

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: FY19

Agency: Department of Health

Vendor Name: ALEXANDER M CHIRKOV

Total Amount Paid to Vendor for Services: \$169,405.00

Summary of Services Rendered to Agency:

Identifying Code	Service Type	Description	Amount	Notes
PO 3562218	Doctors, Specialists, Medical Consultants, Dentists		\$169,405.00	

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:

Item Number	Document ID	Description	Notes
Item 1	PO 3562218	Purchase Order contract	

ITEM 1

Notice of Contract Purchase Agreement



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

V E N D O R	ALEXANDER M CHIRKOV 18 GRAYWOOD DR LINCOLN, RI 02865 United States
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DEL-18088 INDEPENDENT CONTRACTOR - ALEX CHIRKOV, MD PHYSICIAN SERVICES	
Award Number	3562218
Revision Number	5
Effective Period	01-JUL-2018 - 30-JUN-2020
Approved PO Date	30-OCT-2019
Vendor Number	21055

S H I P T O	DOH MANAGEMENT SERVICES THREE CAPITOL HILL, ROOM 402 SMITH ST PROVIDENCE, RI 02908 United States
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Type of Requisition	DELEGATED AUTHORITY
Requisition Number	1551682
Change Order Requisition Number	DOHLT-366
Solicitation Number	
Freight	Paid
Payment Terms	NET 30
Buyer	Delegated, * -
Requester Name	Tamburrino, Lori
Work Telephone	401-222-1007

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 purchasing regulations, available at www.purchasing.ri.gov.

****ADJUSTMENT MADE GENERATING A COPY OF PURCHASE ORDER** PLEASE DISREGARD**

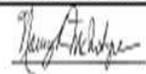
Reference Documents: 3562218 DOHLT-366 10-10-19
MOD4.pdf

INVOICE TO

The State of Rhode Island accepts electronic invoices via its supplier portal. To register and submit electronic invoices, visit the supplier portal at <http://controller.admin.ri.gov/iSupplier/isup/index.php>

To submit paper invoices, mail to: Department of Administration Controller, One Capitol Hill, 4th Floor, Providence 02908.

STATE PURCHASING AGENT


 Nancy R. McIntyre



Department of Health
Three Capitol Hill
Providence, RI 02908-5097
TTY: 711
www.health.ri.gov

MODIFICATION #4

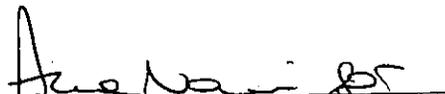
to the
AGREEMENT
between
RHODE ISLAND DEPARTMENT OF HEALTH
and
ALEXANDER M. CHIRKOV, MD

“Independent Contractor”

1. This section is in modification of an Agreement we have with Alexander M. Chirkov, MD for the period July 1, 2019 – June 30, 2020.
2. The purpose of this modification is to INCREASE this agreement by \$60,000.00.
3. All other terms and conditions of the Agreement remain in effect.
4. A detailed Agreement is on file in the Division of Central Management’s Purchasing Unit.

ACCEPTED:

RHODE ISLAND DEPARTMENT OF
HEALTH


Nicole Alexander-Scott, MD, MPH
Director of Health

ALEXANDER M. CHIRKOV, MD


Alexander M. Chirkov, MD

DATE: 10/2/19

DATE: 10.05.2019

ADDENDUM II

Revised Budget - Modification # 4

Alexander M. Chirkov, MD

Independent Contractor

The Contractor estimates that its budget for work to be performed under this Agreement is as follows:

<u>Expense Category</u>	7/1/2018	Increase	Increase	Increase and	Increase
	6/30/2019			6/30/2020	
	<u>Original</u>	<u>Mod # 1</u>	<u>Mod # 2</u>	<u>Mod # 3</u>	<u>Mod # 4</u>
1 Personnel	\$ -	\$ -	\$ -	\$ -	\$ -
2 Fringe Benefits	\$ -	\$ -	\$ -	\$ -	\$ -
3 Consultants	\$ -	\$ -	\$ -	\$ -	\$ -
4 Other - Fee for Service	\$ 60,000.00	\$ 60,000.00	\$ 55,000.00	\$ 60,000.00	\$ 60,000.00
Subtotal	\$ 60,000.00	\$ 60,000.00	\$ 55,000.00	\$ 60,000.00	\$ 60,000.00
Indirect Cost	\$ -	\$ -	\$ -	\$ -	\$ -
Total	\$ 60,000.00	\$ 60,000.00	\$ 55,000.00	\$ 60,000.00	\$ 60,000.00

It is understood and agreed that the amounts indicated above for the several line items are estimates of expenditures to be incurred by the Contractor on behalf of this Agreement and to be claimed by the Contractor for reimbursement under this Agreement. It is further understood and agreed that actual variations shall not in themselves be cause for disallowance of reimbursement by RIDOH; provided, however, that the Contractor shall notify and obtain the approval of the contract officer, in writing, if expenditures to be claimed for reimbursement in any line item above shall begin to vary significantly from the estimate given above; and provided further, that unless permission of the contract officer shall have been obtained in advance, no expenditure shall be claimed by the Contractor for reimbursement by RIDOH under this Agreement if such expenditure shall have been incurred in a line item category not listed above. All transfer of funds between budget line items require prior written approval by RIDOH.

ADDENDUM IIa
Modification #4
Alexander M. Chirkov, MD
Independent Contractor
July 1, 2019 – June 30, 2020

FEE FOR SERVICE

\$60,000.00

Full Autopsies @ \$1,100 each

Partial Autopsies @ \$500 each

External views (inspections) \$300 each

On-Call @ \$300 day

Scene Visits: \$400 each

Oversight & Case reviews @ \$65 hour

This is a fee-for-service contract as indicated in the fee schedule above. Invoices should be submitted on a monthly basis for actual services provided.

TOTAL AWARD

\$60,000.00