

**STATE OF MICHIGAN  
 DEPARTMENT OF MANAGEMENT AND BUDGET  
 PURCHASING OPERATIONS  
 P.O. BOX 30026, LANSING, MI 48909  
 OR  
 530 W. ALLEGAN, LANSING, MI 48933**

August 3, 2010

**CHANGE NOTICE NO. 8  
 TO  
 CONTRACT NO. 071B6200168  
 between  
 THE STATE OF MICHIGAN  
 and**

NAME & ADDRESS OF CONTRACTOR / VENDOR <b>CLIENT NETWORK SERVICES, INC. (CNSI)</b> <b>702 King Farm Boulevard, 2<sup>nd</sup> Floor</b> <b>Rockville, MD 20850</b>  Email: <a href="mailto:chatterjee@cns-inc.com">chatterjee@cns-inc.com</a>	VENDOR TELEPHONE <b>(301) 634-4600</b>
	VENDOR NUMBER/MAIL CODE
	BUYER/CA Steve Motz Tel: <b>(517) 241-3215</b>
Contract Compliance Inspector: Jay Slaughter <b>Medicaid Services Administration</b>	
CONTRACT PERIOD: From: <b>03/14/2006</b> To: <b>12/31/2012</b>	
TERMS: Enclosed	SHIPMENT <b>N/A</b>
F.O.B. <b>N/A</b>	SHIPPED FROM <b>N/A</b>
MINIMUM DELIVERY REQUIREMENTS: <b>N/A</b>	
MISCELLANEOUS INFORMATION:	

**NATURE OF CHANGE(S):**

Effective immediately, this contract is hereby **INCREASED** by \$18,600,000.00 and **EXTENDED** to December 31, 2012 per the attached document for the following project:

**“CHAMPS” MMIS GAP ANALYSIS AND IMPLEMENTATION PROPOSAL FOR HIPAA 5010, ICD 10 CODE SET EXTENSIBILITY AND ELECTRONIC HEALTH RECORD INCENTIVE PROGRAM ADMINISTRATION AND COORDINATION.**

This project will be paid on a fixed contract amount that includes a \$1.3 million project discount. The base contract blended rate remains at \$137.14.

All other terms and conditions, specifications, and pricing remain the same.

Please Note: Buyer has been changed to Steve Motz, [motzs@michigan.gov](mailto:motzs@michigan.gov)

**AUTHORITY/REASON:**

Per agency, DTMB and vendor concurrence and per the approval of the 7/20/2010 State Administrative Board.

**INCREASE: \$18,600,000.00**

**TOTAL REVISED ESTIMATED CONTRACT VALUE: \$129,956,765.00**

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**FOR THE VENDOR:**

\_\_\_\_\_  
Firm Name

\_\_\_\_\_  
Authorized Agent Signature

\_\_\_\_\_  
Authorized Agent (Print or Type)

\_\_\_\_\_  
Date

**FOR THE STATE:**

\_\_\_\_\_  
Signature  
**Steve Motz, Buyer**

\_\_\_\_\_  
Name/Title  
**IT Division**

\_\_\_\_\_  
Division

\_\_\_\_\_  
Date

