



Report to the Senate and House Standing Committees on Appropriations and General Government

Required by Section 809 of Public Act 252 of 2014

Prepared for the
Senate and House Standing Committees on
Appropriations and General Government

Department of Technology, Management and Budget
State Administrative Board

06-02-2015

Ad Board Date: 6/2/2015 (ver. 1)

**STATE ADMINISTRATIVE BOARD
 CONTRACT CHANGE RECOMMENDATION
 DEPARTMENT OF TECHNOLOGY, MANAGEMENT AND BUDGET
 PROCUREMENT**

- AGENCY SUBMITTAL** Statutory Authority per MCL _____ (state MCL Section #)
 Standard Delegation via Ad Guide _____ (state Ad Guide #)
 Special Delegation letter (submit with bid tab)
 Purchasing Alliance Approval Form (submit with bid tab)

DTMB PROCUREMENT SUBMITTAL

CONTRACT DESCRIPTION: 071B1300256; add funding for Medicaid Compliance Program (MCP) Release 6C requirements; Bridges Operation and Maintenance Services; Department of Technology, Management and Budget (DTMB) for the Department of Human Services (DHS).

CHANGE NOTICE NUMBER: 9

CONTRACTOR: Deloitte Consulting LLP, Detroit, MI
MICHIGAN BUSINESS:
INCREASE: \$2,047,500.00

Check if request is to exercise Contract option(s).
 Requested time period and length: _____

Check if request is to extend Contract (no option in base).
 Time period of extension and length: _____

Check if extension is beyond Contract option year(s).
 Time period of extension and length: _____

Check if this is an Extended Purchasing Contract

ORIGINAL CONTRACT: # of Base Years: 4, Four Years **Beginning Value:** \$61,217,820.00

Start Date and End Date: February 11, 2011 through February 10, 2015

CURRENT CONTRACT VALUE: \$94,824,532.00

NEW TOTAL CONTRACT VALUE: \$96,872,032.00

PREVIOUS OPTION YEARS/EXTENSIONS:

| | PERIOD: (Option/Extension start date – end date and state length) | SAB APPROVAL DATE: | \$ VALUE: |
|---|--|-----------------------------------|---------------------|
| <input checked="" type="checkbox"/> Option 1 CN # 8 | 2/11/2015 – 2/10/2016 | 1/13/2015 | \$13,186,985 |
| <input type="checkbox"/> Option 2 CN # | | | |
| <input type="checkbox"/> Option 3 CN # | | | |
| <input type="checkbox"/> Extension CN # | | | |
| | | TOTAL | \$13,186,985 |

PREVIOUS CHANGES NOT LISTED ABOVE IN THE OPTIONS/EXTENSIONS TABLE:

| | TYPE OF CHANGE: | SAB APPROVAL DATE: (if applicable) | VALUE OF CHANGE: |
|-----------------|------------------------|--|-------------------------|
| First CN | FEIN correction | | \$ 0 |
| Last CN | | | |

Total number of processed changes to time, scope, and/or dollars: 7

| FUNDING SOURCE: | PERCENTAGE: | Indicate RESTRICTED FUND name or COMMENTS: |
|------------------------|--------------------|---|
| State GF | 10% | |
| Federal | 90% | |

SHOW THE BREAKDOWN OF THIS INCREASE BY FISCAL YEAR(S):

| FY: | DOLLAR AMOUNT: |
|------------|-----------------------|
| 2015 | \$2,047,500 |

PURCHASE JUSTIFICATION:

Description of Product/Service Modification Requested and Process Explanation: This request is to add funding and services to support enhancements and fixes to the Bridges-MIBridges system. Contractor will provide the following services: requirements gathering/definition, project management, development, testing, and implementation activities.

Purpose/Business Case of Amendment or Extension, and Expected Outcomes:

This amendment is allowed in the current contract language. During contract initiation and planning, the parties defined the requirements and assigned them to releases in the Medicaid Compliance Program (MCP) Bridges-MiBridges Project Charter. This amendment adds the services supporting the system enhancements the parties defined as MCP Release 6C.

Risk Assessment:

Failure to implement these changes would cause the system to not meet federal guidelines.

PRICE CLAUSE FROM CONTRACT: Firm fixed

CS-138 # PROVIDED FOR SERVICES: 084S3200003

COST REDUCTION/SAVINGS CONSIDERATIONS: N/A

FOR IT CONTRACTS ONLY - Check box if adding more than \$500,000.00 for software development, computer hardware acquisition or quality assurance.

RECOVERY ACT FUNDS:

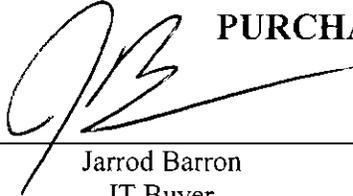
| Percent of Total | % | Amount | \$ |
|-------------------------|----------|---------------|-----------|
| | | | |

AGENCY APPROVALS

| |
|--|
| |
| Authorized Agency Representative (printed) |
| |
| Authorized Agency Representative Signature |

| |
|---------------------|
| Return Information: |
| Contact Name: |
| ID Mail: |
| Phone No.: |
| e-Mail: |

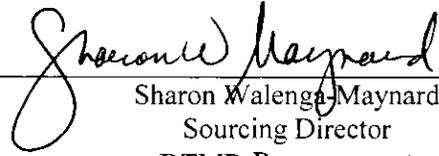
PURCHASING APPROVALS



Jarrod Barron
IT Buyer



Bill Pemble
IT Division Director



Sharon Walenga-Maynard
Sourcing Director
DTMB-Procurement