

## **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:** RHODE ISLAND QUALITY INSTITUTE

**Total Amount Paid to Vendor for Services:** \$1,072,346.54

### **Summary of Services Rendered to Agency:**

<b>Identifying Code</b>	<b>Service Type</b>	<b>Description</b>	<b>Amount</b>	<b>Notes</b>
PO 3653192	Financial Services: Other		\$ 143,656.64	
PO 3564024	Financial Services: Other		\$ 523,689.90	
PO 3660734	Financial Services: Other		\$ 405,000.00	

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:**

<b>Item Number</b>	<b>Document ID</b>	<b>Description</b>	<b>Notes</b>
Item 1	PO 3653192	Purchase Order contract	
Item 2	PO 3564024	Purchase Order contract	
Item 3	PO 3660734	Purchase Order contract	

# **ITEM 1**



# Purchase Order

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
 ONE CAPITOL HILL  
 PROVIDENCE RI 02908

RHODE ISLAND QUALITY INSTITUTE  
 50 HOLDEN ST STE 300  
 PROVIDENCE, RI 02908-5758  
 UNITED STATES

Purchase Order Number  
**3653192-1**  
 Reference Contract Number

<b>S H I P T O</b>	EOHHS-EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES 3 WEST ROAD CRANSTON, RI 02920 UNITED STATES	PO Date: 04-NOV-19 Buyer: * AUTOCREATE Shipping: PAID Terms: NET 30 Vendor #: 16829	<b>I N V O I C E</b>	DOA CONTROLLER ONE CAPITOL HILL, 4TH FLOOR SMITH ST PROVIDENCE, RI 02908 UNITED STATES
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RIQI FY20- DASHBOARDS						
<b>Department</b>			<b>Type of Requisition</b>	<b>Requisition Number</b>	<b>Bid Number</b>	
EOHHS-EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES			SS	1637673		
<b>Line</b>	<b>Code</b>	<b>Description</b>	<b>Quantity</b>	<b>Unit</b>	<b>Unit Price</b>	<b>Total</b>
1	918.32	APA-19669 IMPLEMENTATION OF CARE MANAGEMENT DASHBOARDS FOR AEs	369240	Each	1	143,656.64
Total:					143,656.64	

**STATE PURCHASING AGENT**

Nancy R. McIntyre

This Notice of Award/Purchase Order is issued in accordance with the specific requirements described herein and the State's Purchasing Regulations and General Conditions of Purchase, copies of which are available at [www.purchasing.ri.gov](http://www.purchasing.ri.gov). Delivery of goods or services as described herein shall be deemed acceptance of these requirements

## **ITEM 2**



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

Blanket Releases  
 3564024, 1

<b>V E N D O R</b>	<b>RHODE ISLAND QUALITY INSTITUTE        50 HOLDEN ST STE 300        PROVIDENCE, RI 02908-5758        United States</b>
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Purchase Order Number	<b>3564024-4</b>
Revision Number	<b>1</b>
Reference Contract Number	
PO Date	<b>08-OCT-2019</b>
Approved PO Date	<b>14-NOV-2019</b>
Buyer	<b>Autocreate, *</b> -

<b>S H I P T O</b>	<b>EOHHS-EXECUTIVE OFFICE OF HEALTH AND        HUMAN SERVICES        3 WEST ROAD        CRANSTON, RI 02920        United States</b>
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Type of Requisition	
Requisition Number	<b>1633826</b>
Solicitation Number	
Freight	<b>Paid</b>
Payment Terms	<b>NET 30</b>
Vendor Number	<b>16829</b>
Requester Name	<b>Nicotero, Michelle R</b>
Work Telephone	<b>401-462-6850</b>

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>

CHANGE TO PO #3564024 DATED 4/14/2020 - AGENCY DOC. I.D. NO. EOHHS20028MRN093

ADDED LINE NUMBER 3.

THE STATE OF RHODE ISLAND'S GENERAL CONDITIONS OF PURCHASE.  
<https://rules.sos.ri.gov/regulations/part/220-30-00-13>

AGENCY CONTACT:  
 MICHELLE NICOTERO  
 401-462-6850

**PO DESCRIPTION: APA-18110 FY20 MEDICAID HEALTH INFORMATION TECHNOLOGY FOR  
 ECONOMIC AND CLINICAL HEALTH (HITECH) IMPLEMENTATION ADVANCE PLANNING DOCUMENT**

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

<b>STATE PURCHASING AGENT</b>
 Nancy R. McIntyre

**(IAPD)**

Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)
2		<b>APA-18110 FY20 MEDICAID HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH (HITECH) IMPLEMENTATION ADVANCE PLANNING DOCUMENT (IAPD)</b>	<b>177150</b>	<b>Each</b>	<b>1</b>	<b>177,150.00</b>
<b>Total: 177,150.00 (USD)</b>						

**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](http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf)

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**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  
 3564024, 0

<b>V E N D O R</b>	<b>RHODE ISLAND QUALITY INSTITUTE        50 HOLDEN ST STE 300        PROVIDENCE, RI 02908-5758        United States</b>
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Purchase Order Number	<b>3564024-5</b>
Revision Number	<b>0</b>
Reference Contract Number	
PO Date	<b>20-DEC-2019</b>
Approved PO Date	<b>20-DEC-2019</b>
Buyer	- - <b>Autocreate, *</b>

<b>S H I P T O</b>	<b>EOHHS-EXECUTIVE OFFICE OF HEALTH AND        HUMAN SERVICES        3 WEST ROAD        CRANSTON, RI 02920        United States</b>
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Type of Requisition	
Requisition Number	<b>1643631</b>
Solicitation Number	
Freight	<b>Paid</b>
Payment Terms	<b>NET 30</b>
Vendor Number	<b>16829</b>
Requester Name	<b>Nicotero, Michelle R</b>
Work Telephone	<b>401-462-6850</b>

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CHANGE TO PO #3564024 DATED 4/14/2020 - AGENCY DOC. I.D. NO. EOHHS20028MRN093

ADDED LINE NUMBER 3.

THE STATE OF RHODE ISLAND'S GENERAL CONDITIONS OF PURCHASE.  
<https://rules.sos.ri.gov/regulations/part/220-30-00-13>

AGENCY CONTACT:  
 MICHELLE NICOTERO  
 401-462-6850

**INVOICE TO**

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<b>STATE PURCHASING AGENT</b>
 Nancy R. McIntyre

**PO DESCRIPTION: APA-18110 FY20 MEDICAID HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH (HITECH) IMPLEMENTATION ADVANCE PLANNING DOCUMENT (IAPD)**

Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)
2		APA-18110 FY20 MEDICAID HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH (HITECH) IMPLEMENTATION ADVANCE PLANNING DOCUMENT (IAPD)	16900	Each	1	16,900.00
<b>Total: 16,900.00 (USD)</b>						

**INVOICE TO**

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 Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :  
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**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  
 3564024, 0

<b>V E N D O R</b>	<b>RHODE ISLAND QUALITY INSTITUTE        50 HOLDEN ST STE 300        PROVIDENCE, RI 02908-5758        United States</b>
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Purchase Order Number	<b>3564024-6</b>
Revision Number	<b>0</b>
Reference Contract Number	
PO Date	<b>17-FEB-2020</b>
Approved PO Date	<b>17-FEB-2020</b>
Buyer	- - <b>Autocreate, *</b>

<b>S H I P T O</b>	<b>EOHHS-EXECUTIVE OFFICE OF HEALTH AND        HUMAN SERVICES        3 WEST ROAD        CRANSTON, RI 02920        United States</b>
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Type of Requisition	
Requisition Number	<b>1649309</b>
Solicitation Number	
Freight	<b>Paid</b>
Payment Terms	<b>NET 30</b>
Vendor Number	<b>16829</b>
Requester Name	<b>Nicotero, Michelle R</b>
Work Telephone	<b>401-462-6850</b>

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ADDED LINE NUMBER 3.

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AGENCY CONTACT:  
 MICHELLE NICOTERO  
 401-462-6850

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 Nancy R. McIntyre

**PO DESCRIPTION: APA-18110 FY20 MEDICAID HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH (HITECH) IMPLEMENTATION ADVANCE PLANNING DOCUMENT (IAPD)**

Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)
2		APA-18110 FY20 MEDICAID HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH (HITECH) IMPLEMENTATION ADVANCE PLANNING DOCUMENT (IAPD)	64400	Each	1	64,400.00
<b>Total: 64,400.00 (USD)</b>						

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**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  
3564024, 0

<b>V E N D O R</b>	<b>RHODE ISLAND QUALITY INSTITUTE</b> <b>50 HOLDEN ST STE 300</b> <b>PROVIDENCE, RI 02908-5758</b> <b>United States</b>
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Purchase Order Number	<b>3564024-7</b>
Revision Number	<b>0</b>
Reference Contract Number	
PO Date	<b>10-MAR-2020</b>
Approved PO Date	<b>10-MAR-2020</b>
Buyer	- - <b>Autocreate, *</b>

<b>S H I P T O</b>	<b>EOHHS-EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES</b> <b>3 WEST ROAD</b> <b>CRANSTON, RI 02920</b> <b>United States</b>
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Type of Requisition	
Requisition Number	<b>1652751</b>
Solicitation Number	
Freight	<b>Paid</b>
Payment Terms	<b>NET 30</b>
Vendor Number	<b>16829</b>
Requester Name	<b>Nicotero, Michelle R</b>
Work Telephone	<b>401-462-6850</b>

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CHANGE TO PO #3564024 DATED 4/14/2020 - AGENCY DOC. I.D. NO. EOHHS20028MRN093

ADDED LINE NUMBER 3.

THE STATE OF RHODE ISLAND'S GENERAL CONDITIONS OF PURCHASE.  
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AGENCY CONTACT:  
 MICHELLE NICOTERO  
 401-462-6850

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<b>STATE PURCHASING AGENT</b>
 Nancy R. McIntyre

**PO DESCRIPTION: APA-18110 FY20 MEDICAID HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH (HITECH) IMPLEMENTATION ADVANCE PLANNING DOCUMENT (IAPD)**

Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)
2		APA-18110 FY20 MEDICAID HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH (HITECH) IMPLEMENTATION ADVANCE PLANNING DOCUMENT (IAPD)	30900	Each	1	30,900.00
<b>Total: 30,900.00 (USD)</b>						

**INVOICE TO**

**IMMEDIATE VENDOR ACTION REQUIRED:**  
 Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :  
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**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  
3564024, 0

<b>V E N D O R</b>	<b>RHODE ISLAND QUALITY INSTITUTE</b> <b>50 HOLDEN ST STE 300</b> <b>PROVIDENCE, RI 02908-5758</b> <b>United States</b>
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Purchase Order Number	<b>3564024-8</b>
Revision Number	<b>0</b>
Reference Contract Number	
PO Date	<b>10-MAR-2020</b>
Approved PO Date	<b>10-MAR-2020</b>
Buyer	- - <b>Autocreate, *</b>

<b>S H I P T O</b>	<b>EOHHS-EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES</b> <b>3 WEST ROAD</b> <b>CRANSTON, RI 02920</b> <b>United States</b>
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Type of Requisition	
Requisition Number	<b>1652752</b>
Solicitation Number	
Freight	<b>Paid</b>
Payment Terms	<b>NET 30</b>
Vendor Number	<b>16829</b>
Requester Name	<b>Nicotero, Michelle R</b>
Work Telephone	<b>401-462-6850</b>

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ADDED LINE NUMBER 3.

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AGENCY CONTACT:  
 MICHELLE NICOTERO  
 401-462-6850

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<b>STATE PURCHASING AGENT</b>  Nancy R. McIntyre
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**PO DESCRIPTION: APA-18110 FY20 MEDICAID HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH (HITECH) IMPLEMENTATION ADVANCE PLANNING DOCUMENT (IAPD)**

Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)
2		APA-18110 FY20 MEDICAID HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH (HITECH) IMPLEMENTATION ADVANCE PLANNING DOCUMENT (IAPD)	19150	Each	1	19,150.00
<b>Total: 19,150.00 (USD)</b>						

**INVOICE TO**

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 Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :  
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**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  
 3564024, 0

<b>V E N D O R</b>	<b>RHODE ISLAND QUALITY INSTITUTE        50 HOLDEN ST STE 300        PROVIDENCE, RI 02908-5758        United States</b>
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Purchase Order Number	<b>3564024-9</b>
Revision Number	<b>0</b>
Reference Contract Number	
PO Date	<b>10-MAR-2020</b>
Approved PO Date	<b>10-MAR-2020</b>
Buyer	- - <b>Autocreate, *</b>

<b>S H I P T O</b>	<b>EOHHS-EXECUTIVE OFFICE OF HEALTH AND        HUMAN SERVICES        3 WEST ROAD        CRANSTON, RI 02920        United States</b>
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Type of Requisition	
Requisition Number	<b>1652755</b>
Solicitation Number	
Freight	<b>Paid</b>
Payment Terms	<b>NET 30</b>
Vendor Number	<b>16829</b>
Requester Name	<b>Nicotero, Michelle R</b>
Work Telephone	<b>401-462-6850</b>

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ADDED LINE NUMBER 3.

THE STATE OF RHODE ISLAND'S GENERAL CONDITIONS OF PURCHASE.  
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AGENCY CONTACT:  
 MICHELLE NICOTERO  
 401-462-6850

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**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>

<b>STATE PURCHASING AGENT</b>
 Nancy R. McIntyre

**PO DESCRIPTION: APA-18110 FY20 MEDICAID HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH (HITECH) IMPLEMENTATION ADVANCE PLANNING DOCUMENT (IAPD)**

Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)
2		APA-18110 FY20 MEDICAID HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH (HITECH) IMPLEMENTATION ADVANCE PLANNING DOCUMENT (IAPD)	62775	Each	1	62,775.00
<b>Total: 62,775.00 (USD)</b>						

**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](http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf)

**REGISTRATION REQUIREMENTS**

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<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  
 3564024, 0

<b>V E N D O R</b>	<b>RHODE ISLAND QUALITY INSTITUTE        50 HOLDEN ST STE 300        PROVIDENCE, RI 02908-5758        United States</b>
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Purchase Order Number	<b>3564024-10</b>
Revision Number	<b>0</b>
Reference Contract Number	
PO Date	<b>22-MAY-2020</b>
Approved PO Date	<b>22-MAY-2020</b>
Buyer	- - <b>Autocreate, *</b>

<b>S H I P T O</b>	<b>EOHHS-EXECUTIVE OFFICE OF HEALTH AND        HUMAN SERVICES        3 WEST ROAD        CRANSTON, RI 02920        United States</b>
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Type of Requisition	
Requisition Number	<b>1659755</b>
Solicitation Number	
Freight	<b>Paid</b>
Payment Terms	<b>NET 30</b>
Vendor Number	<b>16829</b>
Requester Name	<b>Nicotero, Michelle R</b>
Work Telephone	<b>401-462-6850</b>

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>

CHANGE TO PO #3564024 DATED 4/14/2020 - AGENCY DOC. I.D. NO. EOHHS20028MRN093

ADDED LINE NUMBER 3.

THE STATE OF RHODE ISLAND'S GENERAL CONDITIONS OF PURCHASE.  
<https://rules.sos.ri.gov/regulations/part/220-30-00-13>

AGENCY CONTACT:  
 MICHELLE NICOTERO  
 401-462-6850

**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](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>

<b>STATE PURCHASING AGENT</b>
 Nancy R. McIntyre

**PO DESCRIPTION: APA-18110 FY20 MEDICAID HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH (HITECH) IMPLEMENTATION ADVANCE PLANNING DOCUMENT (IAPD)**

Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)
2		APA-18110 FY20 MEDICAID HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH (HITECH) IMPLEMENTATION ADVANCE PLANNING DOCUMENT (IAPD)	52775	Each	1	52,775.00
<b>Total: 52,775.00 (USD)</b>						

**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](http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf)

**REGISTRATION REQUIREMENTS**

**IMMEDIATE VENDOR ACTION REQUIRED:**  
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<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  
 3564024, 0

<b>V E N D O R</b>	<b>RHODE ISLAND QUALITY INSTITUTE        50 HOLDEN ST STE 300        PROVIDENCE, RI 02908-5758        United States</b>
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Purchase Order Number	<b>3564024-11</b>
Revision Number	<b>0</b>
Reference Contract Number	
PO Date	<b>22-MAY-2020</b>
Approved PO Date	<b>22-MAY-2020</b>
Buyer	- - <b>Autocreate, *</b>

<b>S H I P T O</b>	<b>EOHHS-EXECUTIVE OFFICE OF HEALTH AND        HUMAN SERVICES        3 WEST ROAD        CRANSTON, RI 02920        United States</b>
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Type of Requisition	
Requisition Number	<b>1660078</b>
Solicitation Number	
Freight	<b>Paid</b>
Payment Terms	<b>NET 30</b>
Vendor Number	<b>16829</b>
Requester Name	<b>Nicotero, Michelle R</b>
Work Telephone	<b>401-462-6850</b>

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>

CHANGE TO PO #3564024 DATED 4/14/2020 - AGENCY DOC. I.D. NO. EOHHS20028MRN093

ADDED LINE NUMBER 3.

THE STATE OF RHODE ISLAND'S GENERAL CONDITIONS OF PURCHASE.  
<https://rules.sos.ri.gov/regulations/part/220-30-00-13>

AGENCY CONTACT:  
 MICHELLE NICOTERO  
 401-462-6850

**INVOICE TO**

**IMMEDIATE VENDOR ACTION REQUIRED:**  
 Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :  
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**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>

<b>STATE PURCHASING AGENT</b>
 Nancy R. McIntyre

**PO DESCRIPTION: APA-18110 FY20 MEDICAID HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH (HITECH) IMPLEMENTATION ADVANCE PLANNING DOCUMENT (IAPD)**

Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)
2		APA-18110 FY20 MEDICAID HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH (HITECH) IMPLEMENTATION ADVANCE PLANNING DOCUMENT (IAPD)	47102.2	Each	1	47,102.20
<b>Total: 47,102.20 (USD)</b>						

**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](http://controller.admin.ri.gov/documents/Communications/Vendor%20Information/Paperless%20Invoicing%20Initiative_09-01-2020.pdf)

**REGISTRATION REQUIREMENTS**

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**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  
 3564024, 0

<b>V E N D O R</b>	<b>RHODE ISLAND QUALITY INSTITUTE        50 HOLDEN ST STE 300        PROVIDENCE, RI 02908-5758        United States</b>
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Purchase Order Number	<b>3564024-12</b>
Revision Number	<b>0</b>
Reference Contract Number	
PO Date	<b>16-JUN-2020</b>
Approved PO Date	<b>16-JUN-2020</b>
Buyer	- - <b>Autocreate, *</b>

<b>S H I P T O</b>	<b>EOHHS-EXECUTIVE OFFICE OF HEALTH AND        HUMAN SERVICES        3 WEST ROAD        CRANSTON, RI 02920        United States</b>
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Type of Requisition	
Requisition Number	<b>1662250</b>
Solicitation Number	
Freight	<b>Paid</b>
Payment Terms	<b>NET 30</b>
Vendor Number	<b>16829</b>
Requester Name	<b>Nicotero, Michelle R</b>
Work Telephone	<b>401-462-6850</b>

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>

CHANGE TO PO #3564024 DATED 4/14/2020 - AGENCY DOC. I.D. NO. EOHHS20028MRN093

ADDED LINE NUMBER 3.

THE STATE OF RHODE ISLAND'S GENERAL CONDITIONS OF PURCHASE.  
<https://rules.sos.ri.gov/regulations/part/220-30-00-13>

AGENCY CONTACT:  
 MICHELLE NICOTERO  
 401-462-6850

**INVOICE TO**

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**REGISTRATION REQUIREMENTS**

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<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

<b>STATE PURCHASING AGENT</b>
 Nancy R. McIntyre

**PO DESCRIPTION: APA-18110 FY20 MEDICAID HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH (HITECH) IMPLEMENTATION ADVANCE PLANNING DOCUMENT (IAPD)**

Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)
2		APA-18110 FY20 MEDICAID HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH (HITECH) IMPLEMENTATION ADVANCE PLANNING DOCUMENT (IAPD)	10400	Each	1	10,400.00
3.1		APA-18110 FY20-21 TASK 3: PDMP	16062.54	Each	1	16,062.54
<b>Total:</b>						<b>26,462.54 (USD)</b>

**INVOICE TO**

IMMEDIATE VENDOR ACTION REQUIRED:  
 Paperless Invoicing is now required. Vendors who do not currently invoice electronically must comply. Get Instructions at :  
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**REGISTRATION REQUIREMENTS**

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**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  
 3564024, 0

<b>V E N D O R</b>	<b>RHODE ISLAND QUALITY INSTITUTE        50 HOLDEN ST STE 300        PROVIDENCE, RI 02908-5758        United States</b>
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Purchase Order Number	<b>3564024-13</b>
Revision Number	<b>0</b>
Reference Contract Number	
PO Date	<b>23-JUN-2020</b>
Approved PO Date	<b>23-JUN-2020</b>
Buyer	- - <b>Autocreate, *</b>

<b>S H I P T O</b>	<b>EOHHS-EXECUTIVE OFFICE OF HEALTH AND        HUMAN SERVICES        3 WEST ROAD        CRANSTON, RI 02920        United States</b>
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Type of Requisition	
Requisition Number	<b>1663114</b>
Solicitation Number	
Freight	<b>Paid</b>
Payment Terms	<b>NET 30</b>
Vendor Number	<b>16829</b>
Requester Name	<b>Nicotero, Michelle R</b>
Work Telephone	<b>401-462-6850</b>

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>

CHANGE TO PO #3564024 DATED 4/14/2020 - AGENCY DOC. I.D. NO. EOHHS20028MRN093

ADDED LINE NUMBER 3.

THE STATE OF RHODE ISLAND'S GENERAL CONDITIONS OF PURCHASE.  
<https://rules.sos.ri.gov/regulations/part/220-30-00-13>

AGENCY CONTACT:  
 MICHELLE NICOTERO  
 401-462-6850

**INVOICE TO**

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<b>STATE PURCHASING AGENT</b>
 Nancy R. McIntyre

**PO DESCRIPTION: APA-18110 FY20 MEDICAID HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH (HITECH) IMPLEMENTATION ADVANCE PLANNING DOCUMENT (IAPD)**

Line	Code	Description	Quantity	Unit	Unit Price (USD)	Amount (USD)
2		APA-18110 FY20 MEDICAID HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH (HITECH) IMPLEMENTATION ADVANCE PLANNING DOCUMENT (IAPD)	26075.16	Each	1	26,075.16
<b>Total: 26,075.16 (USD)</b>						

**INVOICE TO**

**IMMEDIATE VENDOR ACTION REQUIRED:**  
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<https://www.ridop.ri.gov/osp/osp-vendor-registration.php>

**STATE PURCHASING AGENT**  
  
 Nancy R. McIntyre



## **ITEM 3**



# Purchase Order

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
ONE CAPITOL HILL  
PROVIDENCE RI 02908

RHODE ISLAND QUALITY INSTITUTE  
50 HOLDEN ST STE 300  
PROVIDENCE, RI 02908-5758  
UNITED STATES

Purchase Order Number  
**3660734-1**  
Reference Contract Number

<b>S H I P  T O</b>	EOHHS-EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES 3 WEST ROAD CRANSTON, RI 02920 UNITED STATES		PO Date: 06-JAN-20 Buyer: * AUTOCREATE Shipping: PAID Terms: NET 30 Vendor #: 16829		<b>I N V O I C E</b>	DOA CONTROLLER ONE CAPITOL HILL, 4TH FLOOR SMITH ST PROVIDENCE, RI 02908 UNITED STATES	
	RIQI FY20 - HIE FHIR						
<b>Department</b>			<b>Type of Requisition</b>		<b>Requisition Number</b>		<b>Bid Number</b>
EOHHS-EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES			SS		1644608		N/A
<b>Line</b>	<b>Code</b>	<b>Description</b>	<b>Quantity</b>	<b>Unit</b>	<b>Unit Price</b>	<b>Total</b>	
1	918.32 B8	APA-19835 HEALTH INFORMATION EXCHANGE (HIE) FAST HEALTHCARE INTEROPERABILITY RESOURCE (FHIR) ENABLEMENT FOR PRESCRIPTION DRUG MONITORING PROGRAM (PDMP) - NTE - \$445,000.00	405000	Each	1	405,000.00	
Total:					405,000.00		

<b>STATE PURCHASING AGENT</b>
Nancy R. McIntyre

This Notice of Award/Purchase Order is issued in accordance with the specific requirements described herein and the State's Purchasing Regulations and General Conditions of Purchase, copies of which are available at [www.purchasing.ri.gov](http://www.purchasing.ri.gov). Delivery of goods or services as described herein shall be deemed acceptance of these requirements