

CONTRACT AMENDMENT NO. 11

Original Contract Routing Number 14-64254

1. PARTIES

This Amendment to the above-referenced Original Contract (hereinafter called the "Contract") is entered into by and between DXC Technology Services LLC, 1775 Tysons Blvd, Tysons, VA 22102, (hereinafter called "Contractor"), and the STATE OF COLORADO, acting by and through the Department of Health Care Policy and Financing, 1570 Grant Street, Denver, Colorado 80203 (hereinafter called "Department" or "State").

2. EFFECTIVE DATE AND ENFORCEABILITY

This Amendment shall not be effective or enforceable until it is approved and signed by the Colorado State Controller or designee (hereinafter called the "Effective Date"). The Department shall not be liable to pay or reimburse Contractor for any performance hereunder, including, but not limited to, costs or expenses incurred, or be bound by any provision hereof prior to the Effective Date.

3. FACTUAL RECITALS

The Parties entered into the Contract to develop and install the Colorado interChange and to provide services related to the Colorado interChange. The purpose of this Amendment is to update Section 7, PAYMENTS TO CONTRACTOR, to add scope of work pertaining to the care and case management tool, and to add funds for the new scope of work.

4. CONSIDERATION

The Parties acknowledge that the mutual promises and covenants contained herein and other good and valuable consideration are sufficient and adequate to support this Amendment.

5. LIMITS OF EFFECT

This Amendment is incorporated by reference into the Contract, and the Contract and all prior amendments thereto, if any, remain in full force and effect except as specifically modified herein.

6. MODIFICATIONS

The Contract and all prior amendments thereto, if any, are modified as follows:

A. Section 7, PAYMENTS TO CONTRACTOR, subsection A., Maximum Amount, is hereby deleted in its entirety and replaced with the following:

A. Maximum Amount

The maximum amount payable under this Contract to Contractor by the State is shown in the following table, as determined by the State from available funds. Payments to Contractor are limited to the unpaid obligated balance of the Contract at the rates set forth in Exhibit E,

Compensation and Quality Maintenance Payments. The maximum amount payable by the State to Contractor is:

State Fiscal Year 2013-14	\$9,201,096.00
State Fiscal Year 2014-15	\$25,491,547.00
State Fiscal Year 2015-16	\$25,851,971.00
State Fiscal Year 2016-17	\$24,876,103.97
State Fiscal Year 2017-18	\$38,206,662.17
State Fiscal Year 2018-19	\$30,272,371.42
State Fiscal Year 2019-20	\$21,177,467.00
State Fiscal Year 2020-21	\$21,047,107.00
State Fiscal Year 2021-22	\$7,038,399.66
Total for All State Fiscal Years	\$203,162,725.22
State Fiscal Year 2018-19 Additional Funds:	
<ul style="list-style-type: none"> • \$1,402,149.00 Funding for Aerial Care and Case Management Tool Pilot Phase 	

The State Fiscal Year amounts in the table in this section are based on State appropriations. Based on the timing of the invoicing and payment, the Contractor may receive amounts paid in a different State Fiscal Year than when the amounts were earned by the Contractor.

Any changes to the maximum amount payable under the Contract or Quality Maintenance Payments Specified in Exhibit E, shall require a formal written amendment, in accordance with State Fiscal Rules and State Controller Policies and Guidelines.

B. Exhibit C, REQUIREMENTS, Sections 74.37 through 74.37.17 are hereby added as follows:

74.37. Reference Amendment 11-2018: The Contractor shall implement the Medecision Aerial platform (Aerial Care and Case Management System) to become a replacement to the care and case management solution implemented based upon requirements in Section 74. See *Original Contract*, CASE MANAGEMENT SYSTEM, subsections 74.1 through 74.36.3. (referenced in the contract as McKesson VITAL Care and Case Management Platform, which became Axis Point due to company changes). The Contractor activities included under this Amendment shall include: implementing the Aerial Care and Case Management System (“the system”) to support a pilot phase for assessments and care plans (the “Pilot Program”), supporting the execution of that Pilot Program, modifying the system to support the functionality that has already been implemented in Axis Point, conducting requirements validation activities and reviewing the design of the system. The Contractor shall populate

the Aerial Care and Case Management System (the system) with the information of members who will participate in the Pilot Program. Member information will be provided to Contractor by the Department. The Contractor will delete all member information used during the Pilot Program prior to Statewide rollout of the system.

- 74.37.1. Reference Amendment 11-2018: The Contractor shall ensure that Axis Point functionality will remain active in either Axis Point or Aerial (provided the same functionality as Axis Point is available) in production until formal, final certification is granted by the Centers for Medicare and Medicaid Services (CMS).
- 74.37.2. Reference Amendment 11-2018: The Contractor shall work collaboratively with the Department throughout the activities described in this Amendment. The Contractor shall discuss system defects, system changes, timelines, and the prioritization of tasks with the Department and shall obtain the Department's approval on resolution of system defects or system changes. Contractor shall discuss any changes to tasks that had already received Department approval and shall obtain the Department's approval on any changes to tasks.
- 74.37.3. Reference Amendment 11-2018: In the event the Contractor's Aerial Care and Case Management Solution subcontractor, Medecision, is acquired by another company, the Contractor shall ensure that any entity acquiring the subcontractor will assume all the subcontractor's rights, duties and obligations with respect to this Amendment.
- 74.37.4. Reference Amendment 11-2018: The Contractor shall provide an Aerial Care and Case Management System Work Plan (the "Work Plan") to the Department. The Contractor shall provide the Work Plan in table format and include in the Work Plan, at a minimum, the following:
 - 74.37.4.1. Reference Amendment 11-2018: All the tasks to be completed noting those tasks which are to be completed by the Contractor, which includes tasks to be completed by the Contractor's subcontractor, and the tasks that the Contractor identifies to be completed by the Department.
 - 74.37.4.2. Reference Amendment 11-2018: The scheduled start date and end date of each task.
 - 74.37.4.2.1. Reference Amendment 11-2018: Deliverable: Aerial Care and Case Management System Work Plan.
 - 74.37.4.2.2. Reference Amendment 11-2018: Due: The Aerial Care and Case Management System Work Plan is due ten (10) Business Days after the execution of this Amendment.
- 74.37.5. Reference Amendment 11-2018: Throughout the Pilot Program, the Contractor shall provide an Aerial Care and Case Management System Weekly Status Report ("Weekly Status Report"), which shall begin seven (7) days after the execution of this Amendment, that provides the status of all Work Plan tasks including, at a minimum, the following:
 - 74.37.5.1. Reference Amendment 11-2018: All tasks completed during the week prior to the date of the status report the current week.

- 74.37.5.2 Reference Amendment 11-2018: All tasks that were to be completed during the week prior to the date of the status report but were not completed, including an explanation of why the tasks were not completed.
- 74.37.5.3. Reference Amendment 11-2018: All tasks remaining to be completed in the current month and the following month, listed by date, with a current status for each uncompleted task.
- 74.37.5.4. Reference Amendment 11-2018: A summary that provides information depicting if the project is on schedule or behind schedule.
- 74.37.5.5. Reference Amendment 11-2018: An ongoing, updated list of issues that are impacting the completion of tasks by the agreed-upon completion dates, as set forth in the Work Plan. The Contractor shall include with this list of issues an explanation of what the Department and Contractor has done or plans to do in response to each issue.
- 74.37.5.6.1. Reference Amendment 11-2018: Deliverable: Aerial Care and Case Management System Weekly Status Report.
- 74.37.5.6.2. Reference Amendment 11-2018: Due: The Aerial Care and Case Management System Weekly Status Report is due every Tuesday by 12:00 pm Mountain Time.
- 74.37.6. Reference Amendment 11-2018: Aerial Care and Case Management System Assessment and Care Plan Pilot Program.
- 74.37.6.1. Reference Amendment 11-2018: The Contractor shall complete all development required for the implementation of the Aerial Care and Case Management System Pilot Program.
- 74.37.6.1.2 Reference Amendment 11-2018: The system shall be accessible through desktop, portable computers, or mobile devices. The system application shall be accessible, viewable, functional and usable over the Internet by any mobile device with a web browser. The versions of the mobile operating systems will be determined by both the Department and the Contractor.
- 74.37.6.1.3 Reference Amendment 11-2018: The Contractor shall develop the system to provide the capability for user navigation. This includes the ability for users to navigate quickly within the system across different sections of the Assessment to the Person-Centered Support Plan ("Support Plan"), and to also navigate across multiple system domains to allow data collection. This may require some Assessment items to be arranged in tables to allow for scrolling left to right rather than scrolling up and down, with follow-up questions cued by response to primary question.
- 74.37.6.1.4 Reference Amendment 11-2018: The Contractor shall develop a system that provides the capability for the creation of an Assessment and a Support Plan. System shall easily identify required items that are required to be completed for the Assessment and Support Plan to be considered complete. The system shall also display results so that case managers are prompted to correct data entry errors.

- 74.37.6.1.4.1. Reference Amendment 11-2018: The entire Support Plan shall consist of: Service, Risk Mitigation Plan, Emergency Backup, Rights Restrictions, and Rights and Responsibilities.
- 74.37.6.1.5 Reference Amendment 11-2018: The system shall have the capability to create a client record (support a conversational/scripted intake process).
- 74.37.6.1.6 Reference Amendment 11-2018: The Contractor shall develop a system with the capability to generate and show a time stamp update in each section of the system (e.g. date/time of latest update and maintain records of any historical updates).
- 74.37.6.1.7 Reference Amendment 11-2018: The Contractor shall develop a system with the capability to edit/update information including client information, Assessments (current and finalized/complete versions) and Support Plans within required time frames as defined by the Department. The system shall also provide for the ability to “cut and paste” content in all fields.
- 74.37.6.1.8. Reference Amendment 11-2018: The Contractor shall develop the system with the capability to validate values, run error checks such as on Assessments and Support Plans. Additionally, the system shall allow for only one active Home and Community Based Services (HCBS) benefit plan per client.
- 74.37.6.1.9. Reference Amendment 11-2018: The Contractor shall develop the system that allows for special characters, such as “!, @, #, \$, %, ^, &, *, (,)” in text boxes without generating an error message or substitution.
- 74.37.6.1.10. Reference Amendment 11-2018: The Contractor shall develop the system that allows for auto-saving of work in progress within all aspects of the client record.
- 74.37.6.1.11. Reference Amendment 11-2018: The Contractor shall develop the system to provide and support the Person-Centered Support Plan or Assessment pull forward (auto populate) pre-population and automation as configurable within the system’s current functionality for the TEFT Pilot Program, including the following:
- 74.37.6.1.11.1. Reference Amendment 11-2018: Allowing specific information that will be identified by the Department at a later point to be pulled forward (auto populate) from the Assessment module into the Support Plan module of the case management system development.
- 74.37.6.1.11.2. Reference Amendment 11-2018: Each identified need, goal, area of interest and responses should be pulled forward (auto populate) into the Support Plan module of the case management system.
- 74.37.6.1.11.3. Reference Amendment 11-2018: Pull forward (auto populate) of any additional items from the Assessment that informs Support Plan will be identified by the Department.
- 74.37.6.1.11.4. Reference Amendment 11-2018: The ability to allow for Pre-populating fields for same questions across modules. (i.e. enter data in one, get same data in the other)

- 74.37.6.1.11.5. Reference Amendment 11-2018: The capability for Staff to utilize information collected within the Universal Assessment Tool to develop the Support Plan.
- 74.37.6.1.11.6. Reference Amendment 11-2018: Based on algorithms and content from the Assessment data, the system shall generate a list of Support Plan recommendations and key considerations (Decision Support Tools) for case managers to explore with clients when developing the Support Plan. The Department will provide algorithms and content for the Support Plan recommendations, key considerations.
- 74.37.6.1.11.7. Reference Amendment 11-2018: Based on algorithms from the Assessment and other criteria to be identified by the Department, the system shall generate recommended waiver programs and other state plan benefits for long-term care.
- 74.37.6.1.11.8. Reference Amendment 11-2018: The capability for the needs indicated in the Assessment(s) to be flagged in the PSP module and prompt the case manager to address the need.
- 74.37.6.1.11.9. Reference Amendment 11-2018: Assessment modules that include a section called PSP Implications. This information shall be visible to case managers when creating the Support Plan.
- 74.37.6.1.11.10. Reference Amendment 11-2018: Many needs in the Assessment have follow-up questions, such as what is important for a provider know, that help to identify preferences for care and ways to improve independence. The responses to these items in the Assessment should be visible to case managers when creating a new Support Plan.
- 74.37.6.1.12. Reference Amendment 11-2018: The Contractor shall develop the system to provide the capability to generate comprehensive Support Plans and in printable form (paper and PDF). This capability shall:
- 74.37.6.1.12.1. Reference Amendment 11-2018: Allow a limit of 600 characters maximum per goal.
- 74.37.6.1.12.2. Reference Amendment 11-2018: Be unique to and identified by the client.
- 74.37.6.1.12.3. Reference Amendment 11-2018: Allow case managers to identify all services and supports a client will utilize in the Support Plan and link these services and supports to the client's areas of need, goals or areas of interest, as identified in the client's Assessment.
- 74.37.6.1.12.4. Reference Amendment 11-2018: Allow case managers to select from a menu of services based on the client's benefit plan that are available to that client.
- 74.37.6.1.12.5. Reference Amendment 11-2018: Allow case managers to select or identify non-paid supports that will provide support to clients to address identified needs or goals from the Assessment.
- 74.37.6.1.12.6. Reference Amendment 11-2018: Include a risk mitigation plan, and a prevention plan for critical incidents for all HCBS clients.

- 74.37.6.1.12.7. Reference Amendment 11-2018: Provide the capability to generate identified risks from the Assessment for the case manager to complete the risk mitigation plan in the system.
- 74.37.6.1.12.8. Reference Amendment 11-2018: Allow for the creation of an emergency backup plan, which is for documenting contingencies in the event of an interruption to the delivery of critical services.
- 74.37.6.1.12.9. Reference Amendment 11-2018: Provide for the capability for the Support Plan to address any restrictions on rights per Federal HCBS regulations. The Department to provide content for restrictions on rights.
- 74.37.6.1.12.10. Reference Amendment 11-2018: Be compliant with the Americans with Disabilities Act, and be accessible and understandable to the clients, as determined by the Department.
- 74.37.6.1.12.11. Reference Amendment 11-2018: Allow for zero (0) to twenty-five (25) goals.
- 74.37.6.1.12.12. Reference Amendment 11-2018: Allow for the Assessment tools and all associated modules to be created in the system.
- 74.37.6.1.12.13. Reference Amendment 11-2018: The system shall have capability to publish the Finalized Assessment and/or Support Plan with the date, print functionality, and be PDF exportable from local drive. The printed Assessment and/or Support Plan shall include client demographic information and case management provider contact information, and the printable/PDF form shall be consistent with the required presentation of the form, as determined by the Department.
- 74.37.6.1.12.13.1. Reference Amendment 11-2018: Assessments and/or Support Plan printed in paper and electronic version shall be compliant with the Americans with Disabilities Act, and be accessible to clients in a user-friendly manner, as determined by the Department.
- 74.37.6.1.13. Reference Amendment 11-2018: The Contractor shall develop the system that includes a "pop-up" message, prompt, or other feature to inform users that the Assessment and Support Plan has been completed, that users are at the end of the Assessment and Support Plan process, or identify the which page the user is on within the Assessment and Support Plan.
- 74.37.6.1.14. Reference Amendment 11-2018: The Contractor shall develop the system that allows for different types of Assessments and Support Plans, as determined necessary by the Department.
- 74.37.6.1.15. Reference Amendment 11-2018: The Contractor shall develop the system with the ability to insert, add, edit or remove items and forms within Assessment modules and Support Plans, as determined by the Department.
- 74.37.6.1.16. Reference Amendment 11-2018: The Contractor shall develop the system that allows case managers to select from a menu of non-paid supports available to client.

- 74.37.6.1.17. Reference Amendment 11-2018: The Contractor shall develop the system that provides the capability for the data fields for the Support Plans to be inclusive of the data elements listed in the Requirements Traceability Matrix (RTM). This includes the 56 data elements developed by TEFT. The Department will provide the RTM to Contractor.
- 74.37.6.1.18. Reference Amendment 11-2018: The system shall allow staff developing the Support Plans to track the amount of time they spend on the Support Plan, as well as calculate billable units and costs based on the time the case manager has recorded in the system.
- 74.37.6.1.19. Reference Amendment 11-2018: The Contractor shall develop the system that supports laptops/mobile devices and off-line data entry for Assessments, Support Plans, development and case notes when disconnected from a network. This will require Contractor to develop a check-in and check-out mechanism with First In, First Out (FIFO) so that changes made offline are captured and rendered back into the system with validation step before committing the updates back into the core record set. The solution shall allow for a versioning process in storing the historical record for record roll-back option.
- 74.37.6.1.20. Reference Amendment 11-2018: The Contractor shall design the care planning functionality to accommodate the Department's Support Plan workflows that integrates algorithms and summary data from the Assessment.
- 74.37.6.2. Reference Amendment 11-2018: The Contractor shall provide training on the Aerial Care and Case Management System to Department staff or Department designees, as determined necessary by the Department. The Contractor shall provide training so that Department staff or Department designees have the understanding needed to conduct testing of the system.
- 74.37.6.2.1. Reference Amendment 11-2018: The Contractor shall provide "train the trainer" training on the Aerial Care and Case Management System to Department staff or Department designees.
- 74.37.6.2.2. Reference Amendment 11-2018: The Contractor shall develop comprehensive training materials for the system for all user roles, as determined by the Department. This shall include, but is not limited to, administrative staff, supervisors, and end users. The Contractor shall obtain guidance from the Department while developing training materials. The Contractor shall incorporate materials/content provided by the Department that provides the appropriate responses and uses of the system (i.e., the Contractor shall train technical components of the system, and the Department will provide on the programmatic content). The Contractor shall develop training materials that include both a manual and "quick sheets," which will be accessible online for all users. Medecision's training materials are proprietary and confidential to Medecision. The Department will only share the training materials with those users within the Department and county and contractor staff as needed to provide services to Medicaid members. Training materials will include disclaimer that materials are proprietary and shall be kept confidential. Medecision will provide standard

training materials that will be used and as changes are made to the system going forward, Contractor shall review and update the training materials to reflect those changes on a quarterly review schedule post implementation. For these changes, the Contractor shall obtain the Department's written approval on all new or revised training materials prior to introducing the training materials in a training session.

74.37.6.2.3. Reference Amendment 11-2018: The Contractor shall provide access to the training environment for the length of time needed, as determined and agreed upon by the Department and the Contractor.

74.37.6.2.4. Reference Amendment 11-2018: The Contractor shall provide training to Department staff or Department designees on new functionality prior to the implementation of the new functionality.

74.37.7. Reference Amendment 11-2018: Upon completion of the development of functionality in support of the Aerial Care and Case Management System, and prior to testing of the Aerial Care and Case Management System the Contractor shall provide a reasonable, agreed upon time frame with the Department and Department designees to test the system. If the Department identifies system defects, the Contractor shall correct system defects at no additional charge to the Department and allow Department staff or Department designees to test the system again until the Department provides approval in writing for the defect resolution of the system. The Department shall have the ability to request content-related changes to the system (i.e.: change the wording of a question or delete a question) and the Contractor shall make all requested changes at no additional charge to the Department. Requirement changes that impact coding development will need to be included in an additional statement of work at an additional cost.

74.37.8. Reference Amendment 11-2018: Contractor shall implement the Aerial Care and Case Management System and establish the three (3) Pilot Program environments: 1) Development, 2) User Acceptance Testing (UAT), and 3) Production. Contractor shall provide any required services and maintenance to all three (3) environments to support all development, testing, and production activities.

74.37.9. Reference Amendment 11-2018: The Contractor shall conduct testing to ensure the Aerial Care and Case Management System is working appropriately prior to permitting the Department to conduct testing.

74.37.10. Reference Amendment 11-2018: The Contractor shall provide support for the Department's UAT of the Aerial Care and Case Management System, as described in the Colorado interChange and Services Test Plan.

74.37.11. Reference Amendment 11-2018: The Contractor shall load the Assessments and Support Plan modules that have been reviewed and approved as part of the TEFT scope of work into the system. The Contractor shall load the Assessments and Support Plan modules before the Pilot Program begins.

74.37.12. Reference Amendment 11-2018: Contractor shall provide access to the data captured in the system as the Assessments and Support Plans are used in the Pilot environment. Contractor shall work with the Department to utilize the data in the Pilot Program to make modifications to the Assessments that will increase their effectiveness and reporting capabilities. The Department wants to achieve the following outcomes from

its use of the Long-Term Services and Support (“LTSS”) Assessment and Support Plan Pilot Program:

- 74.37.12.1. Reference Amendment 11-2018: The Department will establish reliability of the Assessment.
- 74.37.12.2. Reference Amendment 11-2018: The Department will complete a time study of how long the Assessment process takes from beginning through to completion.
- 74.37.12.3. Reference Amendment 11-2018: The Department will establish new eligibility thresholds for LTSS programs.
- 74.37.13. Reference Amendment 11-2018: The system shall provide the ability to produce report on the client’s ADL’s and IADL’s (Activities of Daily Living and Instrumental Activities of Daily Living), and provide ad hoc and system reports including client level of care outcomes and functional status. Reports shall be capable of pulling all data fields from the Support Plan the system. The system shall allow singular client reports or batch-client reports, including reports for case managers, agency staff and state staff for the time, number of units and costs associated with completing case management activities.
 - 74.37.13.1. Reference Amendment 11-2018: The Contractor shall provide, at a minimum, the following reports:
 - 74.37.13.1.1. Reference Amendment 11-2018: Primary Assessment Reports
 - 74.37.13.1.2. Reference Amendment 11-2018: History and Trending Reports
 - 74.37.13.1.3. Reference Amendment 11-2018: Profile Reports
 - 74.37.13.1.4. Reference Amendment 11-2018: Quality Reports
 - 74.37.13.1.5. Reference Amendment 11-2018: Secondary Assessment Reports
 - 74.37.13.1.6. Reference Amendment 11-2018: Quality Reports
 - 74.37.13.1.7. Reference Amendment 11-2018: Primary Operational Reports
 - 74.37.13.1.8. Reference Amendment 11-2018: Inventory Reports
 - 74.37.13.1.9. Reference Amendment 11-2018: Plan of Care Reports
 - 74.37.13.1.10. Reference Amendment 11-2018: Program Reports
 - 74.37.13.1.11. Reference Amendment 11-2018: Questions Reports
 - 74.37.13.1.12. Reference Amendment 11-2018: Productivity Reports
 - 74.37.13.1.13. Reference Amendment 11-2018: Tasks Status Reports
 - 74.37.13.1.14. Reference Amendment 11-2018: Secondary Operational Reports
 - 74.37.13.1.15. Reference Amendment 11-2018: Inventory Reports
 - 74.37.13.1.16. Reference Amendment 11-2018: Productivity Reports
- 74.37.14. Reference Amendment 11-2018: The Contractor shall develop the Aerial Care and Case Management System utilizing an open application programming interface (“API”) as supported by the Aerial architecture and Department data systems.

- 74.37.14.1. Reference Amendment 11-2018: The system format shall allow for interoperability. The system shall allow Universal Assessment Process (UAP), Colorado Choice Transitions (CCT), and Support Plan case notes with interoperable data capture and transfer capabilities.
- 74.37.15. Reference Amendment 11-2018: The Department will provide to the Contractor two (2) sets of algorithms: 1) Level of Care (Functional Eligibility Determination) based on the new assessment (Pilot Program); and 2) Support Plan Recommendations based on the Aerial Care and Case Management System and used to inform the Support Plan (Pilot Program). The Contractor shall ensure that the algorithms are translated into the Aerial Care and Case Management System and that they function correctly, as determined by the Department.
- 74.37.15.1. Reference Amendment 11-2018: The Contractor shall implement and manage an Aerial Care and Case Management System and process to provide support to users of the Aerial Care and Case Management System during the Pilot Program.
- 74.37.15.2. Reference Amendment 11-2018: The Contractor shall work with the Department to determine the testing period for the Pilot Program. The Contractor shall work with the Department to establish the time periods in which the Department may test the Aerial Care and Case Management System. If the Department requests changes, the Contractor shall make the changes requested by the Department and allow the Department staff and Department designees to test the system again.
- 74.37.15.3. Reference Amendment 11-2018: The actual dates for the timeline of the Pilot Program is dependent on the execution date of this Amendment and will be determined upon the execution of this Amendment; however, the anticipated timeline for the Pilot Project is as follows:
- 74.37.15.3.1. Reference Amendment 11-2018: Three (3) months: Development of the Aerial Care and Case Management System.
- 74.37.15.3.2. Reference Amendment 11-2018: Three (3) months: Pilot Program testing and Support Plan development.
- 74.37.15.3.3. Reference Amendment 11-2018: Two (2) months: Analysis and final system changes completed to assessments and Support Plan Pilot Program testing.
- 74.37.15.3.4. Reference Amendment 11-2018: Notwithstanding the estimated timelines in Sections 74.37.15.3.1. through 74.37.15.3.3., the development of the Assessment and Support Plan functionality in the Aerial Care and Case Management system and Pilot Program completion shall be completed no later than March 31, 2019.
- 74.37.15.4. Reference Amendment 11-2018: The Contractor shall rebuild the existing case management modules that exist in Axis Point in Aerial at no cost to the Department based on the system changes delivered in SO APH1152016-W that were specified, delivered and accepted by the Department in 2016, described therein as 1) Program Management/Wait listing, 2) Shared Case Security, and 3) Support for Pre-Admission Screening and Resident Reviews (PASRR), will be available in the new Aerial upgrade with no added costs. The existing case management modules include Critical Incident Report System (CIRS), Log Notes, Support Plan and Intake.

- 74.37.15.5. Reference Amendment 11-2018: The Contractor shall propose and follow a Requirements Definition, Validation, and Change Management Plan process that will be submitted to the Department within five (5) Business Days of the execution of this Amendment to lead the Department through the requirements validation and design processes. The Department shall have five (5) Business Days to approve or reject the process. The Contractor shall then have three (3) Business Days to provide the final process.
- 74.37.16. Reference Amendment 11-2018: Automation of the resource allocation approach, Aerial Care and Case Management System Rollout Phase, and the Statewide Rollout Phase will be addressed in a future contract amendment.
- 74.37.17 Reference Amendment 11-2018: The Contractor shall conduct a demonstration of the care planning functionality within Aerial at an agreed upon date and frequency with the Department.

C. **Exhibit E, COMPENSATION AND QUALITY MAINTENANCE PAYMENTS, Section 1, BASE COMPENSATION AND PAYMENTS, Subsection 1.1.5 is hereby added as follows:**

1.1.5. Reference Amendment 11-2018: The Contractor shall be paid for work described under Contract Amendment No. 11 by submitting an invoice on a monthly basis for the actual hours worked per position title at the hourly rate stated in the following table.

POSITION TITLE	HOURLY RATE
CONTRACTOR'S STAFF	
Configuration Staff	\$127.68
Customization Staff	\$138.29
Testing and Validation Staff	\$98.93
Business Analyst Staff	\$127.48
Technical Writing and Documentation Staff	\$78.57
Project Management Staff	\$153.57
SUBCONTRACTOR'S STAFF	
Medecision	\$267.86

Payment will be made upon State approval and acceptance of the Contractor's monthly invoices.

The total amount invoiced for the work describe under Contract Amendment No. 11 shall in no circumstance exceed \$1,402,149.00.

7. **START DATE**

This Amendment shall take effect on its Effective Date.

8. ORDER OF PRECEDENCE

Except for the Special Provisions and the HIPAA Business Associates Addendum in the event of any conflict, inconsistency, variance, or contradiction between the provisions of this Amendment and any of the provisions of the Contract, the provisions of this Amendment shall in all respects supersede, govern, and control. The most recent version of the Special Provisions incorporated into the Contract or any amendment shall always control other provisions in the Contract or any amendments.

9. AVAILABLE FUNDS

Financial obligations of the State payable after the current fiscal year are contingent upon funds for that purpose being appropriated, budgeted, or otherwise made available to the Department by the federal government, state government and/or grantor.

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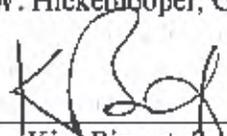
THE PARTIES HERETO HAVE EXECUTED THIS AMENDMENT

Persons signing for Contractor hereby swear and affirm that they are authorized to act on Contractor's behalf and acknowledge that the State is relying on their representations to that effect.

CONTRACTOR:
DXC Technology Services LLC

STATE OF COLORADO:
John W. Hickenlooper, Governor

By: 
Signature of Authorized Officer

By: 
Kim Bimestefan
Executive Director
Department of Health Care Policy and
Financing

Date: 7/17/18

Date: 7/24/18

CAROL PANGBORN
Printed Name of Authorized Officer

LEGAL REVIEW:
Cynthia H. Coffman, Attorney General

ACCOUNT EXECUTIVE
Printed Title of Authorized Officer

By: N/A
Date: _____

STATE OF COLORADO
John W. Hickenlooper, GOVERNOR
Governor's Office of Information Technology
Suma Nallapati, Secretary of Technology and State Chief Information Officer

By: N/A
Brenda Berlin, Deputy Chief Information Officer and Chief Financial Officer

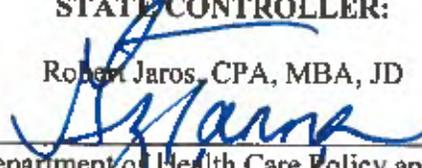
Date: _____

ALL CONTRACTS REQUIRE APPROVAL BY THE STATE CONTROLLER

CRS §24-30-202 requires the State Controller to approve all State Contracts. This Contract is not valid until signed and dated below by the State Controller or delegate. Contractor is not authorized to begin performance until such time. If Contractor begins performing prior thereto, the State of Colorado is not obligated to pay Contractor for such performance or for any goods and/or services provided hereunder.

STATE CONTROLLER:

Robert Jaros, CPA, MBA, JD

By: 
Department of Health Care Policy and Financing

Date: 9/25/18

