	
PO Date	01-AUG-2019
Approved PO Date	01-AUG-2019
Buyer	- - Autocreate, *

S H I P T O	EOHHS-EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES 3 WEST ROAD CRANSTON, RI 02920 United States
--	---

Type of Requisition	
Requisition Number	1623021
Solicitation Number	
Freight	Paid
Payment Terms	NET 30
Vendor Number	39475
Requester Name	Nicotero, Michelle R
Work Telephone	401-462-6850

This Purchase Order is issued pursuant to and in accordance with the terms and conditions of the solicitation and applicable federal, state, and local law, including the State of Rhode Island's General Conditions of Purchase which are incorporated herein by reference contain specific contract terms applicable to this Purchase Order. See: <https://rules.sos.ri.gov/regulations/part/220-30-00-13>

PO #3496677 DATED 11/07/2019 AGENCY DOC ID # EOHHS20028MRN057

EXTEND EFFECTIVE TERMS:
 FROM: 01/01/2017 - 12/31/2019
 TO: 01/01/2017 - 12/31/2020

CURRENT CONTRACT VALUE: \$1,621,818.00
 INCREASE CONTROL VALUE: \$645,818.00
 REVISED CONTROL VALUE: \$2,267,636.00

EXERCISE ANNUAL OPTION RENEWAL.

PER AGREEMENT AMENDMENT #2 DATED 11/06/2019 AND THE RHODE ISLAND'S GENERAL CONDITIONS

INVOICE TO

IMMEDIATE VENDOR ACTION REQUIRED:
 Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :
http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf

REGISTRATION REQUIREMENTS
 IMMEDIATE VENDOR ACTION REQUIRED:
 ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at :
<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

STATE PURCHASING AGENT
 Nancy R. McIntyre

OF PURCHASE.

<https://rules.sos.ri.gov/regulations/part/220-30-00-13>

AGENCY CONTACT:
MICHELLE NICOTERO
401-462-6850

Reference Documents: 3496677 7550811.pdf

PO DESCRIPTION: APA-16827 FY17-19 Profit Year 1-3 5% NTE- Year 1 \$2,804.00; Year 2 \$2,848.00; Year 3 \$ 2,894.00

Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)
1		APA-16827 FY17-19 Profit Year 1-3 5% NTE- Year 1 \$2,804.00; Year 2 \$2,848.00; Year 3 \$ 2,894.00	264.99	Each	1	264.99
4.1		APA-16827 FY17-19 Inpatient/Outpatient Admission Screens- Year 3 Rate \$87.76 per case- NTE \$193,511	18692.88	Each	1	18,692.88
7		APA-16827 FY17-19 Psychiatric Facility Inpatient Admission Screens- Year 3 Rate \$117.85 per case- NTE \$11,431.00	707.1	Each	1	707.10
10		APA-16827 FY17-19 NICU Screens- Year 3 Rate \$114.74 per case- NTE \$36,946.00	6769.66	Each	1	6,769.66
13		APA-16827 FY17-19 Concurrent Review Rate- Year 3 Rate \$81.34 per case- NTE \$3,579.00	1301.44	Each	1	1,301.44
16		APA-16827 FY17-19 Psychiatric Facility Concurrent/LOS Review Rate- Year 3 Rate \$117.85 per case- NTE \$9,192.00	824.95	Each	1	824.95
18		APA-16827 FY17-19 Retrospective/Readmission Review- Year 3 Rate \$127.47 per case- NTE \$112,046.00	12109.65	Each	1	12,109.65
24		APA-16827 FY17-19 Project Manager -Year 3 NTE \$1,894 (18 Hours)	4	Hour	105.19	420.76
27		APA-16827 FY17-19 Fringe Benefit Rate Year 3 26.53% NTE \$502.00	111.63	Each	1	111.63
28		APA-16827 FY17-19 Other Direct Cost-NRI Community Services- NTE \$52,855.00	4537.71	Each	1	4,537.71
31		APA-16827 FY17-19 Overhead/Admin./Indirect Cost Rate-Year 3 43.13% NTE \$1,034.00	229.62	Each	1	229.62
Total:						45,970.39 (USD)

INVOICE TO

IMMEDIATE VENDOR ACTION REQUIRED:
Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :
http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf

REGISTRATION REQUIREMENTS

IMMEDIATE VENDOR ACTION REQUIRED:
ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at :
<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

STATE PURCHASING AGENT

Nancy R. McIntyre


Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)

INVOICE TO

IMMEDIATE VENDOR ACTION REQUIRED:
 Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :
http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf

REGISTRATION REQUIREMENTS

IMMEDIATE VENDOR ACTION REQUIRED:
 ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at :
<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

STATE PURCHASING AGENT
 Nancy R. McIntyre



State Of Rhode Island
Department of Administration
Division of Purchases
One Capitol Hill
Providence, RI 02908-5860

Blanket Releases
3496677, 0

V E N D O R	CONNECTICUT PEER REVIEW ORGANIZATION INC DBA QUALIDIGM 1290 SILAS DEANE HWY STE 401 WETHERSFIELD, CT 06109 United States
--	---

Purchase Order Number	3496677-15
Revision Number	0
Reference Contract Number	
PO Date	11-OCT-2019
Approved PO Date	11-OCT-2019
Buyer	- - Autocreate, *

S H I P T O	EOHHS-EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES 3 WEST ROAD CRANSTON, RI 02920 United States
--	---

Type of Requisition	
Requisition Number	1634670
Solicitation Number	
Freight	Paid
Payment Terms	NET 30
Vendor Number	39475
Requester Name	Nicotero, Michelle R
Work Telephone	401-462-6850

This Purchase Order is issued pursuant to and in accordance with the terms and conditions of the solicitation and applicable federal, state, and local law, including the State of Rhode Island's General Conditions of Purchase which are incorporated herein by reference contain specific contract terms applicable to this Purchase Order. See: <https://rules.sos.ri.gov/regulations/part/220-30-00-13>

PO #3496677 DATED 11/07/2019 AGENCY DOC ID # EOHHS20028MRN057

EXTEND EFFECTIVE TERMS:
 FROM: 01/01/2017 - 12/31/2019
 TO: 01/01/2017 - 12/31/2020

CURRENT CONTRACT VALUE: \$1,621,818.00
 INCREASE CONTROL VALUE: \$645,818.00
 REVISED CONTROL VALUE: \$2,267,636.00

EXERCISE ANNUAL OPTION RENEWAL.

PER AGREEMENT AMENDMENT #2 DATED 11/06/2019 AND THE RHODE ISLAND'S GENERAL CONDITIONS

INVOICE TO
IMMEDIATE VENDOR ACTION REQUIRED: Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at : http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf
REGISTRATION REQUIREMENTS
IMMEDIATE VENDOR ACTION REQUIRED: ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at : https://www.ridop.ri.gov/osp/osp-vendor-registration.php

STATE PURCHASING AGENT
 Nancy R. McIntyre

OF PURCHASE.

<https://rules.sos.ri.gov/regulations/part/220-30-00-13>

AGENCY CONTACT:
MICHELLE NICOTERO
401-462-6850

Reference Documents: 3496677 7550811.pdf

PO DESCRIPTION: APA-16827 FY17-19 Inpatient/Outpatient Admission Screens- Year 3 Rate \$87.76 per case- NTE \$193,511

Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)
4.1		APA-16827 FY17-19 Inpatient/Outpatient Admission Screens- Year 3 Rate \$87.76 per case- NTE \$193,511	37473.52	Each	1	37,473.52
7		APA-16827 FY17-19 Psychiatric Facility Inpatient Admission Screens- Year 3 Rate \$117.85 per case- NTE \$11,431.00	824.95	Each	1	824.95
10		APA-16827 FY17-19 NICU Screens- Year 3 Rate \$114.74 per case- NTE \$36,946.00	11015.04	Each	1	11,015.04
13		APA-16827 FY17-19 Concurrent Review Rate- Year 3 Rate \$81.34 per case- NTE \$3,579.00	1057.42	Each	1	1,057.42
16		APA-16827 FY17-19 Psychiatric Facility Concurrent/LOS Review Rate- Year 3 Rate \$117.85 per case- NTE \$9,192.00	2121.3	Each	1	2,121.30
18		APA-16827 FY17-19 Retrospective/Readmission Review- Year 3 Rate \$127.47 per case- NTE \$112,046.00	28680.75	Each	1	28,680.75
21		APA-16827 FY17-19 Psychiatric Facility Retrospective Review-Year 3 Rate \$130.66 per case- NTE \$5,096.00	391.98	Each	1	391.98
24		APA-16827 FY17-19 Project Manager -Year 3 NTE \$1,894 (18 Hours)	15.2126	Hour	105.19	1,600.21
28		APA-16827 FY17-19 Other Direct Cost-NRI Community Services- NTE \$52,855.00	9528.97	Each	1	9,528.97
Total: 92,694.14 (USD)						

INVOICE TO

IMMEDIATE VENDOR ACTION REQUIRED:
Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :
http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf

REGISTRATION REQUIREMENTS

IMMEDIATE VENDOR ACTION REQUIRED:
ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at :
<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

STATE PURCHASING AGENT

Nancy R. McIntyre



**State Of Rhode Island
 Department of Administration
 Division of Purchases
 One Capitol Hill
 Providence, RI 02908-5860**

Blanket Releases
 3496677, 0

V E N D O R	CONNECTICUT PEER REVIEW ORGANIZATION INC DBA QUALIDIGM 1290 SILAS DEANE HWY STE 401 WETHERSFIELD, CT 06109 United States
--	---

Purchase Order Number	3496677-16
Revision Number	0
Reference Contract Number	
PO Date	21-JAN-2020
Approved PO Date	21-JAN-2020
Buyer	- - Autocreate, *

S H I P T O	EOHHS-EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES 3 WEST ROAD CRANSTON, RI 02920 United States
--	---

Type of Requisition	
Requisition Number	1646033
Solicitation Number	
Freight	Paid
Payment Terms	NET 30
Vendor Number	39475
Requester Name	Nicotero, Michelle R
Work Telephone	401-462-6850

This Purchase Order is issued pursuant to and in accordance with the terms and conditions of the solicitation and applicable federal, state, and local law, including the State of Rhode Island's General Conditions of Purchase which are incorporated herein by reference contain specific contract terms applicable to this Purchase Order. See: <https://rules.sos.ri.gov/regulations/part/220-30-00-13>

PO #3496677 DATED 11/07/2019 AGENCY DOC ID # EOHHS20028MRN057

EXTEND EFFECTIVE TERMS:
 FROM: 01/01/2017 - 12/31/2019
 TO: 01/01/2017 - 12/31/2020

CURRENT CONTRACT VALUE: \$1,621,818.00
 INCREASE CONTROL VALUE: \$645,818.00
 REVISED CONTROL VALUE: \$2,267,636.00

EXERCISE ANNUAL OPTION RENEWAL.

PER AGREEMENT AMENDMENT #2 DATED 11/06/2019 AND THE RHODE ISLAND'S GENERAL CONDITIONS

INVOICE TO

IMMEDIATE VENDOR ACTION REQUIRED:
 Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :
http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf

REGISTRATION REQUIREMENTS

IMMEDIATE VENDOR ACTION REQUIRED:
 ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at :
<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

STATE PURCHASING AGENT
 Nancy R. McIntyre

OF PURCHASE.

<https://rules.sos.ri.gov/regulations/part/220-30-00-13>

AGENCY CONTACT:
MICHELLE NICOTERO
401-462-6850

Reference Documents: 3496677 7550811.pdf

PO DESCRIPTION: APA-16827 FY20-21 INPATIENT/OUTPATIENT ADMISSION SCREENS-YEAR 4 RATE \$90.39 PER CASE- NTE \$261,408.00

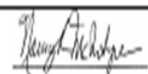
Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)
33		APA-16827 FY20-21 INPATIENT/OUTPATIENT ADMISSION SCREENS-YEAR 4 RATE \$90.39 PER CASE- NTE \$261,408.00	54411.2	Each	1	54,411.20
34		APA-16827 FY20-21 PSYCHIATRIC FACILITY INPATIENT ADMISSION SCREENS- YEAR 4 RATE \$121.39 PER CASE- NTE \$13,110.00	1296.35	Each	1	1,296.35
35		APA-16827 FY20-21 NICU SCREENS-YEAR 4 RATE \$118.18 PER CASE- NTE \$58,145.00	18243.66	Each	1	18,243.66
36		APA-16827 FY20-21 CONCURRENT REVIEW RATE- YEAR 4 RATE \$83.78 PER CASE- NTE \$14,075.00	1870.82	Each	1	1,870.82
37		APA-16827 FY20-21 PSYCHIATRIC FACILITY CONCURRENT/ LOS REVIEW RATE-YEAR 4 \$121.39 PER CASE- NTE \$10,197.00	589.25	Each	1	589.25
38		APA-16827 FY20-21 RETROSPECTIVE/READMISSION REVIEW- YEAR 4 RATE \$131.29 PER CASE- NTE \$220,567.00	46271.61	Each	1	46,271.61
39		APA-16827 FY20-21 PSYCHIATRIC FACILITY RETROSPECTIVE REVIEW-YEAR 4 RATE \$134.58 PER CASE- NTE \$4,845.00	261.32	Each	1	261.32
40		APA-16827 FY20-21 PROJECT MANAGER- YEAR 4- NTE \$1,950.00	11.0819	Each	108.34	1,200.61
42		APA-16827 FY20-21 OTHER DIRECT COST- NRI COMMUNITY SERVICES-	14293.77	Each	1	14,293.77

INVOICE TO

IMMEDIATE VENDOR ACTION REQUIRED:
Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :
http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf

REGISTRATION REQUIREMENTS

IMMEDIATE VENDOR ACTION REQUIRED:
ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at :
<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

STATE PURCHASING AGENT

Nancy R. McIntyre

Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)
		NTE \$56,915.00				
Total: 138,438.59 (USD)						

INVOICE TO

IMMEDIATE VENDOR ACTION REQUIRED:
 Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :
http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf

REGISTRATION REQUIREMENTS

IMMEDIATE VENDOR ACTION REQUIRED:
 ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at :
<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

STATE PURCHASING AGENT

Nancy R. McIntyre



State Of Rhode Island
Department of Administration
Division of Purchases
One Capitol Hill
Providence, RI 02908-5860

Blanket Releases
3496677, 0

V E N D O R	CONNECTICUT PEER REVIEW ORGANIZATION INC DBA QUALIDIGM 1290 SILAS DEANE HWY STE 401 WETHERSFIELD, CT 06109 United States
--	---

Purchase Order Number	3496677-17
Revision Number	0
Reference Contract Number	
PO Date	24-FEB-2020
Approved PO Date	24-FEB-2020
Buyer	- - Autocreate, *

S H I P T O	EOHHS-EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES 3 WEST ROAD CRANSTON, RI 02920 United States
--	---

Type of Requisition	
Requisition Number	1650344
Solicitation Number	
Freight	Paid
Payment Terms	NET 30
Vendor Number	39475
Requester Name	Nicotero, Michelle R
Work Telephone	401-462-6850

This Purchase Order is issued pursuant to and in accordance with the terms and conditions of the solicitation and applicable federal, state, and local law, including the State of Rhode Island's General Conditions of Purchase which are incorporated herein by reference contain specific contract terms applicable to this Purchase Order. See: <https://rules.sos.ri.gov/regulations/part/220-30-00-13>

PO #3496677 DATED 11/07/2019 AGENCY DOC ID # EOHHS20028MRN057

EXTEND EFFECTIVE TERMS:
 FROM: 01/01/2017 - 12/31/2019
 TO: 01/01/2017 - 12/31/2020

CURRENT CONTRACT VALUE: \$1,621,818.00
 INCREASE CONTROL VALUE: \$645,818.00
 REVISED CONTROL VALUE: \$2,267,636.00

EXERCISE ANNUAL OPTION RENEWAL.

PER AGREEMENT AMENDMENT #2 DATED 11/06/2019 AND THE RHODE ISLAND'S GENERAL CONDITIONS

INVOICE TO

IMMEDIATE VENDOR ACTION REQUIRED:
 Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :
http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf

REGISTRATION REQUIREMENTS

IMMEDIATE VENDOR ACTION REQUIRED:
 ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at :
<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

STATE PURCHASING AGENT  Nancy R. McIntyre

OF PURCHASE.

<https://rules.sos.ri.gov/regulations/part/220-30-00-13>

AGENCY CONTACT:
MICHELLE NICOTERO
401-462-6850

Reference Documents: 3496677 7550811.pdf

PO DESCRIPTION: APA-16827 FY17-19 Inpatient/Outpatient Admission Screens- Year 3 Rate \$87.76 per case- NTE \$193,511

Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)
4.1		APA-16827 FY17-19 Inpatient/Outpatient Admission Screens- Year 3 Rate \$87.76 per case- NTE \$193,511	37656.37	Each	1	37,656.37
7		APA-16827 FY17-19 Psychiatric Facility Inpatient Admission Screens- Year 3 Rate \$117.85 per case- NTE \$11,431.00	953.42	Each	1	953.42
10		APA-16827 FY17-19 NICU Screens- Year 3 Rate \$114.74 per case- NTE \$36,946.00	13255.8	Each	1	13,255.80
13		APA-16827 FY17-19 Concurrent Review Rate- Year 3 Rate \$81.34 per case- NTE \$3,579.00	832.92	Each	1	832.92
16		APA-16827 FY17-19 Psychiatric Facility Concurrent/LOS Review Rate- Year 3 Rate \$117.85 per case- NTE \$9,192.00	1078.35	Each	1	1,078.35
18		APA-16827 FY17-19 Retrospective/Readmission Review- Year 3 Rate \$127.47 per case- NTE \$112,046.00	25107.36	Each	1	25,107.36
21		APA-16827 FY17-19 Psychiatric Facility Retrospective Review-Year 3 Rate \$130.66 per case- NTE \$5,096.00	130.66	Each	1	130.66
24		APA-16827 FY17-19 Project Manager -Year 3 NTE \$1,894 (18 Hours)	4.754	Hour	105.19	500.07
28		APA-16827 FY17-19 Other Direct Cost-NRI Community Services- NTE \$52,855.00	9529.18	Each	1	9,529.18
Total: 89,044.13 (USD)						

INVOICE TO

IMMEDIATE VENDOR ACTION REQUIRED:
Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :
http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf

REGISTRATION REQUIREMENTS

IMMEDIATE VENDOR ACTION REQUIRED:
ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at :
<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

STATE PURCHASING AGENT

Nancy R. McIntyre



State Of Rhode Island
Department of Administration
Division of Purchases
One Capitol Hill
Providence, RI 02908-5860

Blanket Releases
3496677, 0

V E N D O R	CONNECTICUT PEER REVIEW ORGANIZATION INC DBA QUALIDIGM 1290 SILAS DEANE HWY STE 401 WETHERSFIELD, CT 06109 United States
--	---

Purchase Order Number	3496677-18
Revision Number	0
Reference Contract Number	
PO Date	16-MAR-2020
Approved PO Date	16-MAR-2020
Buyer	- - Autocreate, *

S H I P T O	EOHHS-EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES 3 WEST ROAD CRANSTON, RI 02920 United States
--	---

Type of Requisition	
Requisition Number	1653467
Solicitation Number	
Freight	Paid
Payment Terms	NET 30
Vendor Number	39475
Requester Name	Nicotero, Michelle R
Work Telephone	401-462-6850

This Purchase Order is issued pursuant to and in accordance with the terms and conditions of the solicitation and applicable federal, state, and local law, including the State of Rhode Island's General Conditions of Purchase which are incorporated herein by reference contain specific contract terms applicable to this Purchase Order. See: <https://rules.sos.ri.gov/regulations/part/220-30-00-13>

PO #3496677 DATED 11/07/2019 AGENCY DOC ID # EOHHS20028MRN057

EXTEND EFFECTIVE TERMS:
 FROM: 01/01/2017 - 12/31/2019
 TO: 01/01/2017 - 12/31/2020

CURRENT CONTRACT VALUE: \$1,621,818.00
 INCREASE CONTROL VALUE: \$645,818.00
 REVISED CONTROL VALUE: \$2,267,636.00

EXERCISE ANNUAL OPTION RENEWAL.

PER AGREEMENT AMENDMENT #2 DATED 11/06/2019 AND THE RHODE ISLAND'S GENERAL CONDITIONS

INVOICE TO
IMMEDIATE VENDOR ACTION REQUIRED: Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at : http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf
REGISTRATION REQUIREMENTS
IMMEDIATE VENDOR ACTION REQUIRED: ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at : https://www.ridop.ri.gov/osp/osp-vendor-registration.php

STATE PURCHASING AGENT
 Nancy R. McIntyre

OF PURCHASE.

<https://rules.sos.ri.gov/regulations/part/220-30-00-13>

AGENCY CONTACT:
MICHELLE NICOTERO
401-462-6850

Reference Documents: 3496677 7550811.pdf

PO DESCRIPTION: APA-16827 FY17-19 Inpatient/Outpatient Admission Screens- Year 3 Rate \$87.76 per case- NTE \$193,511

Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)
4.1		APA-16827 FY17-19 Inpatient/Outpatient Admission Screens- Year 3 Rate \$87.76 per case- NTE \$193,511	17806.83	Each	1	17,806.83
10		APA-16827 FY17-19 NICU Screens- Year 3 Rate \$114.74 per case- NTE \$36,946.00	6381.72	Each	1	6,381.72
13		APA-16827 FY17-19 Concurrent Review Rate- Year 3 Rate \$81.34 per case- NTE \$3,579.00	754.02	Each	1	754.02
16		APA-16827 FY17-19 Psychiatric Facility Concurrent/LOS Review Rate- Year 3 Rate \$117.85 per case- NTE \$9,192.00	971.12	Each	1	971.12
18		APA-16827 FY17-19 Retrospective/Readmission Review- Year 3 Rate \$127.47 per case- NTE \$112,046.00	15360.93	Each	1	15,360.93
28		APA-16827 FY17-19 Other Direct Cost-NRI Community Services- NTE \$52,855.00	4903.68	Each	1	4,903.68
Total: 46,178.30 (USD)						

INVOICE TO

IMMEDIATE VENDOR ACTION REQUIRED:
Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :
http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf

REGISTRATION REQUIREMENTS

IMMEDIATE VENDOR ACTION REQUIRED:
ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at :
<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

STATE PURCHASING AGENT

Nancy R. McIntyre



**State Of Rhode Island
 Department of Administration
 Division of Purchases
 One Capitol Hill
 Providence, RI 02908-5860**

Blanket Releases
 3496677, 0

V E N D O R	CONNECTICUT PEER REVIEW ORGANIZATION INC DBA QUALIDIGM 1290 SILAS DEANE HWY STE 401 WETHERSFIELD, CT 06109 United States
--	---

Purchase Order Number	3496677-19
Revision Number	0
Reference Contract Number	
PO Date	20-APR-2020
Approved PO Date	20-APR-2020
Buyer	- - Autocreate, *

S H I P T O	EOHHS-EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES 3 WEST ROAD CRANSTON, RI 02920 United States
--	---

Type of Requisition	
Requisition Number	1656309
Solicitation Number	
Freight	Paid
Payment Terms	NET 30
Vendor Number	39475
Requester Name	Nicotero, Michelle R
Work Telephone	401-462-6850

This Purchase Order is issued pursuant to and in accordance with the terms and conditions of the solicitation and applicable federal, state, and local law, including the State of Rhode Island's General Conditions of Purchase which are incorporated herein by reference contain specific contract terms applicable to this Purchase Order. See: <https://rules.sos.ri.gov/regulations/part/220-30-00-13>

PO #3496677 DATED 11/07/2019 AGENCY DOC ID # EOHHS20028MRN057

EXTEND EFFECTIVE TERMS:
 FROM: 01/01/2017 - 12/31/2019
 TO: 01/01/2017 - 12/31/2020

CURRENT CONTRACT VALUE: \$1,621,818.00
 INCREASE CONTROL VALUE: \$645,818.00
 REVISED CONTROL VALUE: \$2,267,636.00

EXERCISE ANNUAL OPTION RENEWAL.

PER AGREEMENT AMENDMENT #2 DATED 11/06/2019 AND THE RHODE ISLAND'S GENERAL CONDITIONS

INVOICE TO

IMMEDIATE VENDOR ACTION REQUIRED:
 Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :
http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf

REGISTRATION REQUIREMENTS

IMMEDIATE VENDOR ACTION REQUIRED:
 ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at :
<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

STATE PURCHASING AGENT
 Nancy R. McIntyre

OF PURCHASE.

<https://rules.sos.ri.gov/regulations/part/220-30-00-13>

AGENCY CONTACT:
MICHELLE NICOTERO
401-462-6850

Reference Documents: 3496677 7550811.pdf

PO DESCRIPTION: APA-16827 FY17-19 Inpatient/Outpatient Admission Screens- Year 3 Rate \$87.76 per case- NTE \$193,511

Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)
4.1		APA-16827 FY17-19 Inpatient/Outpatient Admission Screens- Year 3 Rate \$87.76 per case- NTE \$193,511	21693.6	Each	1	21,693.60
7		APA-16827 FY17-19 Psychiatric Facility Inpatient Admission Screens- Year 3 Rate \$117.85 per case- NTE \$11,431.00	606.95	Each	1	606.95
10		APA-16827 FY17-19 NICU Screens- Year 3 Rate \$114.74 per case- NTE \$36,946.00	4845.38	Each	1	4,845.38
13		APA-16827 FY17-19 Concurrent Review Rate- Year 3 Rate \$81.34 per case- NTE \$3,579.00	1089.14	Each	1	1,089.14
16		APA-16827 FY17-19 Psychiatric Facility Concurrent/LOS Review Rate- Year 3 Rate \$117.85 per case- NTE \$9,192.00	364.17	Each	1	364.17
18		APA-16827 FY17-19 Retrospective/Readmission Review- Year 3 Rate \$127.47 per case- NTE \$112,046.00	10634.49	Each	1	10,634.49
21		APA-16827 FY17-19 Psychiatric Facility Retrospective Review-Year 3 Rate \$130.66 per case- NTE \$5,096.00	403.74	Each	1	403.74
28		APA-16827 FY17-19 Other Direct Cost-NRI Community Services- NTE \$52,855.00	4834.14	Each	1	4,834.14
Total: 44,471.61 (USD)						

INVOICE TO

IMMEDIATE VENDOR ACTION REQUIRED:
Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :
http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf

REGISTRATION REQUIREMENTS

IMMEDIATE VENDOR ACTION REQUIRED:
ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at :
<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

STATE PURCHASING AGENT

Nancy R. McIntyre



**State Of Rhode Island
 Department of Administration
 Division of Purchases
 One Capitol Hill
 Providence, RI 02908-5860**

Blanket Releases
 3496677, 0

V E N D O R	CONNECTICUT PEER REVIEW ORGANIZATION INC DBA QUALIDIGM 1290 SILAS DEANE HWY STE 401 WETHERSFIELD, CT 06109 United States
--	---

Purchase Order Number	3496677-20
Revision Number	0
Reference Contract Number	
PO Date	07-MAY-2020
Approved PO Date	07-MAY-2020
Buyer	- - Autocreate, *

S H I P T O	EOHHS-EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES 3 WEST ROAD CRANSTON, RI 02920 United States
--	---

Type of Requisition	
Requisition Number	1658709
Solicitation Number	
Freight	Paid
Payment Terms	NET 30
Vendor Number	39475
Requester Name	Nicotero, Michelle R
Work Telephone	401-462-6850

This Purchase Order is issued pursuant to and in accordance with the terms and conditions of the solicitation and applicable federal, state, and local law, including the State of Rhode Island's General Conditions of Purchase which are incorporated herein by reference contain specific contract terms applicable to this Purchase Order. See: <https://rules.sos.ri.gov/regulations/part/220-30-00-13>

PO #3496677 DATED 11/07/2019 AGENCY DOC ID # EOHHS20028MRN057

EXTEND EFFECTIVE TERMS:
 FROM: 01/01/2017 - 12/31/2019
 TO: 01/01/2017 - 12/31/2020

CURRENT CONTRACT VALUE: \$1,621,818.00
 INCREASE CONTROL VALUE: \$645,818.00
 REVISED CONTROL VALUE: \$2,267,636.00

EXERCISE ANNUAL OPTION RENEWAL.

PER AGREEMENT AMENDMENT #2 DATED 11/06/2019 AND THE RHODE ISLAND'S GENERAL CONDITIONS

INVOICE TO

IMMEDIATE VENDOR ACTION REQUIRED:
 Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :
http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf

REGISTRATION REQUIREMENTS

IMMEDIATE VENDOR ACTION REQUIRED:
 ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at :
<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

STATE PURCHASING AGENT
 Nancy R. McIntyre

OF PURCHASE.

<https://rules.sos.ri.gov/regulations/part/220-30-00-13>

AGENCY CONTACT:
MICHELLE NICOTERO
401-462-6850

Reference Documents: 3496677 7550811.pdf

PO DESCRIPTION: APA-16827 FY17-19 Inpatient/Outpatient Admission Screens- Year 3 Rate \$87.76 per case- NTE \$193,511

Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)
4.1		APA-16827 FY17-19 Inpatient/Outpatient Admission Screens- Year 3 Rate \$87.76 per case- NTE \$193,511	16541.37	Each	1	16,541.37
7		APA-16827 FY17-19 Psychiatric Facility Inpatient Admission Screens- Year 3 Rate \$117.85 per case- NTE \$11,431.00	485.56	Each	1	485.56
10		APA-16827 FY17-19 NICU Screens- Year 3 Rate \$114.74 per case- NTE \$36,946.00	5081.74	Each	1	5,081.74
13		APA-16827 FY17-19 Concurrent Review Rate- Year 3 Rate \$81.34 per case- NTE \$3,579.00	1340.48	Each	1	1,340.48
16		APA-16827 FY17-19 Psychiatric Facility Concurrent/LOS Review Rate- Year 3 Rate \$117.85 per case- NTE \$9,192.00	485.56	Each	1	485.56
18		APA-16827 FY17-19 Retrospective/Readmission Review- Year 3 Rate \$127.47 per case- NTE \$112,046.00	13129	Each	1	13,129.00
21		APA-16827 FY17-19 Psychiatric Facility Retrospective Review-Year 3 Rate \$130.66 per case- NTE \$5,096.00	269.16	Each	1	269.16
28		APA-16827 FY17-19 Other Direct Cost-NRI Community Services- NTE \$52,855.00	4834.14	Each	1	4,834.14
Total:						42,167.01 (USD)

INVOICE TO

IMMEDIATE VENDOR ACTION REQUIRED:
Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :
http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf

REGISTRATION REQUIREMENTS

IMMEDIATE VENDOR ACTION REQUIRED:
ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at :
<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

STATE PURCHASING AGENT

Nancy R. McIntyre



**State Of Rhode Island
 Department of Administration
 Division of Purchases
 One Capitol Hill
 Providence, RI 02908-5860**

Blanket Releases
 3496677, 0

V E N D O R	CONNECTICUT PEER REVIEW ORGANIZATION INC DBA QUALIDIGM 1290 SILAS DEANE HWY STE 401 WETHERSFIELD, CT 06109 United States
--	---

Purchase Order Number	3496677-21
Revision Number	0
Reference Contract Number	
PO Date	19-JUN-2020
Approved PO Date	19-JUN-2020
Buyer	- - Autocreate, *

S H I P T O	EOHHS-EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES 3 WEST ROAD CRANSTON, RI 02920 United States
--	---

Type of Requisition	
Requisition Number	1662657
Solicitation Number	
Freight	Paid
Payment Terms	NET 30
Vendor Number	39475
Requester Name	Nicotero, Michelle R
Work Telephone	401-462-6850

This Purchase Order is issued pursuant to and in accordance with the terms and conditions of the solicitation and applicable federal, state, and local law, including the State of Rhode Island's General Conditions of Purchase which are incorporated herein by reference contain specific contract terms applicable to this Purchase Order. See: <https://rules.sos.ri.gov/regulations/part/220-30-00-13>

PO #3496677 DATED 11/07/2019 AGENCY DOC ID # EOHHS20028MRN057

EXTEND EFFECTIVE TERMS:
 FROM: 01/01/2017 - 12/31/2019
 TO: 01/01/2017 - 12/31/2020

CURRENT CONTRACT VALUE: \$1,621,818.00
 INCREASE CONTROL VALUE: \$645,818.00
 REVISED CONTROL VALUE: \$2,267,636.00

EXERCISE ANNUAL OPTION RENEWAL.

PER AGREEMENT AMENDMENT #2 DATED 11/06/2019 AND THE RHODE ISLAND'S GENERAL CONDITIONS

INVOICE TO

IMMEDIATE VENDOR ACTION REQUIRED:
 Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :
http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf

REGISTRATION REQUIREMENTS

IMMEDIATE VENDOR ACTION REQUIRED:
 ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at :
<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

STATE PURCHASING AGENT
 Nancy R. McIntyre

OF PURCHASE.

<https://rules.sos.ri.gov/regulations/part/220-30-00-13>

AGENCY CONTACT:
MICHELLE NICOTERO
401-462-6850

Reference Documents: 3496677 7550811.pdf

PO DESCRIPTION: APA-16827 FY17-19 Inpatient/Outpatient Admission Screens- Year 3 Rate \$87.76 per case- NTE \$193,511

Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)
4.1		APA-16827 FY17-19 Inpatient/Outpatient Admission Screens- Year 3 Rate \$87.76 per case- NTE \$193,511	17264.49	Each	1	17,264.49
7		APA-16827 FY17-19 Psychiatric Facility Inpatient Admission Screens- Year 3 Rate \$117.85 per case- NTE \$11,431.00	242.78	Each	1	242.78
10		APA-16827 FY17-19 NICU Screens- Year 3 Rate \$114.74 per case- NTE \$36,946.00	5199.92	Each	1	5,199.92
13		APA-16827 FY17-19 Concurrent Review Rate- Year 3 Rate \$81.34 per case- NTE \$3,579.00	1005.36	Each	1	1,005.36
16		APA-16827 FY17-19 Psychiatric Facility Concurrent/LOS Review Rate- Year 3 Rate \$117.85 per case- NTE \$9,192.00	364.17	Each	1	364.17
18		APA-16827 FY17-19 Retrospective/Readmission Review- Year 3 Rate \$127.47 per case- NTE \$112,046.00	12341.26	Each	1	12,341.26
28		APA-16827 FY17-19 Other Direct Cost-NRI Community Services- NTE \$52,855.00	4834.14	Each	1	4,834.14
Total:						41,252.12 (USD)

INVOICE TO

IMMEDIATE VENDOR ACTION REQUIRED:
Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :
http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf

REGISTRATION REQUIREMENTS

IMMEDIATE VENDOR ACTION REQUIRED:
ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at :
<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

STATE PURCHASING AGENT

Nancy R. McIntyre



**State Of Rhode Island
 Department of Administration
 Division of Purchases
 One Capitol Hill
 Providence, RI 02908-5860**

Blanket Releases
 3496677, 1

V E N D O R	CONNECTICUT PEER REVIEW ORGANIZATION INC DBA QUALIDIGM 1290 SILAS DEANE HWY STE 401 WETHERSFIELD, CT 06109 United States
--	---

Purchase Order Number	3496677-22
Revision Number	1
Reference Contract Number	
PO Date	23-JUN-2020
Approved PO Date	02-JUL-2020
Buyer	Autocreate, * -

S H I P T O	EOHHS-EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES 3 WEST ROAD CRANSTON, RI 02920 United States
---	---

Type of Requisition	
Requisition Number	1663032
Solicitation Number	
Freight	Paid
Payment Terms	NET 30
Vendor Number	39475
Requester Name	Nicotero, Michelle R
Work Telephone	401-462-6850

This Purchase Order is issued pursuant to and in accordance with the terms and conditions of the solicitation and applicable federal, state, and local law, including the State of Rhode Island's General Conditions of Purchase which are incorporated herein by reference contain specific contract terms applicable to this Purchase Order. See: <https://rules.sos.ri.gov/regulations/part/220-30-00-13>

PO #3496677 DATED 11/07/2019 AGENCY DOC ID # EOHHS20028MRN057

EXTEND EFFECTIVE TERMS:
 FROM: 01/01/2017 - 12/31/2019
 TO: 01/01/2017 - 12/31/2020

CURRENT CONTRACT VALUE: \$1,621,818.00
 INCREASE CONTROL VALUE: \$645,818.00
 REVISED CONTROL VALUE: \$2,267,636.00

EXERCISE ANNUAL OPTION RENEWAL.

PER AGREEMENT AMENDMENT #2 DATED 11/06/2019 AND THE RHODE ISLAND'S GENERAL CONDITIONS OF PURCHASE.
<https://rules.sos.ri.gov/regulations/part/220-30-00-13>

INVOICE TO

IMMEDIATE VENDOR ACTION REQUIRED:
 Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :
http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf

REGISTRATION REQUIREMENTS

IMMEDIATE VENDOR ACTION REQUIRED:
 ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at :
<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

STATE PURCHASING AGENT
 Nancy R. McIntyre

AGENCY CONTACT:
MICHELLE NICOTERO
401-462-6850

Reference Documents: 3496677 7550811.pdf

PO DESCRIPTION: APA-16827 FY17-19 Inpatient/Outpatient Admission Screens- Year 3 Rate \$87.76 per case- NTE \$193,511

Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)
4.1		APA-16827 FY17-19 Inpatient/Outpatient Admission Screens- Year 3 Rate \$87.76 per case- NTE \$193,511	17174.1	Each	1	17,174.10
7		APA-16827 FY17-19 Psychiatric Facility Inpatient Admission Screens- Year 3 Rate \$117.85 per case- NTE \$11,431.00	485.56	Each	1	485.56
10		APA-16827 FY17-19 NICU Screens- Year 3 Rate \$114.74 per case- NTE \$36,946.00	5199.92	Each	1	5,199.92
13		APA-16827 FY17-19 Concurrent Review Rate- Year 3 Rate \$81.34 per case- NTE \$3,579.00	1424.26	Each	1	1,424.26
16		APA-16827 FY17-19 Psychiatric Facility Concurrent/LOS Review Rate- Year 3 Rate \$117.85 per case- NTE \$9,192.00	242.78	Each	1	242.78
18		APA-16827 FY17-19 Retrospective/Readmission Review- Year 3 Rate \$127.47 per case- NTE \$112,046.00	9190.3	Each	1	9,190.30
21		APA-16827 FY17-19 Psychiatric Facility Retrospective Review-Year 3 Rate \$130.66 per case- NTE \$5,096.00	134.58	Each	1	134.58
28		APA-16827 FY17-19 Other Direct Cost-NRI Community Services- NTE \$52,855.00	4834.14	Each	1	4,834.14
Total: 38,685.64 (USD)						

INVOICE TO

IMMEDIATE VENDOR ACTION REQUIRED:
Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :
http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf

REGISTRATION REQUIREMENTS

IMMEDIATE VENDOR ACTION REQUIRED:
ALL vendors with an existing Purchase Order must be registered in OCEAN STATE PROCURES(OSP). Get Instructions at :
<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

STATE PURCHASING AGENT

Nancy R. McIntyre