

STATE OF MICHIGAN
DEPARTMENT OF TECHNOLOGY, MANAGEMENT & BUDGET
PROCUREMENT

525 W. ALLEGAN STREET
 LANSING, MI 48333

P.O. BOX 30026
 LANSING, MI 48399

CHANGE NOTICE NO. 1
 to
 CONTRACT NO. 511B5500006
 between
 THE STATE OF MICHIGAN
 and

NAME & ADDRESS OF CONTRACTOR	PRIMARY CONTACT	EMAIL
Cross Country Staffing, Inc. 6551 Park of Commerce Blvd. Boca Raton, FL 33487	Todd Kasten	tkasten@crosscountry.com
	PHONE	CONTRACTOR'S TAX ID/NO. (LAST FOUR DIGITS ONLY)
	(972) 448-4526	3081

STATE CONTACTS	AGENCY	NAME	PHONE	EMAIL
PROGRAM MANAGER / CCI	GRHV	John Carlson	(616) 364-5355	CarlsonJ1@michigan.gov
CONTRACT ADMINISTRATOR	GRHV	Kerri Bielski	(616) 364-5327	BielskiK@michigan.gov

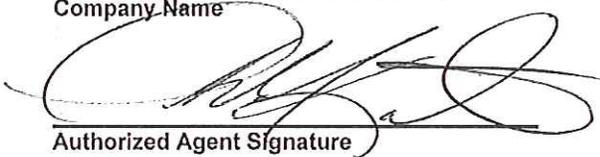
CONTRACT SUMMARY			
DESCRIPTION: Back-up Pharmacy Services at the Grand Rapids Home for Veterans			
INITIAL EFFECTIVE DATE	INITIAL EXPIRATION DATE	INITIAL AVAILABLE OPTIONS	EXPIRATION DATE BEFORE CHANGE(S) NOTED BELOW
July 15, 2013	September 30, 2016	Two 1-year options	September 30, 2016
PAYMENT TERMS		DELIVERY TIMEFRAME	
2%15/Net45		N/A	
ALTERNATE PAYMENT OPTIONS			EXTENDED PURCHASING
<input type="checkbox"/> P-card <input type="checkbox"/> Direct Voucher (DV) <input type="checkbox"/> Other			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
MINIMUM DELIVERY REQUIREMENTS			
N/A			

DESCRIPTION OF CHANGE NOTICE				
EXERCISE OPTION?	LENGTH OF OPTION	EXERCISE EXTENSION?	LENGTH OF EXTENSION	REVISED EXP. DATE
<input checked="" type="checkbox"/>	1-Year	<input type="checkbox"/>		September 30, 2017
CURRENT VALUE		VALUE OF CHANGE NOTICE	ESTIMATED AGGREGATE CONTRACT VALUE	
\$76,410.57		\$78,956.8	\$155,367.37	
DESCRIPTION: The nature of this change notice is to exercise option year 1 of 2; extend the contract from September 30, 2016 through September 30, 2017, and increase the contract value for an additional year of service.				

FOR THE CONTRACTOR:

Cross Country Staffing, Inc.

Company Name



Authorized Agent Signature

Todd Kasten – VP National Accounts

Authorized Agent (Print or Type)

June 30th, 2016

Date

FOR THE STATE:



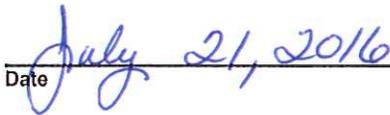
Signature

Kimberly Graham, Buyer Manager

Name & Title

Department of Military and Veterans Affairs

Agency



Date

STATE OF MICHIGAN
DEPARTMENT OF TECHNOLOGY, MANAGEMENT & BUDGET
PROCUREMENT

825 W. ALLEGAN STREET
 LANSING, MI 48933

P.O. BOX 30026
 LANSING, MI 48909

CHANGE NOTICE NO. 1
 to
 CONTRACT NO. 511B5500006
 between
 THE STATE OF MICHIGAN
 and

NAME & ADDRESS OF CONTRACTOR	PRIMARY CONTACT	EMAIL
Cross Country Staffing, Inc. 6551 Park of Commerce Blvd. Boca Raton, FL 33487	Todd Kasten	tkasten@crosscountry.com
	PHONE	CONTRACTOR'S TAX ID NO. (LAST FOUR DIGITS ONLY)
	(972) 448-4526	3081

STATE CONTACTS	AGENCY	NAME	PHONE	EMAIL
PROGRAM MANAGER / CCI	GRHV	John Carlson	(616) 364-5355	CarlsonJ1@michigan.gov
CONTRACT ADMINISTRATOR	GRHV	Kerri Bielski	(616) 364-5327	BielskiK@michigan.gov

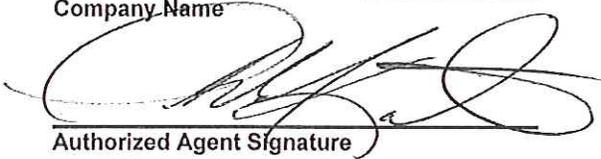
CONTRACT SUMMARY			
DESCRIPTION: Back-up Pharmacy Services at the Grand Rapids Home for Veterans			
INITIAL EFFECTIVE DATE	INITIAL EXPIRATION DATE	INITIAL AVAILABLE OPTIONS	EXPIRATION DATE BEFORE CHANGE(S) NOTED BELOW
July 15, 2013	September 30, 2016	Two 1-year options	September 30, 2016
PAYMENT TERMS		DELIVERY TIMEFRAME	
2%15/Net45		N/A	
ALTERNATE PAYMENT OPTIONS			EXTENDED PURCHASING
<input type="checkbox"/> P-card <input type="checkbox"/> Direct Voucher (DV) <input type="checkbox"/> Other			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
MINIMUM DELIVERY REQUIREMENTS			
N/A			

DESCRIPTION OF CHANGE NOTICE				
EXERCISE OPTION?	LENGTH OF OPTION	EXERCISE EXTENSION?	LENGTH OF EXTENSION	REVISED EXP. DATE
<input checked="" type="checkbox"/>	1-Year	<input type="checkbox"/>		September 30, 2017
CURRENT VALUE		VALUE OF CHANGE NOTICE	ESTIMATED AGGREGATE CONTRACT VALUE	
\$76,410.57		\$78,956.8	\$155,367.37	
DESCRIPTION: The nature of this change notice is to exercise option year 1 of 2; extend the contract from September 30, 2016 through September 30, 2017, and increase the contract value for an additional year of service.				

FOR THE CONTRACTOR:

Cross Country Staffing, Inc.

Company Name



Authorized Agent Signature

Todd Kasten – VP National Accounts

Authorized Agent (Print or Type)

June 30th, 2016

Date

FOR THE STATE:



Signature

Kimberly Graham, Buyer Manager

Name & Title

Department of Military and Veterans Affairs

Agency

July 21, 2016

Date



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF MILITARY & VETERANS AFFAIRS
LANSING

MG GREGORY J. VADNAIS
THE ADJUTANT GENERAL AND DIRECTOR

June 27, 2016

Cross Country Staffing, Inc.
6551 Park of Commerce Blvd
Boca Raton, FL 33487

Dear Vendor:

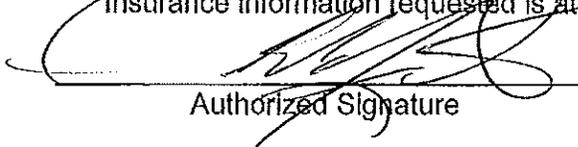
Contract #511B5500006 between your firm and the State of Michigan for Back-up Pharmacy Services with the State of Michigan, Department of Military and Veterans Affairs for services at the Grand Rapids Home for Veterans will expire on September 30, 2016. The State of Michigan is interested in extending the services until September 30, 2017.

If you accept this offer in accordance with the current terms, conditions, specifications, and current contract pricing, please check a response and sign below, then return this via email at BielskiK@michigan.gov or fax to me at (616)365-3804 by, July 18, 2016. Upon my receipt, a purchase order (PO) for this time period will be processed and a copy of the PO will be mailed to your company.

This Contract also requires that your company furnish to the DMVA, the original Certificate(s) of Insurance verifying liability coverage as specified in the terms and conditions. Please reference the contract number above and the buyer's name below on the insurance certificate.

If you have any questions, please feel free to contact me at (616) 364-5327. Thank you.

- Yes, an extension from October 1, 2016 to September 30, 2017 is acceptable according to the current pricing, specifications, terms and conditions. Insurance information requested is attached accordingly


Authorized Signature 6/30/2016
Date

Sincerely,

Kerri L. Bielski, Buyer
Grand Rapids Home for Veterans

STATE OF MICHIGAN
 DEPARTMENT OF MILITARY & VETERANS AFFAIRS
 GRAND RAPIDS HOME FOR VETERANS
 PURCHASING & CONTRACTS
 3000 MONROE AVENUE SE
 GRAND RAPIDS, MI 49505

CHANGE OF CONTRACTOR NAME AND OR TAX IDENTIFICATION NUMBER

CONTRACT NO. 511B3200035

hereafter referred as

CONTRACT NO. 511B5500006

between

THE STATE OF MICHIGAN

and

CURRENT NAME & ADDRESS OF CONTRACTOR:	PRIMARY CONTACT	EMAIL
Cross Country Staffing, Inc. 6551 Park of Commerce Blvd. Boca Raton, FL 33487	Kristina M. Pool	KPool@CrossCountry.com
	TELEPHONE	NEW CONTRACTOR #, MAIL CODE
	972-448-4526	XXXXXX3081, 000

PREVIOUS NAME & ADDRESS OF CONTRACTOR:	PRIMARY CONTACT	EMAIL
Medical Staffing Network Healthcare LLC 901 Yamato Road, Suite 110 Boca Raton, FL 33431-4415	Beth Bauer	bethbauer@msnhealth.com
	TELEPHONE	PREVIOUS CONTRACTOR #, MAIL CODE
	800-223-9230	XXXXXX9868, 000

DESCRIPTION OF CHANGE NOTICE:
<p>THE CONTRACTOR HAS NOTIFIED THE STATE OF MICHIGAN OF A CHANGE IN ITS BUSINESS NAME AND OR TAX IDENTIFICATION NUMBER. DUE TO THE INTERNAL SYSTEMS RELATED TO THE RELEASE OF CONTRACTOR PAYMENTS, A NEW CONTRACT NUMBER MUST BE ASSIGNED. THE NEW CONTRACT NUMBER IS 511B5500006. EXCEPT FOR THE NEWLY-ASSIGNED NUMBER, THE CONTRACT TERMS AND CONDITIONS REMAIN IN EFFECT.</p> <p>THIS CHANGE IS EFFECTIVE: DECEMBER 22, 2014</p>
<p>\$78,410.57 REMAINING ON CONTRACT # 511B3200035 TO BE TRANSFERRED TO CONTRACT # 511B5500006.</p>

STATE CONTACTS	AGENCY	NAME	PHONE	EMAIL
CONTRACT COMPLIANCE INSPECTOR:	DMVA-GRHV	John Carlson	616-364-5355	CarlsonJ1@michigan.gov
BUYER:	DMVA-GRHV	Kerri Bielski	616-364-5327	BielskiK@michigan.gov

CONTRACT SUMMARY:			
DESCRIPTION:			
Back-up Pharmacy Services – Grand Rapids Home for Veterans			
INITIAL TERM	EFFECTIVE DATE	INITIAL EXPIRATION DATE	AVAILABLE OPTIONS
Three Years	July 15, 2013	September 30, 2016	Two 1-Year Options
PAYMENT TERMS	F.O.B	SHIPPED	SHIPPED FROM
2%15/Net30	Delivered	N/A	N/A
ALTERNATE PAYMENT OPTIONS:			AVAILABLE TO MiDEAL PARTICIPANTS
<input type="checkbox"/> P-card <input type="checkbox"/> Direct Voucher (DV) <input type="checkbox"/> Other			<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
MINIMUM DELIVERY REQUIREMENTS:			
N/A			

FOR THE CONTRACTOR:

 Cross Country Staffing, Inc.

 Firm Name

 Authorized Agent Signature

 Authorized Agent (Print or Type)

 Date

FOR THE STATE:

 Signature
 Kimberly Graham, Buyer Manager

 Name/Title
 Dept. of Military & Veterans Affairs

 Enter Name of Agency

 Date