

**PERSONAL SERVICE AGREEMENT**  
CO-602A REV. 2X0

STATE OF CONNECTICUT  
OFFICE OF THE STATE COMPTROLLER

1. PREPARE IN QUADRUPPLICATE
2. THE STATE BUSINESS UNIT AND THE CONTRACTOR AS LISTED BELOW HEREBY ENTER INTO AN AGREEMENT SUBJECT TO THE TERMS AND CONDITIONS STATED HEREIN AND/OR ATTACHED HERETO AND SUBJECT TO THE PROVISIONS OF SECTION 4-98 OF THE CONNECTICUT GENERAL STATUTES AS APPLICABLE.
3. ACCEPTANCE OF THIS CONTRACT IMPLIES CONFORMANCE WITH TERMS AND CONDITIONS SET FORTH BY THE OFFICE OF POLICY AND MANAGEMENT PERSONAL SERVICE AGREEMENT STANDARDS AND PROCEDURES.

|                               |   |   |   |   |   |
|-------------------------------|---|---|---|---|---|
|                               |   | <input type="checkbox"/> ORIGINAL <input checked="" type="checkbox"/> AMENDMENT |   | (7) IDENTIFICATION NO.<br>P.S. 16SIM0002  |   |
| CONTRACTOR                    | (3) CONTRACTOR NAME<br>CedarBridge Group, LLC   |   |   | (4) ARE YOU PRESENTLY A STATE EMPLOYEE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |   |
|                               | CONTRACTOR ADDRESS<br>1655 NW 130 <sup>th</sup> Ave., Portland, OR 97229  |   |   | CONTRACTOR FERNUM - SUFFIX<br>46-2002003  |   |
| STATE AGENCY                  | (5) AGENCY NAME AND ADDRESS<br>Office of the Healthcare Advocate, PO Box 1543, Hartford, CT 06144   |   |   |   |   |
| CONTRACT PERIOD               | (6) DATE (FROM)   | THROUGH (TO)  | (7) INDICATE  |   |   |
|                               | Date of signature   | 09/30/2017  | <input type="checkbox"/> MASTER AGREEMENT <input type="checkbox"/> CONTRACT AWARD NO. <input checked="" type="checkbox"/> NEITHER |   |   |
| CANCELLATION CLAUSE           | THIS AGREEMENT SHALL REMAIN IN FULL FORCE AND EFFECT FOR THE ENTIRE TERM OF THE CONTRACT PERIOD STATED ABOVE UNLESS CANCELED BY THE STATE BUSINESS UNIT, BY GIVING THE CONTRACTOR WRITTEN NOTICE OF SUCH INTENTION (REQUIRED DAYS NOTICE SPECIFIED AT RIGHT)  |   |   |   | (8) REQUIRED NO. OF DAYS WRITTEN NOTICE<br>30 |
|                               | (9) CONTRACTOR AGREES TO: (Include special provisions - Attach additional blank sheets if necessary.)<br>CedarBridge Group, LLC agrees to assist the State Innovation Model (SIM) Project Management Office (PMO) to carryout activities related to support the SIM's Health Information Technology (Health IT) investment planning and deployment. Responsibilities of the Contractor will include assisting the PMO with Health IT technical support and subject matter expertise, assistance with Health IT solicitations, planning and document preparation and meeting facilitation as detailed in Section 5 of the (Scope of Work) original contract.<br><br>This amendment extends the contract period, total maximum amount payable, activities (Table 1 and Table 2) and billing rate tiers (Table 3). |   |   |   |   |
| COST AND SCHEDULE OF PAYMENTS | (10) PAYMENT TO BE MADE UNDER THE FOLLOWING SCHEDULE UPON RECEIPT OF PROPERLY EXECUTED AND APPROVED INVOICES.   |   |   |   |   |
|                               | The state shall pay the contractor a total sum not to exceed \$781,372 for services performed under this amendment.   |   |   |   |   |

|                       |           |                 |          |              |              |                    |                  |                  |                       |  |
|-----------------------|-----------|-----------------|----------|--------------|--------------|--------------------|------------------|------------------|-----------------------|--|
| (11) OBLIGATED AMOUNT |           |                 |          |              |              |                    |                  |                  |                       |  |
| \$781,372             |           |                 |          |              |              |                    |                  |                  |                       |  |
| (12) AMOUNT           | (13) FUND | (14) DEPARTMENT | (15) SID | (16) PROGRAM | (17) ACCOUNT | (18) PROJECT/GRANT | (19) CHARFIELD 1 | (20) CHARFIELD 2 | (21) BUDGET REFERENCE |  |
| \$781,372             | 12004     | MCO39400        | 10020    | 29141        | 51230        | MCO_nonproj        | 192015           |                  | 2017                  |  |
|                       |           |                 |          |              |              |                    |                  |                  |                       |  |
|                       |           |                 |          |              |              |                    |                  |                  |                       |  |

An individual entering into a Personal Service Agreement with the State of Connecticut is contracting under a "work-for-hire" arrangement. As such, the individual is an independent contractor, and does not satisfy the characteristics of an employee under the common law rules for determining the employer/employee relationship of Internal Revenue Code Section 3121 (d) (2). Individuals performing services as independent contractors are not employees of the State of Connecticut and are responsible themselves for payment of all State and local income taxes, federal income taxes and Federal Insurance Contribution Act (FICA) taxes.

|  |  |   |                                 |  |  |
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| <b>ACCEPTANCES AND APPROVALS</b>   |  |   | <b>(22) STATUTORY AUTHORITY</b> |  |  |
| (23) CONTRACTOR (OWNER OR AUTHORIZED SIGNATURE)<br>Carol Robinson          |  | TITLE<br>Principal, CEO                                       | DATE<br>12/23/2016              |  |  |
| (24) AGENCY (AUTHORIZED OFFICIAL)<br>Demian Fontanella                     |  | TITLE<br>Acting Healthcare Advocate                           | DATE<br>12/23/16                |  |  |
| (25) OFFICE OF POLICY & MANAGEMENT (DEPARTMENT) OF ADMINISTRATIVE SERVICES |  | TITLE   | DATE                            |  |  |
| (26) ATTORNEY GENERAL (APPROVED AS TO FORM)<br>Matthew J. Budalk           |  | TITLE<br>Associate Assistant Attorney General<br>Joseph Rubin | DATE<br>12/29/16                |  |  |

DISTRIBUTION: ORIGINAL CONTRACTOR    PHOTOCOPY-OPM/DAS    PHOTOCOPY-ATTORNEY GENERAL    PHOTOCOPY-AGENCY



STATE OF CONNECTICUT  
OFFICE OF THE HEALTHCARE ADVOCATE

**CONTRACT AMENDMENT**

**Contractor:** CedarBridge Group, LLC  
**Contractor Address:** 1655 NW 130<sup>th</sup> Ave., Portland, OR 97229  
**Contract Number:** 16SIM0002  
**Amendment Number:** 01  
**Amount as Amended:** \$781,372.00  
**Contract Term as Amended:** 9/30/2017

The contract between CedarBridge Group, LLC (*the CONTRACTOR*) and the Office of the Healthcare Advocate (*OHA*), which was executed by the parties and approved by the Office of the Attorney General on September 12, 2016 and amended effective upon signature, is hereby amended as follows:

1. Section 5, Specification of Services, Section III Project Timeline on page 5 of the above numbered contract is amended to include the activities listed in Tables 1 and 2 of this amendment.
2. The total maximum amount payable under this contract is increased by \$661,372 from \$120,000 to \$781,372.
3. The maximum amount payable associated with activities in Table 1 shall not exceed \$20,000.
4. The maximum amount payable associated with activities in Table 2 shall not exceed \$641,372.
5. The term of the contract is extended from 12/31/2016 to 9/30/2017.
6. Activities and target dates in Tables 1 and 2 may be adjusted by mutual written agreement of OHA and the Contractor.

*Table 1: Activities and Timeline*

| Proposed Activity  | Estimated Start Date | Estimated Finish Date | Deliverables   |
|--|----------------------|-----------------------|--|
| <b>Ongoing Activities:</b>                                       |                      |                       |  |
| Participate in activities that support the HITO and HIT PMO work | 09/01/16             | 09/29/17              | • Provide Subject Matter Expertise via conference calls, webinars, in-person meetings, and other forms |

|  |  |  |                                 |
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|  |  |  | of communication when necessary |
|--|--|--|---------------------------------|

**Table 2: Activities and Timeline**

| Proposed Activity  | Estimated Start Date | Estimated Finish Date | Deliverables  |
|--|----------------------|-----------------------|---|
| <b>Kick-off Meeting &amp; Project Planning</b>   |                      |                       |   |
| Scheduling and facilitation of planning kick off meeting   | 01/01/17             | 02/04/17              | <ul style="list-style-type: none"> <li>Meeting agenda, materials, and minutes</li> </ul>  |
| Creation and approval of planning project schedule and milestones  | 01/01/17             | 02/04/17              | <ul style="list-style-type: none"> <li>Project Plan and Project Charter</li> </ul>  |
| Creation and approval of project plan documents  | 01/01/17             | 02/04/17              | <ul style="list-style-type: none"> <li>Communication plan</li> <li>Risk management plan and Issues list</li> </ul>              |
| Hold in-person team kick off meeting   | 1/02/17              | 01/06/17              |   |
| <b>Conduct Stakeholder Engagement &amp; Environmental Scan</b>   |                      |                       |   |
| Conduct historical document review   | 01/01/17             | 02/06/17              | <ul style="list-style-type: none"> <li>Stakeholder Plan</li> </ul>  |
| Develop Interview guides   | 01/01/17             | 02/06/17              | <ul style="list-style-type: none"> <li>Surveys</li> </ul>   |
| Draft Interview questions  | 01/01/17             | 02/06/17              | <ul style="list-style-type: none"> <li>Interview notes</li> </ul>   |
| Schedule interviews  | 01/01/17             | 02/06/17              | <ul style="list-style-type: none"> <li>Focus Group Summaries</li> </ul>   |
| Conduct phone interviews of key stakeholders   | 01/09/17             | 03/10/17              | <ul style="list-style-type: none"> <li>Environmental Scan Brief (draft)</li> </ul>  |
| Conduct in-person interviews of identified key stakeholders  | 01/09/17             | 03/10/17              | <ul style="list-style-type: none"> <li>Environmental Scan Brief (final)</li> </ul>  |
| Work with Behavioral Health (BH) associations to create and distribute a customized survey and conduct a BH provider focus group   | 01/09/17             | 03/10/17              | <ul style="list-style-type: none"> <li>Environmental Scan slide</li> </ul>  |
| Work with Long Term Care (LTC) associations to create and distribute customized surveys and conduct a LTPAC provider focus group   | 01/09/17             | 03/10/17              |   |
| Engage hospitals, providers and payers to identify current technology usage and gaps, identifying needs to support the establishment of Infrastructure and/or interfaces for sending/ receiving alerts | 01/09/17             | 03/10/17              |   |
| <b>Ensure Existing Technical Assets are Appropriately Leveraged</b>  |                      |                       |   |
| Planning to leverage the state's eMPI and Provider Directory assets by linking them to a Relationship Registry that can accurately attribute patients to their providers                               | 01/02/17             | 03/31/17              | <ul style="list-style-type: none"> <li>Meeting agendas, materials, minutes, technical diagrams, . decision documents</li> </ul> |
| <b>RFI/RFP Development of eCQM Reporting and Measurement System</b>  |                      |                       |   |
| Facilitate meetings to plan for the development of an RFI  | 01/01/17             | 02/07/17              | <ul style="list-style-type: none"> <li>RFI questions, FAQs, email communications to vendors, etc.</li> </ul>                    |
| Draft RFI document and supplemental materials; provide support with distribution   | 01/01/17             | 02/07/17              | <ul style="list-style-type: none"> <li>Summary of RFI responses draft</li> </ul>  |
| Post eCQM Measurement and Reporting RFI on State procurement site  | 01/07/17             | 02/27/17              |   |

|   |          |          |   |
|---|----------|----------|---|
| Develop FAQ for vendor questions  | 01/09/17 | 02/27/17 | <ul style="list-style-type: none"> <li>• Summary of RFI responses final</li> <li>• RFI questions, FAQs, email communications to vendors, etc.</li> <li>• RFP draft</li> <li>• RFP final Amendments</li> <li>• FAQs and responses to vendor questions</li> <li>• Evaluation materials</li> <li>• Evaluation report, with pricing analysis</li> </ul>           |
| Review RFI responses, draft summary of responses and presentation slides for Health IT Advisory Council meeting and other potential uses                                      | 01/30/17 | 03/10/17 |   |
| Develop RFP business, technical and functional requirements with stakeholder feedback from RFI  | 02/13/17 | 02/27/17 |   |
| Post eCQM Measurement and Reporting RFP on State procurement site   | 03/03/17 | 03/31/17 |   |
| Develop responses for vendor questions, as needed   | 03/06/17 | 03/31/17 |   |
| Participate in the review and evaluation of RFP and provide recommendations   | 04/03/17 | 05/01/17 |   |
| Provide cost and pricing analysis of submittals and responses to RFP  | 04/03/17 | 05/01/17 |   |
| Provide negotiation support for contract terms and conditions   | 05/01/17 | 06/01/17 |   |
| <b>Support Planning Process to Evaluate Management Needs of a HIE Entity</b>  |          |          |   |
| Work with Advisory Council to establish a Health Information Exchange Evaluation Workgroup.   | 01/01/17 | 03/30/17 | <ul style="list-style-type: none"> <li>• Workgroup meeting agendas, minutes, briefs (e.g., governance models)</li> <li>• Meeting materials- workgroup briefs, slides, etc.</li> <li>• Written summary and slide presentations on the Workgroup's recommendations for Advisory Council meeting</li> <li>• Straw Model management structure diagrams</li> </ul> |
| Facilitate a workgroup process to evaluate options and develop recommendations for the management of operations, and the governance of Connecticut HIE services.              | 01/01/17 | 03/30/17 |   |
| Provide workgroup recommendations to Health IT Advisory Council   | 03/30/17 | 04/20/17 |   |
| Plan, develop, and facilitate Advisory Council process to consider, and advance or revise, workgroup recommendations on management and governance of Connecticut HIE services | 04/20/17 | 05/18/17 |   |
| <b>RFP or Contract for HIE Management Entity</b>  |          |          |   |
| Develop RFP or contract criteria for the management and operation of a HIE services entity  | 05/22/17 | 06/15/17 | <ul style="list-style-type: none"> <li>• HIE entity criteria, draft and final</li> <li>• RFP draft, if needed</li> <li>• RFP final, if needed</li> <li>• FAQs and responses to vendor questions</li> <li>• Evaluation materials</li> </ul>  |
| Draft RFP, if needed  | TBD      | TBD      |   |
| Assist in the review and evaluation of RFP proposals (if needed) and provide recommendations  | TBD      | TBD      |   |
| Provide cost and pricing analysis of submittals and responses to RFP, if needed   | TBD      | TBD      |   |
| <b>Development of Use Case Factory</b>  |          |          |   |
| Work with Health IT Advisory Council to establish a Use Case Factory Workgroup  | 03/01/17 | 05/01/17 | <ul style="list-style-type: none"> <li>• Workgroup meeting agendas, meeting minutes</li> <li>• Meeting materials;</li> </ul>  |
| Facilitate Workgroup meetings to develop :<br>1) a charter for the Use Case Factory project   | 04/03/17 | 05/01/17 |   |

|   |          |          |   |
|---|----------|----------|---|
| 2) a Use Case Factory Policies and Processes document   |          |          | workgroup charter, topic - area briefs, slides, etc.  |
| Validate Workgroup's planning with the Health IT Advisory Council Workgroup   | 04/03/17 | 05/01/17 | <ul style="list-style-type: none"> <li>Use Case Factory artifacts, including: Use Case factory Policies and Processes document, slide presentations, etc.</li> </ul>  |
| <b>System Integrator Activity to Onboard HITO and Support HIT PMO with Future HIE Considerations</b>  |          |          |   |
| Develop summary research on other states' HIE Initiatives   | 01/01/17 | 01/31/17 | <ul style="list-style-type: none"> <li>Meeting agenda</li> <li>Summary brief and slides on up to six other states' HIE Initiatives and national HIE Initiatives</li> <li>State of the State Background Brief for HITO onboarding</li> <li>Consent Registry Brief and slides</li> <li>Pop Health Registries Brief and slides</li> <li>APCD Brief and slides</li> </ul> |
| Develop summary research on national HIE Initiatives  | 01/01/17 | 01/31/17 |   |
| Develop "State of the State" Brief (based on existing research and artifacts)   | 01/01/17 | 01/31/17 |   |
| Provide background research and recommendations on a Consent Registry   | 01/01/17 | 01/31/17 |   |
| Provide background research and recommendations on public health registries   | 01/01/17 | 01/31/17 |   |
| Provide background research and recommendations on All Payer Claims Database  | 01/01/17 | 01/31/17 |   |
| <b>Determine Fair Share Contribution for Multi-payer participation</b>  |          |          |   |
| Support planning meetings with the Medicaid Agency, Multi-Payers and other key stakeholders discuss Fair Share participation  | 01/03/17 | 03/31/17 | <ul style="list-style-type: none"> <li>Meeting agenda, slides, minutes, ROI Brief, ROI Calendar</li> </ul>  |
| <b>Stakeholder Engagement Activities to Build Understanding of ROI for HIE services</b>   |          |          |   |
| Support in-person meetings with payers, large self-insured employers, health systems, and associations to build understanding on cost allocation and economies of scale | 02/01/17 | 02/28/17 | <ul style="list-style-type: none"> <li>Meeting agendas and meeting minutes for one-on-one meetings (8-10 meetings)</li> </ul>   |
| <b>Health IT Advisory Council Facilitation and Support</b>  |          |          |   |
| Facilitate Health IT Advisory Council meetings  | 01/01/17 | 9/30/17  | <ul style="list-style-type: none"> <li>Meeting agenda, slides, minutes, Briefs, in-person attendance</li> <li>Meeting materials</li> </ul>  |
| Support Council with development of an advisory infrastructure, with standing workgroups and a process for naming ad hoc groups, as needed                              | 01/01/17 | 03/16/17 |   |
| <b>Provide Assistance with Communication and Outreach on Behalf of the HITO</b>   |          |          |   |
| Develop statewide information campaign focused on the value of better, more timely information for patient care   | 01/03/17 | 09/29/17 | <ul style="list-style-type: none"> <li>Communication Plan</li> <li>(9) Monthly e-Newsletters; 4-6 Webinars on HIE topics (slides)</li> <li>3 HITO Roundtable meetings with stakeholders (agenda, talking points, slides)</li> </ul>   |
| Conduct webinars and participate in in-person meetings, if needed   | 01/03/17 | 09/29/17 |   |
| Host three (3) HITO Roundtable stakeholder meetings (Topics may include: Alerts, eQCM Reporting and Measurement, Governance of HIE service in CT)                       | 01/03/17 | 09/29/17 |   |
| <b>Project Review Meeting</b>   |          |          |   |

|   |         |         |   |
|---|---------|---------|---|
| Lessons learned, client feedback, future planning | 9/18/17 | 9/29/17 | • Meeting agenda, slides, summary documents |
|---|---------|---------|---|

7. Section 6, Cost and Schedule Payment Terms, Section I Total Costs and Fees, Subsection A on page 6 of the above numbered contract is amended to include Table 3 Rate, Skills and Experience Tiers for services rendered effective on execution.

Table 3 Rate, Skills and Experience Tiers

| Rate                       | Roles and Skills   | Experience  |
|----------------------------|--|---|
| Tier 1 Rate:<br>\$300/hour | Health Information Technology & Policy Subject Matter Expert (SME) Level IV  | Experience Includes: M.D. or PhD degree; 20+ years of experience in healthcare and/or health policy fields and at least 10 years of combined new and related older technical experience in the health IT, healthcare, regulatory, or compliance fields  |
| Tier 2 Rate:<br>\$260/hour | Health Information Technology & Policy Subject Matter Expert (SME) Level III | Experience Includes: Master degree or equivalent experience; 12-25 years of experience in healthcare and/or health policy fields and at least 8 years of combined new and related older technical experience in the health IT, healthcare, regulatory, or compliance fields directly related to the required area of expertise. |
| Tier 3 Rate:<br>\$240/hour | Health Information Technology & Policy Subject Matter Expert (SME) Level II  | B.A. or B.S. degree or higher; 12 years of experience in the IT or healthcare fields and at least 8 years of combined new and related older technical experience in the IT or healthcare fields directly related to the required area of expertise.   |
| Tier 4 Rate:<br>\$200/hour | Health Information Technology & Policy Subject Matter Expert (SME) Level I   | B.A. or B.S. degree or higher; At least four years of experience in the IT or healthcare fields directly related to the required area of expertise.   |
| Tier 5 Rate:<br>\$175/hour | Consultant / Project Manager Level III                                       | B.A. or B.S. degree or higher; between 2-4 years of experience working on large and complex project management, and with issues or projects in the field of healthcare and/or health IT.  |
| Tier 6 Rate:<br>\$120/hour | Analyst / Project Manager Level II   | B.A. or B.S. degree or higher; At least three years of professional experience and at least one year experience in healthcare, health IT, or human services-related delivery or policy work.  |

8. The CONTRACTOR shall bill according to the rate tiers shown in Table 3 and the CONTRACTOR and subcontractor personnel tier assignments set forth in Appendix A.
9. CONTRACTOR and subcontractor personnel substitutions or additions may be permitted with advance written authorization of the SIM PMO and documentation supporting the hourly rate, position title, and role as referenced in Appendix A.
10. The CONTRACTOR shall bill for each individual assigned to the engagement based on hours worked.
11. The CONTRACTOR shall invoice for the withhold for services rendered through December 31, 2016 as of December 31, 2016.

12. Section 6, Cost and Schedule Payment Terms, Section I Total Costs and Fees, Subsection D on page 7 of the above numbered contract is hereby revised such CONTRACTOR shall invoice for the balance of the withholding for services rendered through September 30, 2017 as of **September 30, 2017**.
13. Section 6, Cost and Schedule Payment Terms, Section I Total Costs and Fees, Subsection E on page 7 of the above numbered contract is hereby revised such that the original not to exceed amount of \$120,000, is replaced with a new not to exceed amount of **\$781,372**.
14. This document constitutes an amendment to the above numbered contract. All provisions of that contract, except those explicitly changed above by this amendment, shall remain in full force and effect.

**Appendix A: Rate, Skills, Experience Tiers with Current Personnel**

| Rate/People  | Roles and Skills   | Experience   |
|--|--|--|
| <p><b>Tier 1 Rate:</b><br/>\$300/hour</p> <p>Karen Bell M.D.</p>   | <p><b>Health Information Technology &amp; Policy Subject Matter Expert (SME) Level IV</b><br/>Provides extremely high-level subject matter proficiency in the operations of all of the following: healthcare delivery systems, federal, state, and local government administration, and nonprofit associations. Provides technical, managerial, and administrative direction for problem definition, analysis, requirements development and implementation for complex to extremely complex systems in the subject matter area.</p> <p>Subject matter expertise includes, but is not limited to: health IT and health information exchange, technical, policy, operations and governance; telehealth; provider workflows in multiple healthcare settings; social determinants of health and community programs that intersect with healthcare delivery; health insurance, including capitation and rate setting; quality measurement programs, predictive analytics and risk stratification of high risk patients; care coordination strategies; Medicaid waivers and Medicaid waiver programs; Meaningful Use of Certified Electronic Health IT; Medicare Access and CHIP Reauthorization Act (MACRA), Medicare Incentive Payments (MIPS), Medicare Shared Savings Program (MSSP), and other alternative payment models and programs; Medicaid Information Technology Architecture (MITA); and Medicaid Management Information Systems (MMIS) and other Medicaid Enterprise Systems (MES) components.</p> | <p>Experience includes: M.D. or PhD degree; 20+ years of experience in healthcare and/or health policy fields and at least 10 years of combined new and related older technical experience in the health IT, healthcare, regulatory, or compliance fields</p>  |
| <p><b>Tier 2 Rate:</b><br/>\$260/hour</p> <p>Carol Robinson<br/>George Beckett<br/>Chris Coughlin<br/>Dave Grinberg<br/>Kate Kiefert</p> | <p><b>Health Information Technology &amp; Policy Subject Matter Expert (SME) Level III</b><br/>Provides extremely high-level subject matter proficiency in the operations of two or more of the following sectors: healthcare delivery systems, federal, state, and local government administration, nonprofit associations, and vendors of health information technology services. Provides technical, managerial, and administrative direction for problem definition, analysis, requirements development and implementation for complex to extremely complex systems in the subject matter area.</p> <p>Experienced in preparing federal Advance Planning Documents (APDs) on behalf of state agencies to the</p>   | <p>Experience includes: Master degree or equivalent experience; 12-25 years of experience in healthcare and/or health policy fields and at least 8 years of combined new and related older technical experience in the health IT, healthcare, regulatory, or compliance fields directly related to the required area of expertise.</p> |



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|   | <p>Centers for Medicare &amp; Medicaid Services (CMS) for enhanced system funding. Must be knowledgeable in all the constituent APD components including system feasibility studies, alternatives analysis, cost benefit analysis, cost allocation plan, and other activities required by the CFR and state regulations.</p> <p>Subject matter expertise includes, but is not limited to: health IT and health information exchange, technical, policy, operations and governance; telehealth; provider workflows in multiple healthcare settings; social determinants of health and community programs that intersect with healthcare delivery; health insurance, including capitation and rate setting; quality measurement programs, predictive analytics and risk stratification of high risk patients; care coordination strategies; Medicaid waivers and Medicaid waiver programs; Meaningful Use of Certified Electronic Health IT; Medicare Access and CHIP Reauthorization Act (MACRA), Medicare Incentive Payments (MIPS), Medicare Shared Savings Program (MSSP), and other alternative payment models and programs; Medicaid Information Technology Architecture (MITA); and Medicaid Management Information Systems (MMIS) and other Medicaid Enterprise Systems (MES) components.</p> |  |
| <p>Tier 3 Rate:<br/>\$240/hour</p> <p>Jim Younkin<br/>Pam Russell<br/>Elise Ames<br/>Teresa Younkin</p> | <p>Health Information Technology &amp; Policy Subject Matter Expert (SME) Level II</p> <p>Provides high-level subject matter proficiency in the operations of at least two of the following sectors: healthcare delivery systems, federal, state, and local government administration, nonprofit associations, and vendors of health information technology services. Provides technical, managerial, and administrative direction for problem definition, analysis, requirements development and implementation for complex systems in the subject matter area.</p> <p>Subject matter expertise includes, but is not limited to: health IT and health information exchange, technical, policy, operations and governance; telehealth; provider workflows in multiple healthcare settings; social determinants of health and community programs that intersect with healthcare delivery; health insurance, including capitation and rate setting; quality measurement programs, predictive analytics and risk stratification of high risk patients; care</p>  | <p>B.A. or B.S. degree or higher; 12 years of experience in the IT or healthcare fields and at least 8 years of combined new and related older technical experience in the IT or healthcare fields directly related to the required area of expertise.</p> |

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|   | <p>coordination strategies; Medicaid waivers and Medicaid waiver programs; Meaningful Use of Certified Electronic Health IT; Medicare Access and CHIP Reauthorization Act (MACRA), Medicare Incentive Payments (MIPS), Medicare Share Savings Program (MSSP), and other alternative payment models and programs.</p>   |  |
| <p><b>Tier 4 Rate:</b><br/><b>\$200/hour</b></p> <p>Pete Robinson<br/>Alex Horowitz<br/>Chris Robinson</p> <p>✓</p> | <p><b>Health Information Technology &amp; Policy Subject Matter Expert (SME) Level I</b><br/>Provides very strong subject matter proficiency in the field of health information technology, from a technical, operations, and policy viewpoint. Provides technical, managerial, and administrative direction for problem definition, analysis, requirements development and implementation for complex systems in the subject matter area.</p> <p>Subject matter expertise includes, but is not limited to: health IT and health information exchange, technical, policy, operations and governance; telehealth; provider workflows in multiple healthcare settings; social determinants of health and community programs that intersect with healthcare delivery; health insurance, including capitation and rate setting; quality measurement programs, predictive analytics and risk stratification of high risk patients; care coordination strategies; Medicaid waivers and Medicaid waiver programs; Meaningful Use of Certified Electronic Health IT; Medicare Access and CHIP Reauthorization Act (MACRA), Medicare Incentive Payments (MIPS), Medicare Share Savings Program (MSSP), and other alternative payment models and programs.</p> | <p>B.A. or B.S. degree or higher; At least four years of experience in the IT or healthcare fields directly related to the required area of expertise.</p> |

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| <p><b>Tier 5 Rate:</b><br/><b>\$175/hour</b></p> <p>Betsy Boyd-Flynn<br/>Wayne Houk<br/>Greg Petrossian</p> | <p><b>Consultant / Project Manager Level III</b><br/>Provides complex management consulting services to clients including collecting, documenting, and analyzing information concerning clients' current clinical, financial, business, or governance processes; developing alternatives for solutions to problems and, where appropriate, assisting in implementing improved or new business processes or systems; identifying and documenting strengths and/or deficiencies and dysfunctionality in existing clinical, financial, business processes and in information systems; defining, testing, and implementing solutions to business and systems problems; developing "current state" and "future state" models as part of strategic and business planning; synthesizing research and complex information into understandable and easily consumable documents and presentations.</p> <p>Acting as the lead project manager on complex projects; managing daily activities, hours of work and place of work of all consultants and contractors assigned to project in accordance with the approved project work plan; monitoring status of all project tasks and deliverables and advise senior management of any significant variations; monitoring project budget and advising senior management of any significant variations; managing client invoicing which includes tracking client receivables and payments.</p> <p>Knowledgeable about quality measurement and reporting programs; Medicaid waivers and Medicaid waiver programs; Meaningful Use of Certified Electronic Health IT; Medicare Access and CHIP Reauthorization Act (MACRA), Medicare Incentive Payments (MIPS), Medicare Share Savings Program (MSSP), and other Alternative payment models and programs.</p> | <p>B.A. or B.S. degree or higher; between 2-4 years of experience working on large and complex project management, and with issues or projects in the field of healthcare and/or health IT.</p> |
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| <p>Tier 6 Rate:<br/>\$120/hour</p> <p>Eva DeCesaro<br/>Melissa Balgley</p> | <p><b>Analyst / Project Manager Level II</b><br/>Supporting consulting services to clients including collecting, documenting, and analyzing information concerning clients' current clinical, financial, business, or governance processes; conducting research; building and disseminating surveys, taking meeting minutes and interview notes; synthesizing information into slide presentations.</p> <p>Acting as a project manager; managing daily activities of all consultants and contractors assigned to project in accordance with the approved project work plan; monitoring status of all project tasks and deliverables and advising lead project manager of any significant variations.</p> | <p>B.A. or B.S. degree or higher; At least three years of professional experience and at least one year experience in healthcare, health IT, or human services-related delivery or policy work.</p> |
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## ACCEPTANCES AND APPROVALS

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

### CONTRACTOR

Cedar Bridge Group LLC  
Contractor (Corporate/Legal Name of Contractor)  
Carl Robinson  
Authorized Official (Signature)  
Principal  
Title

12/22/2014  
Date

### OFFICE OF THE HEALTHCARE ADVOCATE

Demian Fontanella  
DEMIAN FONTANELLA, ACTING HEALTHCARE ADVOCATE  
Fontanella

12/23/16  
Date

### OFFICE OF THE ATTORNEY GENERAL

Joseph Rubin  
ASST. ASSOC. ATTORNEY GENERAL (Approved as to form) & legal sufficiency  
Joseph Rubin

12/29/16  
Date

26373 2017\_26373 SIM Health Information Technology Consulting Servi MCO39400 Mark Schaefer Director, Healthcare Innovation Sarju Shah 860.331.2470 860.331.2461 false true true false false false true false 11702 CedarBridge Group, LLC 1655 NW 130th Ave. Portland OR 97229 2947 120,000.00 The amended scope of work is generally consistent with the original scope of work except that the amended scope further specifies the activities that the Contractor will be responsible for conducting related to eCQM, alert notification, and health information exchange. Examples of these additional activities include stakeholder engagement, national and state environmental scan, Health IT Advisory Council facilitation and support, RFI and RFP development, and communication. Substantial additional planning is required to support the implementation of statewide eCQM, alert notification, and health information exchange solutions as envisioned in the SIM test grant and PA 16-77. Such planning is necessary to ensure that the proposed solutions add enable the success of our efforts to advance quality of care delivery and reform our payment models. 12/12/16 9/30/17 661372 false false At the time the original contract was released, the State anticipated that an extension of the contract might be required in order to support the onboarding of the Health Information Technology Officer (HITO) and to complete the planning activities broadly encompassed by the original scope. The second addendum of the original procurement for Cedarbridge's services indicated that "The State may consider adding options for renewal after the initial contract term." The state is under a tight deadline to complete a request for 90/10 federal funding to support these activities. The IAPD must be submitted immediately in order to ensure access to funding Q3 of SFY2017, to maximize our ability to achieve the timetable specified in PA 16-77 and to avoid jeopardizing the SIM test grant funds, which are intended to support technology solutions in the above mentioned areas. The IAPD must specifically name the proposed Contractor and provide a copy of the proposed contract as amended. Office of the Managed Care Ombudsman Amendment PSA The State Innovation Model (SIM) Program Management Office (PMO) entered into a contract with CedarBridge to provide subject matter expertise, technical support, and to facilitate and help guide the state's Health IT Council that is tasked with advising on the planning and implementation of a statewide Health Information Exchange and other SIM health IT (HIT) investments. Scope/activities included the following: 2.1.1 Provide Technical Support and Subject Matter Expertise 1. Provide expertise on HIT planning, deployment, and scaling 2. Develop and compile business, functional and technical requirements 3. Develop and compile business use cases for HIT/HIE/eCQM 4. Provide expertise related to eCQM and technologies that enable use in value-based payment 5. Review and provide recommendations on solution architecture options 6. Evaluate and analyze available solutions in the marketplace and provide recommendations 7. Provide or provision expertise on HIE technology issues including interoperability, architecture, standards, business operations, development of statewide HIE/HIT policies 8. Provide expertise on HIE technology risk mitigation— including related to patient consent, standards and interoperability; business operations, and financial sustainability 9. Assist with cost allocations of HIT components 10. Assist with planning and document preparation 11. Provide support for transition to HITO 2.1.2 Assist with Solicitations 1. Facilitate and lead meetings for the development of RFI/RFPs 2. Develop specifications, and technical requirements of RFI and RFPs 3. Draft RFI and RFP documents and supplemental materials 4. Aid in the review and evaluation of RFI/RFP and provide recommendations 5. Provide cost and pricing analysis of submittals and responses of RFI/RFP 6. Provide negotiation support 7. Provide change management and transition planning 2.1.3 Facilitate Meetings 1. Facilitate State Health IT Council 2. Develop materials including but not limited to agenda, goals, objectives timelines, presentations, minutes and summary documents 3. Manage meeting and workgroup distribution of information 4. Related activities as required 2.1.4 Other Related Duties within Available Resources 1. Facilitate and lead meetings with stakeholders for the development of agency documents 2. Related activities as required 16SIM0002 2017\_24921 0 9/12/16 12/31/16 N Approved by OPM false false false A portion will be funded through 12004, MCO39400, 10020, 29130, 54050, MCO\_Nonproj, Budget Ref 2016 An additional coding string will be established for this contract upon approval by CMS of an IAPD update, which will support this work at a

90% federal match rate. 0.0000 120,000.00

**Name:**

**Status:**

**Title:**

**Agency:**

**Disposition Date:** 12/13/2016 4:48:59 PM

**Disposition Reason:** Approved RSD 12-13-16

**Contact:**

**Requester:**

|  |            |
|--|------------|
| Is this PSA with an individual?  | <b>NO</b>  |
| Was the cost of the original PSA more than \$50,000?                               | <b>YES</b> |
| Is the cost of this amendment 100% or more of the cost of the original PSA?        | <b>YES</b> |
| Does this amendment increase the cost of the original PSA to more than \$50,000?   | <b>NO</b>  |
| Does this amendment extend the terms of the original PSA beyond a one-year period? | <b>NO</b>  |
| Is this the second or subsequent amendment to the original PSA?                    | <b>NO</b>  |

**Original PSA**

**Cost**

**Prior Amendments**

**PO Reference:**

**Core-CT Contract Id:**

**Start Date:**

**End Date:**

**Contractor:**

CedarBridge Group, LLC

1655 NW 130th Ave.  
Portland, OR 97229

**Outline of Work:**

**Prior Amendment**

Cost                    \$0.00

**Start Date:**

**End Date:**

**Current Amendment:**

Estimated Cost:            \$661,372.00

**Start Date:**

**End Date:**

**Account Codes:**

**Amended Outline of Work:**

**Need for Amendment:**

**Explain the reason for not issuing a new Request for Proposal:**