Please complete this form following the steps listed below:

1) Complete this form electronically and sign it with your electronic signature.

2) Upload this completed document to the Response Documents area of the RFP, no later than Friday, June 14, 2024, at 5 p.m. CT (6 p.m. ET).

**Minimum Bidder Requirements:**

Only bidders that meet the following minimum requirements will be considered. Bids from companies not meeting all the minimum requirements will not be considered by MCHCP for this contract.

- The bidder must have at least five years’ experience in converting and standardizing raw claim, encounter, health assessment, dental, vision, and eligibility data to provide accessible healthcare management information. The contractor must have experience in accepting data from the following plan types: Medical (PPO, HDHP, and Medicare Advantage), PBM, dental, vision, on-site health center, and health assessment vendors.

- The bidder shall currently be providing health care decision support services to at least 2 million (2,000,000) total covered lives in employer organizations.

- The bidder must currently be providing the same or similar tool being proposed to MCHCP to at least three large employers, two of which must have more than 40,000 subscribers and one which must have at least 50,000 subscribers. One of these employers must be a public sector state employer.

- The bidder must offer this product in such a manner that MCHCP has no responsibility for the database, the decision support software, or the technical infrastructure and associated processes and procedures.

- The database must be accessible through the web and must be secure.

- The bidder must commit to maintain HIPAA compliance for the life of the contract and as long as the data is maintained by the contractor. The bidder must comply with all state and federal laws and regulations concerning data confidentiality and security.

- Bidders shall not be permitted to increase their proposed costs after submission except with agreement by MCHCP.
All deadlines outlined are necessary to meet the timeline for this contract award. MCHCP may reject any submissions after respective deadlines have passed. All bidder documents and complete proposals must be received by the proposal deadline of July 2, 2024, as outlined in the timeline of events for this RFP. Late proposals will not be accepted. MCHCP reserves the right to modify a deadline or extend a deadline for all bidders at its discretion.

This form will serve as confirmation that our organization has received the MCHCP Decision Support System (DSS) RFP.

☐ We intend to submit a complete proposal.

☐ We decline to submit a proposal for the following reason(s):

______________________________
Name of Organization

______________________________
Signature

______________________________
Title

______________________________
Date
EXHIBIT A-2
BIDDER’S PROPOSED MODIFICATIONS TO THE RFP
2025 MCHCP DECISION SUPPORT SYSTEM RFP

The bidder must utilize this document to clearly identify by subsection number any exceptions to the provisions of the Request for Proposal (RFP) and include an explanation as to why the bidder cannot comply with the specific provision. Any desired modifications should be kept as succinct and brief as possible. Failure to confirm acceptance of the mandatory contract provisions will result in the bidder being eliminated from further consideration as its proposal will be considered non-compliant.

Any modification proposed shall be deemed accepted as a modification of the RFP if and only if this proposed modification exhibit is countersigned by an authorized MCHCP representative on or before the effective date of the contract awarded under this RFP.

________________________________________________________
Name/Title of Individual

________________________________________________________
Organization

________________________________________________________
Signature

________________________________________________________
Date

On behalf of MCHCP, the undersigned individual hereby attests that he or she is authorized to enter into this Agreement and agrees to all the terms specified herein.

________________________________________________________
Executive Director
Missouri Consolidated Health Care Plan

Date

Missouri Consolidated Health Care Plan
2025 Decision Support System RFP
RELEASED: June 10, 2024

Exhibit A-2
Page 1 of 1
Please complete this form following the steps listed below:

1) Confirm that you have read and understand all of MCHCP’s instructions included in the Optavise application.
   - Yes
   - No

2) Bidders are required to submit a firm, fixed price for CY2025 and not-to-exceed prices for CY2026 through CY2029. Prices will be subject to best and final offer which may result from subsequent negotiation. Pricing for 2030, 2031 and 2032 will be negotiated. You are advised to review all proposal submission requirements stated in the original RFP and in any amendments, thereto. Confirm that you hereby agree to provide the services and/or items at the prices quoted, pursuant to the requirements of the RFP, including any and all RFP amendments.
   - Yes
   - No

3) Completion of the signature block below constitutes your company’s acceptance of all terms and conditions of the original RFP plus any and all RFP amendments, and confirmation that all information included in this response is truthful and accurate to the best of your knowledge. You also hereby expressly affirm that you have the requisite authority to execute this Agreement on behalf of the Vendor and to bind such respective party to the terms and conditions set forth herein.

__________________________________________
Name/Title of Individual

__________________________________________
Organization

__________________________________________
Signature

__________________________________________
Date
EXHIBIT A-4

CONTRACTOR CERTIFICATION
OF COMPLIANCE WITH FEDERAL EMPLOYMENT LAWS
2025 MCHCP DECISION SUPPORT SYSTEM RFP

______________________________ (hereafter referred to as “Contractor”) hereby certifies that all of Contractor’s employees and its subcontractors’ employees assigned to perform services for Missouri Consolidated Health Care Plan (“MCHCP”) and/or its members are eligible to work in the United States in accordance with federal law.

Contractor acknowledges that MCHCP is entitled to receive all requested information, records, books, forms, and any other documentation (“requested data”) in order to determine if Contractor is in compliance with federal law concerning eligibility to work in the United States and to verify the accuracy of such requested data. Contractor further agrees to fully cooperate with MCHCP in its audit of such subject matter.

Contractor also hereby acknowledges that MCHCP may declare Contractor has breached its Contract if MCHCP has reasonable cause to believe that Contractor or its subcontractors knowingly employed individuals not eligible to work in the United States. MCHCP may then lawfully and immediately terminate its Contract with Contractor without any penalty to MCHCP and may suspend or debar Contractor from doing any further business with MCHCP.

THE UNDERSIGNED PERSON REPRESENTS AND WARRANTS THAT HE/SHE IS DULY AUTHORIZED TO SIGN THIS DOCUMENT AND BIND THE CONTRACTOR TO SUCH CERTIFICATION.

______________________________
Name/Title of Individual

______________________________
Organization

______________________________
Signature

______________________________
Date
Exhibit A-5

Documentation of Intent to Participate
2025 MCHP Decision Support System RFP

If the bidder is proposing to include the participation of a Minority Business Enterprise/Women Business Enterprise (MBE/WBE) in the provision of the products/services required in the RFP, the bidder must either provide a recently dated letter of intent, signed and dated no earlier than the RFP issuance date, from each organization documenting the following information, or complete and provide this Exhibit with the bidder’s proposal.

~ Copy This Form For Each Organization Proposed ~

Bidder Name: __________________________________________________________

This Section To Be Completed by Participating Organization:

By completing and signing this form, the undersigned hereby confirms the intent of the named participating organization to provide the products/services identified herein for the bidder identified above.

Name of Organization: __________________________________________________
(Name of MBE, WBE)

Contact Name: __________________________ Email: _______________________

Address: _______________________________ Phone #: _______________________

City: _________________________________ Fax #: _________________________

State/Zip: _____________________________ Certification # __________________

Type of Organization (MBE or WBE): Certification Expiration Date: __________________

(or attach copy of certification)

PRODUCTS/SERVICES PARTICIPATING ORGANIZATION AGREED TO PROVIDE

Describe the products/services you (as the participating organization) have agreed to provide:

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

Authorized Signature: ________________________________________________

Authorized Signature of Participating Organization (MBE, WBE) __________________________ Date (Dated no earlier than the RFP issuance date) ____________
This Contract is entered into by and between Missouri Consolidated Health Care Plan ("MCHCP") and DSS Contractor, (hereinafter “DSS” or “Contractor”) for the express purpose of providing a decision support system to MCHCP, pursuant to MCHCP’s Decision Support System Request for Proposal released June 10, 2024 (hereinafter “RFP”).

1. GENERAL TERMS AND CONDITIONS

1.1 Term of Contract and Costs of Services: The term of this Contract is for a period of three (3) years from January 1, 2025, through December 31, 2027. This Contract may be renewed for five (5) additional one-year periods at the sole option of the MCHCP Board of Trustees. All prices are subject to best and final offer which may result from subsequent negotiation.

1.2 Contract Documents: This Contract and following documents, attached hereto and herby incorporated herein by reference as if fully set forth herein, constitute the full and complete Contract and, in the event of conflict in terms of language among the documents, shall be given precedence in the following order:

   a. Any future written and duly executed renewal proposals or amendments to this Contract;

   b. This written Contract signed by the parties;

   c. The following Exhibits listed in this subsection below and attached hereto, the substance of which are based on final completed exhibits or attachments required and submitted by DSS in response to the RFP and finalist negotiations:
      i. Exhibit 1 Pricing Pages
      ii. Exhibit 2 Business Associate Agreement
      iii. Exhibit 3 Confirmation Document
      iv. Exhibit 4 Performance Guarantees
      v. Exhibit 5 Certification of Compliance with State and Federal Employment Laws

   d. The original RFP, including any amendments, the mandatory terms of which are deemed accepted and confirmed by DSS as evidenced by DSS’s affirmative confirmations and representations required by and in accordance with the bidder response requirements described throughout the RFP.

Any exhibits or attachments voluntarily offered, proposed, or produced as evidence of DSS’s ability and willingness to provide more or different services not required by the RFP that are not specifically described in this Section or otherwise not included elsewhere in the Contract documents are excluded from the terms of this Contract unless subsequently added by the parties in the form of a written and executed amendment to this Contract.

1.3 Integration: This Contract, in its final composite form, shall represent the entire agreement between the parties and shall supersede all prior negotiations, representations or
agreements, either written or oral, between the parties relating to the subject matter hereof. This Contract between the parties shall be independent of and have no effect on any other contracts of either party.

1.4 **Amendments to this Contract:** This Contract shall be modified only by the written agreement of the parties. No alteration or variation in terms and conditions of the Contract shall be valid unless made in writing and signed by the parties. Every amendment shall specify the date on which its provisions shall be effective.

No agent, representative, employee or officer of either MCHCP or DSS has authority to make, or has made, any statement, agreement or representation, oral or written, in connection with this Contract, which in any way can be deemed to modify, add to or detract from, or otherwise change or alter its terms and conditions. No negotiations between the parties, nor any custom or usage, shall be permitted to modify or contradict any of the terms and conditions of this Contract.

1.5 **Drafting Conventions and Definitions:** Whenever the following words and expressions appear in this Contract, any amendment thereto, or the RFP document, the definition or meaning described below shall apply:

- **“Amendment”** means a written, official modification to the RFP or to this Contract.
- **“May”** means permissible but not required.
- **“Must”** means that a certain feature, component, or action is a mandatory condition. Failure to provide or comply may result in a breach.
- **“Request for Proposal” or “RFP”** means the solicitation document issued by MCHCP to potential bidders for the purchase of services as described in the document. The definition includes Exhibits, Attachments, and Amendments thereto.
- **“Shall”** has the same meaning as the word must.
- **“Should”** means desirable but not mandatory.
- The terms “include,” “includes,” and “including” are terms of inclusion, and where used in this Contract, are deemed to be followed by the words “without limitation”.

1.6 **Notices:** Unless otherwise expressly provided otherwise, all notices, demands, requests, approvals, instructions, consents or other communications (collectively "notices") which may be required or desired to be given by either party to the other during the course of this contract shall be in writing and shall be made by personal delivery, by prepaid overnight delivery, by United States mail postage prepaid, or transmitted by email to an authorized employee of the other party or to any other persons as may be designated by written notice from one party to the other. Notices to MCHCP shall be addressed as follows: Missouri Consolidated Health Care Plan, ATTN: Executive Director, P.O. Box 104355, Jefferson City, MO 65110-4355. Notices to DSS shall be addressed as follows: XXXXXXX.

1.7 **Headings:** The article, section, paragraph, or exhibit headings or captions in this Contract are for reference and convenience only and may not be considered in the interpretation of this
Contract. Such headings or captions do not define, describe, extend, or limit the scope or intent of this Contract.

1.8 **Severability:** If any provision of this Contract is determined by a court of competent jurisdiction to be invalid, unenforceable, or contrary to law, such determination shall not affect the legality or validity of any other provisions. The illegal or invalid provision will be deemed stricken and deleted to the same extent and effect as if it were never incorporated into this Contract, but all other provisions will remain in full force and effect.

1.9 **Inducements:** In making the award of this Contract, MCHCP relies on DSS’s assurances of the following:

- DSS has experience in converting and standardizing raw claims data and integrating it with employer enrollment data in order to provide accessible healthcare management information.

- DSS, including its subcontractors, has the skills, qualifications, expertise, financial resources and experience necessary to perform the services described in the RFP, DSS’s proposal, and this Contract, in an efficient, cost-effective manner, with a high degree of quality and responsiveness, and has performed similar services for other public or private entities.

- DSS has thoroughly reviewed, analyzed, and understood the RFP, has timely raised all questions or objections to the RFP, and has had the opportunity to review and fully understand MCHCP’s current offerings and operating environment for the activities that are the subject of this Contract and the needs and requirements of MCHCP during the contract term.

- DSS has had the opportunity to review and fully understand MCHCP’s stated objectives in entering into this Contract and, based upon such review and understanding, DSS currently has the capability to perform in accordance with the terms and conditions of this Contract.

Accordingly, on the basis of the terms and conditions of this Contract, MCHCP desires to engage DSS to perform the services described in this Contract under the terms and conditions set forth in this Contract.

1.10 **Industry Standards:** If not otherwise provided, materials or work called for in this Contract shall be furnished and performed in accordance with best established practice and standards recognized by the contracted industry and comply with all codes and regulations which shall apply.

1.11 **Force Majeure:** Neither party will incur any liability to the other if its performance of any obligation under this Contract is prevented or delayed by causes beyond its control and without the fault or negligence of either party. Causes beyond a party’s control may include, but aren’t limited to, acts of God or war, changes in controlling law, regulations, orders or the requirements of any governmental entity, severe weather conditions, civil disorders, natural disasters, fire, epidemics and quarantines, and strikes other than by DSS’s or its subcontractors’ employees.
1.12 **Breach and Waiver:** Waiver or any breach of any Contract term or condition shall not be deemed a waiver of any prior or subsequent breach. No Contract term or condition shall be held to be waived, modified, or deleted except by a written instrument signed by the parties. If any Contract term or condition or application thereof to any person(s) or circumstances is held invalid, such invalidity shall not affect other terms, condition or application. To this end, the Contract terms and conditions are severable.

1.13 **Independent Contractor:** DSS represents itself to be an independent contractor offering such services to the general public and shall not represent itself or its employees to be an employee of MCHCP. Therefore, DSS hereby assumes all legal and financial responsibility for taxes, FICA, employee fringe benefits, worker's compensation, employee insurance, minimum wage requirements, overtime, etc. and agrees to indemnify, save, and hold MCHCP, its officers, agents, and employees, harmless from and against, any and all loss; cost (including attorney fees); and damage of any kind related to such matters. DSS assumes sole and full responsibility for its acts and the acts of its personnel.

1.14 **Relationship of the Parties:** This Contract does not create a partnership, franchise, joint venture, agency, or employment relationship between the parties.

1.15 **No Implied Authority:** The authority delegated to DSS by MCHCP is limited to the terms of this Contract. MCHCP is a statutorily created body corporate multi-employer group health plan and trust fund designated by the Missouri Legislature to administer health care services to eligible State of Missouri and public entity employees, and no other agency or entity may grant DSS any authority related to this Contract except as authorized in writing by MCHCP. DSS may not rely upon implied authority, and specifically is not delegated authority under this Contract to:

- Make public policy;
- Promulgate, amend, or disregard administrative regulations or program policy decisions made by MCHCP; and/or
- Unilaterally communicate or negotiate with any federal or state agency, the Missouri Legislature, or any MCHCP vendor on behalf of MCHCP regarding the services included within this Contract.

1.16 **Third Party Beneficiaries:** This Contract shall not be construed as providing an enforceable right to any third party, except as provided herein.

1.17 **Injunction:** Should MCHCP be prevented or enjoined from proceeding with this Contract before or after contract execution by reason of any litigation or other reason beyond the control of MCHCP, DSS shall not be entitled to make or assess claim for damage by reason of said delay.

1.18 **Statutes:** Each and every provision of law and clause required by law to be inserted or applicable to the services provided in this Contract shall be deemed to be inserted herein and this Contract shall be read and enforced as though it were included herein. If through mistake or otherwise any such provision is not inserted, or is not correctly inserted, then on the
application of either party the Contract shall be amended to make such insertion or
correction.

1.19 **Governing Law:** This Contract shall be governed by the laws of the State of Missouri and shall
be deemed executed at Jefferson City, Cole County, Missouri. All contractual agreements shall
be subject to, governed by, and construed according to the laws of the State of Missouri.

1.20 **Jurisdiction:** All legal proceedings arising hereunder shall be brought in the Circuit Court of
Cole County in the State of Missouri.

1.21 **Acceptance:** No contract provision or use of items by MCHCP shall constitute acceptance or
relieve DSS of liability in respect to any expressed or implied warranties.

1.22 **Survival of Terms:** Termination or expiration of this Contract for any reason will not release
either party from any liabilities or obligations set forth in this Contract that: (i) the parties
expressly agree will survive any such termination or expiration; or (ii) remain to be performed
or by their nature would be intended to apply following any such termination or expiration.

2 **DSS’s Obligations**

2.1 **Confidentiality:** DSS will have access to private and/or confidential data maintained by MCHCP
to the extent necessary to carry out its responsibilities under this Contract. No private or
confidential data received, collected, maintained, transmitted, or used in the course of
performance of this Contract shall be disseminated by DSS except as authorized by MCHCP,
either during the period of this Contract or thereafter. DSS must agree to return any or all
data furnished by MCHCP promptly at the request of MCHCP in whatever form it is
maintained by DSS. On the termination or expiration of this Contract, DSS will not use any of
such data or any material derived from the data for any purpose and, where so instructed by
MCHCP, will destroy or render it unreadable.

2.2 **Subcontracting:** Subject to the terms and conditions of this section, this Contract shall be
binding upon the parties and their respective successors and assigns. DSS shall not
subcontract with any person or entity to perform all or any part of the work to be performed
under this Contract without the prior written consent of MCHCP. DSS may not assign, in
whole or in part, this Contract or its rights, duties, obligations, or responsibilities hereunder
without the prior written consent of MCHCP. DSS agrees that any and all subcontracts
entered into by DSS for the purpose of meeting the requirements of this Contract are the
responsibility of DSS. MCHCP will hold DSS responsible for assuring that subcontractors meet
all the requirements of this Contract and all amendments thereto. DSS must provide
complete information regarding each subcontractor used by DSS to meet the requirements of
this Contract.

2.3 **Disclosure of Material Events:** DSS agrees to immediately disclose any of the following to
MCHCP to the extent allowed by law for publicly traded companies:

- Any material adverse change to the financial status or condition of DSS;
- Any merger, sale or other material change of ownership of DSS;
• Any conflict of interest or potential conflict of interest between DSS’s engagement with MCHCP and the work, services or products that DSS is providing or proposes to provide to any current or prospective customer; and

• (1) Any material investigation of DSS by a federal or state agency or self-regulatory organization; (2) Any material complaint against DSS filed with a federal or state agency or self-regulatory organization; (3) Any material proceeding naming DSS before any federal or state agency or self-regulatory organization; (4) Any material criminal or civil action in state or federal court naming DSS as a defendant; (5) Any material fine, penalty, censure or other disciplinary action taken against DSS by any federal or state agency or self-regulatory organization; (6) Any material judgment or award of damages imposed on or against DSS as a result of any material criminal or civil action in which DSS was a party; or (7) Any other matter material to the services rendered by DSS pursuant to this Contract.

For the purposes of this paragraph, “material” means of a nature or of sufficient monetary value, or concerning a subject which a reasonable party in the position of and comparable to MCHCP would consider relevant and important in assessing the relationship and services contemplated by this Contract. It is further understood in that in fulfilling its ongoing responsibilities under this paragraph, DSS is obligated to make its best faith efforts to disclose only those relevant matters which to the attention of or should have been known by DSS’s personnel involved in the engagement covered by this Contract and/or which come to the attention of or should have been known by any individual or office of DSS designated by DSS to monitor and report such matters.

Upon learning of any such actions, MCHCP reserves the right, at its sole discretion, to terminate this Contract.

2.4 Off-shore Services: All services under this Contract shall be performed within the United States. DSS shall not perform, or permit subcontracting of services under this Contract, to any off-shore companies or locations outside of the United States. Any such actions shall result in DSS being in breach of this Contract.

2.5 Change in Laws: DSS agrees that any state and/or federal laws, applicable rules and regulations enacted during the terms of the Contract which are deemed by MCHCP to necessitate a change in the contract shall be deemed incorporated into the Contract. MCHCP will review any request for additional fees or premiums resulting from such changes and retains final authority to make any changes. In consultation with DSS, an actuary may be utilized to determine the cost impact.

2.6 Compliance with Laws: DSS shall comply with all applicable federal and state laws and regulations and local ordinances in the performance of this Contract, including but not limited to the provisions listed below.

2.6.1 Non-discrimination, Sexual Harassment and Workplace Safety: DSS agrees to abide by all applicable federal, state and local laws, rules and regulations prohibiting discrimination in employment and controlling workplace safety. DSS
shall establish and maintain a written sexual harassment policy and shall inform its employees of the policy. DSS shall include the provisions of this Nondiscrimination/Sexual Harassment Clause in every subcontract so that such provisions will be binding upon each subcontractor. Any violations of applicable laws, rules and regulations may result in termination of the Contract.

2.6.2 **Americans with Disabilities Act (ADA) and Americans with Disabilities Act Amendments Act of 2008 (ADAAA):** Pursuant to federal regulations promulgated under the authority of The Americans with Disabilities Act (ADA) and Americans with Disabilities Act Amendments Act of 2008 (ADAAA), DSS understands and agrees that it shall not cause any individual with a disability to be excluded from participation in this Contract or from activities provided for under this Contract on the basis of such disability. As a condition of accepting this Contract, DSS agrees to comply with all regulations promulgated under ADA or ADAAA which are applicable to all benefits, services, programs, and activities provided by MCHCP through contracts with outside contractors.

2.6.3 **Patient Protection and Affordable Care Act (PPACA):** If applicable, DSS shall comply with the Patient Protection and Affordable Care Act (PPACA) and all regulations promulgated under the authority of PPACA, including any future regulations promulgated under PPACA, which are applicable to all benefits, services, programs, and activities provided by MCHCP through contracts with outside contractors.

2.6.4 **Health Insurance Portability and Accountability Act of 1996 (HIPAA):** DSS shall comply with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and implementing regulations, as amended, including compliance with the Privacy, Security and Breach Notification regulations and the execution of a Business Associate Agreement with MCHCP.

2.7 **Indemnification:** DSS shall be responsible for and agrees to indemnify and hold harmless MCHCP from all losses, damages, expenses, claims, demands, suits, and actions brought by any party against MCHCP as a result of DSS’s, DSS’s employees, or DSS’s associate or any associate’s or subcontractor’s failure to comply with section 2.6 of this contract.

2.8 **Prohibition of Gratuities:** Neither DSS nor any person, firm or corporation employed by DSS in the performance of this Contract shall offer or give any gift, money or anything of value or any promise for future reward or compensation to any employee of MCHCP at any time.

2.9 **Solicitation of Members:** DSS shall not use the names, home addresses or any other information contained about members of MCHCP for the purpose of offering for sale any property or services which are not directly related to services negotiated in this RFP without the express written consent of MCHCP’s Executive Director.

2.10 **Insurance and Liability:** DSS must maintain sufficient liability insurance, including but not limited to general liability, professional liability, and errors and omissions coverage, to protect MCHCP against any reasonably foreseeable recoverable loss, damage or expense under this engagement. DSS shall provide proof of such insurance coverage upon request from MCHCP. MCHCP shall not be required to purchase any insurance against loss or damage to any
personal property to which this Contract relates. DSS shall bear the risk of any loss or damage to any personal property in which DSS holds title.

2.11 Hold Harmless: DSS shall hold MCHCP harmless from and indemnify against any and all claims for injury to or death of any persons; for loss or damage to any property; and for infringement of any copyright or patent to the extent caused by DSS or DSS’s employees or its subcontractors. MCHCP shall not be precluded from receiving the benefits of any insurance DSS may carry which provides for indemnification for any loss or damage of property in DSS’s custody and control, where such loss or destruction is to MCHCP’s property. DSS shall do nothing to prejudice MCHCP’s right to recover against third parties for any loss, destruction, or damage to MCHCP’s property.

2.12 Assignment: DSS shall not assign, convey, encumber, or otherwise transfer its rights or duties under this Contract without prior written consent of MCHCP. This Contract may terminate in the event of any assignment, conveyance, encumbrance, or other transfer by DSS made without prior written consent of MCHCP. Notwithstanding the foregoing, DSS may, without the consent of MCHCP, assign its rights to payment to be received under this Contract, provided that DSS provides written notice of such assignment to MCHCP together with a written acknowledgment from the assignee that any such payments are subject to all of the terms and conditions of this Contract. For the purposes of this Contract, the term "assign" shall include, but shall not be limited to, the sale, gift, assignment, pledge, or other transfer of any ownership interest in DSS provided, however, that the term shall not apply to the sale or other transfer of stock of a publicly traded company. Any assignment consented to by MCHCP shall be evidenced by a written assignment agreement executed by DSS and its assignee in which the assignee agrees to be legally bound by all of the terms and conditions of this Contract and to assume the duties, obligations, and responsibilities being assigned. A change of name by DSS, following which DSS’s federal identification number remains unchanged, shall not be considered to be an assignment hereunder. DSS shall give MCHCP written notice of any such change of name.

2.13 Patent, Copyright, and Trademark Indemnity: DSS warrants that it is the sole owner or author of, or has entered into a suitable legal agreement concerning either: a) the design of any product or process provided or used in the performance of this Contract which is covered by a patent, copyright, or trademark registration or other right duly authorized by state or federal law or b) any copyrighted matter in any report document or other material provided to MCHCP under this Contract. DSS shall defend any suit or proceeding brought against MCHCP on account of any alleged patent, copyright or trademark infringement in the United States of any of the products provided or used in the performance of this Contract. This is upon condition that MCHCP shall provide prompt notification in writing of such suit or proceeding; full right, authorization and opportunity to conduct the defense thereof; and full information and all reasonable cooperation for the defense of same. As principles of governmental or public law are involved, MCHCP may participate in or choose to conduct, in its sole discretion, the defense of any such action. If information and assistance are furnished by MCHCP at DSS’s written request, it shall be at DSS’s expense, but the responsibility for such expense shall be only that within DSS’s written authorization. DSS shall indemnify and hold MCHCP harmless from all damages, costs, and expenses, including attorney's fees that
DSS or MCHCP may pay or incur by reason of any infringement or violation of the rights occurring to any holder of copyright, trademark, or patent interests and rights in any products provided or used in the performance of this Contract. If any of the products provided by DSS in such suit or proceeding are held to constitute infringement and the use is enjoined, DSS shall, at its own expense and at its option, either procure the right to continue use of such infringement products, replace them with non-infringement equal performance products or modify them so that they are no longer infringing. If DSS is unable to do any of the preceding, DSS agrees to remove all the equipment or software which are obtained contemporaneously with the infringing product, or, at the option of MCHCP, only those items of equipment or software which are held to be infringing, and to pay MCHCP: 1) any amounts paid by MCHCP towards the purchase of the product, less straight line depreciation; 2) any license fee paid by MCHCP for the use of any software, less an amount for the period of usage; and 3) the prorata portion of any maintenance fee presenting the time remaining in any period of maintenance paid for. The obligations of DSS under this paragraph continue without time limit. No costs or expenses shall be incurred for the account of DSS without its written consent.

2.14 Compensation/Expenses: DSS shall be required to perform the specified services at the price(s) quoted in this Contract. All services shall be performed within the time period(s) specified in this Contract. DSS shall be compensated only for work performed to the satisfaction of MCHCP. DSS shall not be allowed or paid travel or per diem expenses except as specifically set forth in this Contract.

2.15 Contractor Expenses: DSS will pay and will be solely responsible for DSS’s travel expenses and out-of-pocket expenses incurred in connection with providing the services. DSS will be responsible for payment of all expenses related to salaries, benefits, employment taxes, and insurance for its staff.

2.16 Tax Payments: DSS shall pay all taxes lawfully imposed on it with respect to any product or service delivered in accordance with this Contract. MCHCP is exempt from Missouri state sales or use taxes and federal excise taxes for direct purchases. MCHCP makes no representation as to the exemption from liability of any tax imposed by any governmental entity on DSS.

2.17 Retention of Records: Unless MCHCP specifies in writing a shorter period of time, DSS agrees to preserve and make available all of its books, documents, papers, records and other evidence involving transactions related to this contract for a period of seven (7) years from the date of the expiration or termination of this contract. Matters involving litigation shall be kept for one (1) year following the termination of litigation, including all appeals, if the litigation exceeds seven (7) years. DSS agrees that authorized federal representatives, MCHCP personnel, and independent auditors acting on behalf of MCHCP and/or federal agencies shall have access to and the right to examine records during the contract period and during the seven (7) year post contract period. Delivery of and access to the records shall be at no cost to MCHCP.

2.18 Conflicts of Interest: DSS shall not knowingly employ, during the period of this Contract or any extensions to it, any professional personnel who are also in the employ of the State of Missouri or MCHCP and who are providing services involving this Contract or services similar
in nature to the scope of this Contract to the State of Missouri. Furthermore, DSS shall not knowingly employ, during the period of this Contract or any extensions to it, any employee of MCHCP who has participated in the making of this Contract until at least two years after his/her termination of employment with MCHCP.

2.19 Complaints and Appeals: DSS shall have the responsibility to perform a complete investigation of all complaints, grievances and appeals, and make decisions regarding medical necessity and the provisions of benefits. DSS must have a timely and organized system for resolving members’ complaints and formal grievances in compliance with state and federal laws and regulations as amended. If the member’s grievance is not resolved to his or her satisfaction, the member has the right to a formal appeal to DSS. DSS’s appeal process shall be in compliance with state and federal laws and regulations as amended.

3 MCHCP’S OBLIGATIONS

3.1 Payment: MCHCP shall promptly pay all monies due DSS in a timely manner. MCHCP will remit all payments electronically.

Ongoing payments for maintenance and monthly data updates shall be made on a total regular monthly fee basis beginning with the first calendar month following the validation that the system has reached full production mode but no earlier than January 1, 2025. Payments will be made within 10 business days of invoicing.

DSS agrees that the final scheduled payment shall be held until all financial obligations (i.e. performance standard penalties) have been met.

Payment shall not be construed by DSS as acceptance of the service performed by DSS. MCHCP reserves the right to conduct further testing and inspection after payment, but within a reasonable time after performance, and to reject the service if such post payment testing or inspection discloses a defect or a failure to meet specifications. DSS agrees that MCHCP may set off amount of any obligation of DSS or its subsidiaries to MCHCP against any payments due DSS under any contract with MCHCP, provided that prior written notice is sent to DSS by MCHCP with applicable details.

4 RECORDS RETENTION, ACCESS, AUDIT, AND FINANCIAL COMPLIANCE

4.1 Audit Rights: MCHCP and its designated auditors shall have access to and the right to examine any and all pertinent books, documents, papers, files, or records of DSS involving any and all transactions related to the performance of this Contract, including provision do the Business Associate Agreement. DSS shall furnish all information necessary for MCHCP to comply with all Missouri and/or federal laws and regulations. MCHCP shall bear the cost of any such audit or review. MCHCP and DSS shall agree to reasonable times for DSS to make sure records available for audit.

4.2 Ownership: All data developed or accumulated by DSS under this Contract shall be owned by DSS. DSS may release any data as permitted by applicable federal and state law. MCHCP shall be entitled, in a timely manner, to all occupational health data and written or recorded material pertaining to DSS’s compliance with this Contract in a format acceptable to MCHCP. MCHCP shall have, in accordance with applicable federal and state law, unrestricted authority to reproduce, distribute, and use any submitted report or data and any associated
documentation that is designed or developed and delivered to MCHCP as part of the performance of this Contract.

4.3 Access to Records: Upon reasonable notice, DSS must provide, and cause its subcontractors to provide, the officials and entities identified in this Section with prompt, reasonable, and adequate access to any records, books, documents, and papers that are directly pertinent to the performance of the services. Such access must be provided to MCHCP and, upon execution of a confidentiality agreement, to any independent auditor or consultant acting on behalf of MCHCP; and any other entity designated by MCHCP. DSS agrees to provide the access described wherever DSS maintains such books, records, and supporting documentation. Further, DSS agrees to provide such access in reasonable comfort and to provide any furnishings, equipment, or other conveniences deemed reasonably necessary to fulfill the purposes described in this section. DSS shall require its subcontractors to provide comparable access and accommodations. MCHCP shall have the right, at reasonable times and at a site designated by MCHCP, to audit the books, documents and records of DSS to the extent that the books, documents and records relate to costs or pricing data for this Contract. DSS agrees to maintain records which will support the prices charged and costs incurred for performance of services performed under this Contract. To the extent described herein, DSS shall give full and free access to all records to MCHCP and/or their authorized representatives.

5 Scope of Work

5.1 Purpose: In accordance with the provisions and requirements of this contract and on behalf of MCHCP, DSS shall provide a decision support system that integrates claim level data from multiple sources with enrollment information into a database capable of being queried by MCHCP.

5.2 Claim Level Data: DSS must be capable of converting and standardizing raw data from multiple sources into a database that can be queried by MCHCP to assist in answering the following types of questions:

5.2.1 How does MCHCP experience compare to other benchmarks – both commercial employers and governmental employers – especially other state employers?

5.2.2 Is the plan performing optimally in the areas of cost, quality, and member access?

5.2.3 How is the plan performing over time in relation to accepted utilization and expense criteria? What are the causes of these trends?

5.2.4 What is the expected or actual impact of new or existing programs?

5.2.5 What are the primary clinical reasons people are receiving benefits? What are the high cost and high utilization areas?
5.3 Implementation: MCHCP expects to begin implementation immediately following contract award, with the system being in full production no later than January 1, 2025. There must be no break in service from the current contractor.

5.4 Full Responsibility: DSS must offer this product in such a manner that MCHCP has no responsibility for the database, the decision support software, or the technical infrastructure and associated processes and procedures. DSS shall proactively identify and correct any data anomalies or gaps in data.

5.5 Analytical Products and Support: DSS shall be able to provide a full range of analytical products and support, including, but not limited to, claims expense and utilization analysis, benchmarking against valid comparable standards, plan and program evaluation, financial management, and utilization analysis at the provider and clinical level. DSS shall provide an annual minimum consulting retainer of 168 hours that MCHCP can utilize for special projects or to offset costs for implementing a new or replacement data source. Unused hours shall roll over to the next year.

5.6 Web-based Information and Access: DSS shall provide secure, user-friendly, web-based access to the warehouse system that allows for ad hoc report generation with graphic presentation ability. The system must be able to integrate claims information (PPO, HDHP, Medicare Advantage, PBM, dental and vision), health clinic encounter data, health assessment (HA) results, eligibility information and other types of data as it is identified.

5.7 Database Requirements: DSS shall create a five-year historical database using the available information from all data suppliers. Once data ages out of the database, DSS shall archive the data and retain the capability for the data to be retrieved upon request. DSS shall provide MCHCP direct access to act on and manipulate, compare, consolidate, view, analyze and report the data, with the capability to summarize and compare services provided to members or by providers based on selection criteria specified by MCHCP using any combination of data dimensions. The system must allow for independent analysis and study. DSS shall perform the following:

5.7.1 Maintain a comparative database embedded within the system to allow for benchmarking. At a minimum, this benchmark data must include national, regional, and industry-specific norms. A public sector norm is required.

5.7.2 Construct inpatient admissions and inpatient and outpatient episodes of care, linking all claims to a related episode. Episodes of care capabilities are a required component of the DSS and its cost must be included in the base price.

5.7.3 Provide quality of care measurement and readmission analysis capabilities using established key indicators of quality.

5.7.4 Provide the ability to define and access subsets of the full database based on any data variable with drill-down capabilities to the level of individual participant, provider or claim line.

5.7.5 Provide the ability to query the most recent five years of data and with the capability to report claims data by date of service and by date of payment.

5.7.6 Provide health risk scoring capabilities that, at a minimum, measure population illness burden and stratify populations upon a continuum. The
5.7.7 Provide the ability to display information in tables, graphs and charts and provide a wide range of selectable choices to view, array, compare, and report aggregate, sub-aggregate, and summary information.

5.8 **Reports:** DSS shall electronically array and store data to allow for the generation of standard reports on a periodic basis as well as the capability to create and generate ad hoc reports online. DSS shall provide access to a series of standard management reports that analyze underlying utilization and cost patterns. DSS shall provide assistance and expertise in converting MCHCP’s current reporting templates for use in DSS’s system.

5.9 **Training and Support:** The contractor shall provide adequate initial and ongoing training and support for up to four MCHCP employees and up to two external users and shall be able to provide the necessary technical support to make full use of the information in strategic decision making. The contractor must provide ongoing system support and training following implementation. A designated analyst with extensive experience must be included as part of the account team.

5.10 **Monthly Data Feeds:** DSS shall develop data interfaces which are mutually acceptable to DSS, the data suppliers, and MCHCP. The process will include the method of transmission, content, and frequency. DSS shall accept monthly data feeds from each of MCHCP’s data suppliers and clean the data prior to importing into the central data warehouse. The data will be electronically stored on the contractor’s system and will serve as a centralized data repository from which both standard and ad hoc reports may be generated. DSS shall maintain clear communication with MCHCP regarding data suppliers’ submission dates and compliance levels. DSS must communicate interface requirements to data suppliers in the event MCHCP changes or adds data suppliers.

5.11 **Data Extract Files:** Upon request, DSS shall provide a data extract file to MCHCP or its designee in an agreed upon format and layout.

5.12 **Voluntary Data Share Agreement Services:** If for the contract year, MCHCP elects, the contractor shall manage the VDSA exchange between MCHCP and the Centers for Medicare and Medicaid (CMS) Coordination of Benefits Contractor (COBC). Based on the eligibility files submitted by MCHCP, the contractor shall submit a Medicare Secondary Payer (MSP) file to the CMS COBC on a quarterly basis of all MCHCP members age 55 or older. The contractor shall submit a Non MSP file to the CMS COBC on a monthly basis of all members and submit the results provided by the CMS COBC to MCHCP in order to provide up-to-date Medicare entitlement information.

5.13 **Consumer Plan Selection Tool:** If, for the contract year, MCHCP elects, DSS shall provide an online application that enables employees to view their specific medical and prescription drug historic cost and utilization information for themselves and their dependents and plan choices to support the open enrollment decision-making process. The application shall model costs and utilization and apply such to each of the plan design options available to members. The application must model historic claims experience and premium contributions to make the
plan recommendation that is the most financially advantageous to the member. The contractor shall provide results reporting and provide an impact analysis of the effectiveness of the tool to determine if members selected the recommended plan. The tool must be accessible to members through single sign-on from MCHCP’s website. The tool must be accessible to new employees throughout the year.

5.14 Electronic Transmission Protocols: DSS and all subcontractors shall maintain encryption standards of 4096 bit encryption or greater for RSA key pairs, and 256 bit session key strength for the encryption of confidential information and transmission over public communication infrastructure. Batch transfers of files will be performed using SFTP or FTPS with similar standards and refined as needed to best accommodate provider configurations (i.e. port assignment, access control, etc.).

5.15 Rights to Data and Turnover Requirements: All technical communications and records originated or prepared by DSS pursuant to this agreement including papers, reports, charts, and other documentation, but not including contractor’s administrative communications and records relating to this agreement shall be delivered to and shall become the exclusive property of MCHCP.

5.16 Turnover Work Plan: Six (6) months prior to the end of the contract period, DSS shall deliver to MCHCP a turnover work plan acceptable to MCHCP. This work plan shall address all requirements and activities necessary to complete the termination and turnover process. In addition to addressing the activities associated with the turnover process, the work plan shall include a work schedule of tasks to be performed during the turnover period and a narrative which describes each task/activity on the work schedule. The work plan must be provided within 30 days of notification of contract termination. Failure to provide an acceptable turnover work plan will incur liquidated damages as provided in the performance standards.

6 CANCELLATION, TERMINATION OR EXPIRATION

6.1 MCHCP’s rights Upon Termination or Expiration of Contract: If this Contract is terminated, MCHCP, in addition to any other rights provided under this Contract, may require DSS to transfer title and deliver to MCHCP in the manner and to the extent directed, any completed materials. Provided however that Contractor shall have the right to retain a reasonable number of archival copies of MCHCP Data to support its rights and obligations under this Agreement, subject to all applicable confidentiality obligations of HIPAA and this Agreement. MCHCP shall be obligated only for those services and materials rendered and accepted prior to termination. DSS shall turn over to MCHCP’s new decision support system vendor, the most recent five years of raw data received from each of MCHCP’s data suppliers.

6.2 Termination for Cause: MCHCP may terminate this Contract, or any part of this Contract, for cause under any one of the following circumstances: 1) DSS fails to make delivery of goods or services as specified in this Contract; 2) DSS fails to satisfactorily perform the work specified in this Contract; 3) DSS fails to make progress so as to endanger performance of this Contract in accordance with its terms; 4) DSS breaches any provision of this Contract; 5) DSS assigns this Contract without MCHCP’s approval; or 6) Insolvency or bankruptcy of DSS. MCHCP shall have the right to terminate this Contract, in whole or in part, if MCHCP determines, at its sole discretion.
discretion that one of the above listed circumstances exists. In the event of termination, DSS shall receive payment prorated for that portion of the contract period services were provided to and/or goods were accepted by MCHCP, subject to any offset by MCHCP for actual damages including loss of any federal matching funds. DSS shall be liable to MCHCP for any reasonable excess costs for such similar or identical services included within the terminated part of this Contract.

6.3 Termination Right: Notwithstanding any other provision, MCHCP reserves the right to terminate this Contract without penalty or recourse by giving DSS thirty (30) days prior notice of termination.

6.4 Termination by Mutual Agreement: The parties may mutually agree to terminate this Contract or any part of this Contract at any time. Such termination shall be in writing and shall be effective as of the date specified in such agreement.

6.5 Arbitration, Damages, Warranties: Notwithstanding any language to the contrary, no interpretation shall be allowed to find MCHCP has agreed to binding arbitration, or the payment of damages or penalties upon the occurrence of a contingency. Further, MCHCP shall not agree to pay attorney fees and late payment charges beyond those available under this Contract, and, if applicable, no provision will be given effect which attempts to exclude, modify, disclaim or otherwise attempt to limit implied warranties of merchantability and fitness for a particular purpose.

6.6 Rights and Remedies: If this Contract is terminated, MCHCP, in addition to any other rights provided for in this Contract, may require DSS to deliver to MCHCP in the manner and to the extent directed, any completed materials. In the event of termination, DSS shall receive payment prorated for that portion of the contract period services were provided to and/or goods were accepted by MCHCP subject to any offset by MCHCP for actual damages. The rights and remedies of MCHCP provided for in this Contract shall not be exclusive and are in addition to any other rights and remedies provided by law.

THE UNDERSIGNED PERSONS REPRESENT AND WARRANT THAT WE ARE LEGALLY FREE TO ENTER THIS AGREEMENT, OUR EXECUTION OF THIS AGREEMENT HAS BEEN DULY AUTHORIZED, AND OUR SIGNATURES BELOW SIGNIFY OUR CONSENT TO BE BOUND TO THE FOREGOING TERMS AND CONDITIONS.

Missouri Consolidated Health Care Plan

By: ______________________________
Title: Executive Director
Date: ____________________________

DSS Company

By: ______________________________
Title: ____________________________
Date: ____________________________
Exhibit A-7
BUSINESS ASSOCIATE AGREEMENT

This Business Associate Agreement ("Agreement") between the Missouri Consolidated Health Care Plan (hereinafter “Covered Entity” or “MCHCP”) and Decision Support Company (hereinafter “Business Associate”) is entered into as a result of the business relationship between the parties in connection with services requested and performed in accordance with the MCHCP’s 2025 Decision Support Services (“RFP”) and under Contract #25-010125-DSS, as renewed and amended, (hereinafter the “Contract”).

This Agreement supersedes all other agreements, including any previous business associate agreements, between the parties with respect to the specific matters addressed herein. In the event the terms of this Agreement are contrary to or inconsistent with any provisions of the Contract or any other agreements between the parties, this Agreement shall prevail, subject in all respects to the Health Insurance Portability and Accountability Act of 1996, as amended (the “Act”), and the HIPAA Rules, as defined in Section 2.1 below.

1 Purpose.

The Contract addresses and relates to the provision of decision support services.

The purpose of this Agreement is to comply with requirements of the Act and the implementing regulations enacted under the Act, 45 CFR Parts 160 - 164, as amended, to the extent such laws relate to the obligations of business associates, and to the extent such laws relate to obligations of MCHCP in connection with services performed by TPA for or on behalf of MCHCP under the Contract. This Agreement is required to allow the parties to lawfully perform their respective duties and maintain the business relationship described in the Contract.

2 Definitions.

2.1 For purposes of this Agreement:

“Business Associate” shall generally have the same meaning as the term “business associate” at 45 CFR § 160.103, and in reference to this Agreement, shall mean TPA.

“Covered Entity” shall generally have the same meaning as the term “covered entity” at 45 CFR § 160.103, and in reference to this Agreement, shall mean MCHCP.


2.2 Unless otherwise expressly stated in this Agreement, all words, terms, specifications, and requirements used or referenced in this Agreement which are defined in the HIPAA Rules shall have the same meanings as described in the HIPAA Rules, including but not limited to: breach; data aggregation; designated record set; disclose or disclosure; electronic media; electronic protected health information ("ePHI"); family member; genetic information; health care; health information; health care operations; individual; individually identifiable health information; marketing; minimum necessary; notice of privacy practices; person; protected health information ("PHI"); required by law; Secretary; security incident; standard; subcontractor; transaction; unsecured PHI; use; violation or violate; and workforce.
2.3 To the extent a term is defined in the Contract and this Agreement, the definition in this Agreement, subject in all material respects to the HIPAA Rules, shall govern.

2.4 Notwithstanding the forgoing, for ease of reference throughout this Agreement, Business Associate understands and agrees that wherever PHI is referenced in this Agreement, it shall be deemed to include all MCHCP-related PHI in any format or media including paper, recordings, electronic media, emails, and all forms of MCHCP-related ePHI in any data state, be it data in motion, data at rest, data in use, or otherwise.

3 Obligations and Activities of Business Associate.

3.1 Business Associate agrees to not use or disclose PHI other than as permitted or required by this Agreement or as required by law.

3.2 Appropriate Safeguards. Business Associate agrees to implement, maintain, and use appropriate administrative, physical, and technical safeguards, and fully comply with all applicable standards, implementation specifications, and requirements of Subpart C of 45 CFR Part 164 with respect to ePHI, in order to: (i) ensure the confidentiality, integrity, and availability of ePHI created, received, maintained, or transmitted; (ii) protect against any reasonably anticipated threats or hazards to the security or integrity of such information; and (iii) protect against use or disclosure of ePHI by Business Associate, its workforce, and its subcontractors other than as provided for by this Agreement.

3.3 Subcontractors. Pursuant to §§ 164.308(b)(2) and 164.502(e)(1)(ii), Business Associate agrees it will not permit any subcontractors to create, receive, access, use, maintain, disclose, or transmit PHI in connection with, on behalf of, or under the direction of Business Associate in connection with performing its duties and obligations under the Contract unless and until Business Associate obtains satisfactory assurances in the form of a written contract or written agreement in accordance with §§ 164.504(e) and 164.314(a)(2) that the subcontractor(s) will appropriately safeguard PHI and in all respects comply with the same restrictions, conditions, and requirements applicable to Business Associate under the HIPAA Rules and this Agreement with respect to such information.

In addition to the forgoing, and in accordance with the Contract, Business Associate agrees it will not permit any subcontractor, or use any off-shore entity, to perform services under the Contract, including creation, use, storage, or transmission of PHI at any location(s) outside of the United States.

3.4 Reports to MCHCP. Business Associate agrees to report any use or disclosure of PHI not authorized or provided for by this Agreement, including breaches of unsecured PHI and any security incident involving MCHCP to MCHCP in accordance with the notice provisions prescribed in this Section 3.4. For purposes of the security incident reporting requirement, the term “security incident” shall not include inconsequential incidents that occur on a daily basis, such as scans, “pings,” or other unsuccessful attempts to penetrate computer networks or servers containing ePHI maintained or transmitted by Business Associate.

3.4.1 The notice shall be delivered to, and confirmed received by, MCHCP without unreasonable delay, but in any event no later than three (3) business days of Business Associate’s first
discovery, as discovery is described under § 164.410, of the unauthorized use or disclosure, breach of unsecured PHI, or security incident.

3.4.2 The notice shall be in writing and sent to both of the following MCHCP workforce members and deemed delivered only upon personal confirmation, acknowledgement or receipt in any form, verbal or written, from one of the designated recipients:

- MCHCP’s Privacy Officer ➔ currently, Jennifer Stilabower, (573) 522-3242, Jennifer.Stilabower@mchcp.org, 832 Weathered Rock Court, Jefferson City, MO 65101

- MCHCP’s Security Officer ➔ currently, Brad Kifer, (573) 526-2858, Brad.kifer@mchcp.org, 832 Weathered Rock Court, Jefferson City, MO 65101

If, and only if, Business Associate receives an email or voicemail response indicating neither of the intended MCHCP recipients are available and no designee(s) confirm receipt within eight (8) business hours on behalf of one or both of the above-named MCHCP Officers, Business Associate shall forward the written notice to their primary MCHCP contact with copies to the Privacy and Security Officers for documentation purposes.

3.4.3 The notice shall include to the fullest extent possible:

a) a detailed description of what happened, including the date, time, and all facts and circumstances surrounding the unauthorized use or disclosure, breach of unsecured PHI, or security incident;

b) the date, time, and circumstances surrounding when and how Business Associate first became aware of the unauthorized use or disclosure, breach of unsecured PHI, or security incident;

c) identification of each individual whose PHI has been, or is reasonably believed by Business Associate to have been involved or otherwise subject to possible breach;

d) a description of all types of PHI known or potentially believed to be involved or affected;

e) identification of any and all unauthorized person(s) who had access to or used the PHI or to whom an unauthorized disclosure was made;

f) all decisions and steps Business Associate has taken to date to investigate, assess risk, and mitigate harm to MCHCP and all potentially affected individuals;

g) contact information, including name, position or title, phone number, email address, and physical work location of the individual(s) designated by Business Associate to act as MCHCP’s primary contact for purposes of the notice triggering event(s);

h) all corrective action steps Business Associate has taken or shall take to prevent future similar uses, disclosures, breaches, or incidents;
i) if all investigatory, assessment, mitigation, or corrective action steps are not complete as of the date of the notice, Business Associate’s best estimated timeframes for completing each planned but unfinished action step; and

j) any action steps Business Associate believes affected or potentially affected individuals should take to protect themselves from potential harm resulting from the matter.

3.4.4 Business Associate agrees to cooperate with MCHCP during the course of Business Associate’s investigation and risk assessment and to promptly and regularly update MCHCP in writing as supplemental information becomes available relating to any of the items addressed in the notice.

3.4.5 Business Associate further agrees to provide additional information upon and as reasonably requested by MCHCP; and to take any additional steps MCHCP reasonably deems necessary or advisable to comply with MCHCP’s obligations as a covered entity under the HIPAA Rules.

3.4.6 Business Associate expressly acknowledges the presumption of breach with respect to any unauthorized acquisition, access, use, or disclosure of PHI, unless Business Associate is able to demonstrate otherwise in accordance with § 164.402(2), in which case, Business Associate agrees to fully document its assessment and all factors considered and provide MCHCP no later than ten (10) calendar days following Business Associate’s discovery with its complete written risk assessment, conclusion reached, and all documentation supporting a conclusion that the unauthorized acquisition, access, use, or disclosure of PHI presents a low probability that PHI has been compromised.

3.4.7 The parties agree to work together in good faith, making every reasonable effort to reach consensus regarding whether a particular circumstance constitutes a breach or otherwise warrants notification, publication, or reporting to any affected individual, government body, or the public and also the appropriate means and content of any notification, publication, or report. Notwithstanding the foregoing, all final decisions involving questions of breach of PHI shall be made by MCHCP, including whether a breach has occurred, and any notification, publication, or public reporting required or reasonably advisable under the HIPAA Rules and MCHCP’s Notice of Privacy Practices based on all objective and verifiable information provided to MCHCP by Business Associate under this Section 3.4.

3.4.8 Business Associate agrees to bear all reasonable and actual costs associated with any notifications, publications, or public reports relating to breaches by Business Associate, any subcontractor of Business Associate, and any employee or workforce member of Business Associate and/or its subcontractors, as MCHCP deems necessary or advisable.

3.5 Confidential Communications. Business Associate agrees it will promptly implement and honor individual requests to receive PHI by alternative means or at an alternative location provided such request has been directed to and approved by MCHCP in accordance with § 164.522(b) applicable to covered entities. If Business Associate receives a request for confidential communications directly from an individual, Business Associate agrees to refer the individual, and promptly forward the individual’s request, to MCHCP so that MCHCP can assess, accommodate, and coordinate reasonable
requests of this nature in accordance with the HIPAA Rules and prepare a timely response to the individual.

3.6 **Individual Access to PHI.** If an individual requests access to PHI under § 164.524, Business Associate agrees it will make all PHI about the individual which Business Associate created or received for or from MCHCP that is in Business Associate’s custody or control available in a designated record set to MCHCP or, at MCHCP’s direction, to the requesting individual or his or her authorized designee, in order to satisfy MCHCP’s obligations as follows:

3.6.1 If Business Associate receives a request for individual PHI in a designated record set from MCHCP, Business Associate will provide the requested information to MCHCP within five (5) business days from the date of the request in a readily accessible and readable form and manner or as otherwise reasonably specified in the request.

3.6.2 If Business Associate receives a request for PHI in a designated record set directly from an individual current or former MCHCP member, Business Associate will require that the request be made in writing and will also promptly notify MCHCP that a request has been made verbally. If the individual submits a written request for PHI in a designated record set directly to Business Associate, no later than five (5) business days thereafter, Business Associate shall provide MCHCP with: (i) a copy of the individual’s request to MCHCP for purposes of determining an appropriate response to the request; (ii) the designated record sets in Business Associate’s custody or control that are subject to access by the requesting individual(s) requested in the form and format requested by the individual if it is readily producible in such form and format, or if not, in a readable hard copy form; and (iii) the titles of the persons or offices responsible for receiving and processing requests for access by individual(s). MCHCP will direct Business Associate in writing within five (5) business days following receipt of the information described in (i), (ii), and (iii) of this subsection 3.6.2 whether Business Associate should send the requested designated data set directly to the individual or whether MCHCP will forward the information received from Business Associate as part of a coordinated response or if for any reason MCHCP deems the response should be sent from MCHCP or another Business Associate acting on behalf of MCHCP. If Business Associate is directed by MCHCP to respond directly to the individual, Business Associate agrees to provide the designated record set requested in the form and format requested by the individual if it is readily producible in such form and format; or, if not, in a readable hard copy form or such other form and format as agreed to by Business Associate and the individual. Business Associate will provide MCHCP’s Privacy Officer with a copy of all responses sent to individuals pursuant to § 164.524 and the directives set forth in this subsection 3.6.2 for MCHCP’s compliance and documentation purposes.

3.7 **Amendments of PHI.** Business Associate agrees it will make any amendment(s) to PHI in a designated record set as directed or agreed to by MCHCP pursuant to § 164.526, and take other measures as necessary and reasonably requested by MCHCP to satisfy MCHCP’s obligations under § 164.526.

3.7.1 If Business Associate receives a request directly from an individual to amend PHI created by Business Associate, received from MCHCP, or otherwise within the custody or control of Business Associate at the time of the request, Business Associate shall promptly refer the individual to MCHCP’s Privacy Officer, and, if the request is in writing, shall forward the
individual’s request three (3) business days to MCHCP’s Privacy Officer so that MCHCP can evaluate, coordinate and prepare a timely response to the individual’s request.

3.7.2 MCHCP will direct Business Associate in writing as to any actions Business Associate is required to take with regard to amending records of individuals who exercise their right to amend PHI under the HIPAA Rules. Business Associate agrees to follow the direction of MCHCP regarding such amendments and to provide written confirmation of such action within seven (7) business days of receipt of MCHCP’s written direction or sooner if such earlier action is required to enable MCHCP to comply with the deadlines established by the HIPAA Rules.

3.8 PHI Disclosure Accounting. Business Associate agrees to document, maintain, and make available to MCHCP within seven (7) calendar days of a request from MCHCP for all disclosures made by or under the control of Business Associate or its subcontractors that are subject to accounting, including all information required, under § 164.528 to satisfy MCHCP’s obligations regarding accounting of disclosures of PHI.

3.8.1 If Business Associate receives a request for accounting directly from an individual, Business Associate agrees to refer the individual, and promptly forward the individual’s request, to MCHCP so that MCHCP can evaluate, coordinate and prepare a timely response to the individual’s request.

3.8.2 In addition to the provisions of 3.8.1, all PHI accounting requests received by Business Associate directly from the individual shall be acted upon by Business Associate as a request from MCHCP for purposes of Business Associate’s obligations under this section. Unless directed by MCHCP to respond directly to the individual, Business Associate shall provide all accounting information subject to disclosure under § 164.528 to MCHCP within seven (7) calendar days of the individual’s request for accounting.

3.9 Privacy of PHI. Business Associate agrees to fully comply with all provisions of Subpart E of 45 CFR Part 164 that apply to MCHCP to the extent Business Associate has agreed or assumed responsibilities under the Contract or this Agreement to carry out one or more of MCHCP’s obligation(s) under 45 CFR Part 164 Subpart E.

3.10 Internal Practices, Books, and Records. Upon request of MCHCP or the Secretary, Business Associate will make its internal practices, books, and records relating to the use and disclosure of PHI received from, or created or received by Business Associate on behalf of MCHCP available to MCHCP and/or the Secretary in a time and manner designated by MCHCP or the Secretary for purposes of determining MCHCP’s and/or Business Associate’s compliance with the HIPAA Rules.
Permitted Uses and Disclosures of PHI by Business Associate.

4.1 Contractual Authorization. Business Associate may access, create, use, and disclose PHI as necessary to perform its duties and obligations required by the Contract, including but not limited to specific requirements set forth in the Scope of Work (as such term is defined in the Contract), as amended. Without limiting the foregoing general authorization, MCHCP specifically authorizes Business Associate to access, create, receive, use, and disclose all PHI which is required to provide the services specified in the Contract. The parties agree that no provision of the Contract permits Business Associate to use or disclose PHI in a manner that would violate Subpart E of 45 CFR Part 164 if used or disclosed in like manner by MCHCP except that:

4.1.1 This Agreement permits Business Associate to use PHI received in its capacity as a business associate of MCHCP, if necessary: (A) for the proper management and administration of Business Associate; or (B) to carry out the legal responsibilities of Business Associate.

4.1.2 This Agreement permits Business Associate to combine PHI created or received on behalf of MCHCP as authorized in this Agreement with PHI lawfully created or received by Business Associate in its capacity as a business associate of other covered entities to permit data analysis relating to the health care operations of MCHCP and other PHI contributing covered entities in order to provide MCHCP with such comprehensive, aggregate summary reports as specifically required by, or specially requested under, the Contract.

4.2 Authorization by Law. Business Associate may use or disclose PHI as permitted or required by law.

4.3 Minimum Necessary. Notwithstanding any other provision in the Contract or this Agreement, with respect to any and all uses and disclosures permitted, Business Associate agrees to request, create, access, use, disclose, and transmit PHI involving MCHCP members subject to the following minimum necessary requirements:

4.3.1 When requesting or using PHI received from MCHCP, a member of MCHCP, or an authorized party or entity working on behalf of MCHCP, Business Associate shall make reasonable efforts to limit all requests and uses of PHI to the minimum necessary to accomplish the intended purpose of the request or use. Business Associate agrees its reasonable efforts will include identifying those persons or classes of persons, as appropriate, in Business Associate’s workforce who need access to MCHCP member PHI to carry out their duties under the Contract. Business Associate further agrees to identify the minimally necessary amount of PHI needed by each such person or class and any conditions appropriate to restrict access in accordance with such assessment.

4.3.2 For any type of authorized disclosure of PHI that Business Associate makes on a routine basis to third parties, Business Associate shall implement procedures that limit the PHI disclosed to the amount minimally necessary to achieve the purpose of the disclosure. For all other authorized but non-routine disclosures, Business Associate shall develop and follow criteria for reviewing requests and limiting disclosures to the information minimally necessary to accomplish the purposes for which disclosure is sought.
4.3.3 Business Associate may rely, if such reliance is reasonable under the circumstances, on a requested disclosure as the minimum necessary for the stated purpose if and when:

a) Making disclosures to public officials as permitted under § 164.512, if the public official represents that the information requested is the minimum necessary for the stated purpose(s); or

b) The information is requested by a professional who is a member of its workforce or is a business associate of MCHCP for the purpose of providing professional services to MCHCP, if the professional represents that the information requested is the minimum necessary for the stated purpose(s).

4.3.4 Minimum necessary does not apply to: uses or disclosures made to the individual; uses or disclosures made pursuant to a HIPAA-compliant authorization; disclosures made to the Secretary in accordance with the HIPAA Rules: disclosures specifically permitted or required under, and made in accordance with, the HIPAA Rules.

5 Obligations of MCHCP.

5.1 Notice of Privacy Practices. MCHCP shall notify Business Associate of any limitation(s) that may affect Business Associate’s use or disclosure of PHI by providing Business Associate with MCHCP’s Notice of Privacy Practices in accordance with § 164.520, the most recent copy of which is attached to this Agreement.

5.2 Individual Authorization Changes. MCHCP shall notify Business Associate in writing of any changes in, or revocation of, the authorization by an individual to use or disclose his or her PHI, to the extent that such changes may affect Business Associate’s use or disclosure of PHI.

5.3 Confidential Communications. MCHCP shall notify Business Associate in writing of individual requests approved by MCHCP in accordance with § 164.522 to receive communications of PHI from Business Associate by alternate means or at alternative locations, to the extent that such changes may affect Business Associate’s use or disclosure of PHI.

5.4 Individual Restrictions. MCHCP shall notify Business Associate in writing of any restriction to the use or disclosure of PHI that MCHCP has agreed and, if applicable, any subsequent revocation or termination of such restriction, in accordance with § 164.522, to the extent that such changes may affect Business Associate’s use or disclosure of PHI.

5.5 Permissible Requests by MCHCP. MCHCP shall not request Business Associate to use or disclose PHI in any manner that would not be permissible under the HIPAA Rules if done by MCHCP.
6 Term and Termination, Expiration, or Cancellation.

6.1 Term. This Agreement is effective upon signature of both parties, and shall terminate upon the termination, expiration, or cancellation of the Contract, as amended, unless sooner terminated for cause under subsection 6.2 below.

6.2 Termination. Without limiting MCHCP’s right to terminate the Contract in accordance with the terms therein, Business Associate also authorizes MCHCP to terminate this Agreement immediately by written notice and without penalty if MCHCP determines, in its sole discretion, that Business Associate has violated a material term of this Agreement and termination of this Agreement is in the best interests of MCHCP or its members. Without limiting the foregoing authorization, Business Associate agrees that MCHCP may, as an alternative or in addition to termination, require Business Associate to end the violation of the material term(s) and cure the breach of contract within the time and manner specified by MCHCP based on the circumstances presented. With respect to this subsection, MCHCP’s remedies under this Agreement and the Contract are cumulative, and the exercise of any remedy shall not preclude the exercise of any other.

6.3 Obligations of Business Associate Upon Termination. Upon termination, expiration, or cancellation of this Agreement for any reason, Business Associate agrees to return to MCHCP or deliver to another MCHCP business associate at MCHCP’s direction all PHI received from MCHCP, any current or former Business Associate or workforce member of MCHCP, or any current or former member of MCHCP, as well as all PHI created, compiled, stored or accessible to Business Associate or any subcontractor, agent, affiliate, or workforce member of Business Associate, relating to MCHCP as a result of services provided under the Contract. All such PHI shall be securely transmitted in accordance with MCHCP’s written directive in electronic format accessible and decipherable by the MCHCP designated recipient. Following confirmation of receipt and usable access of the transmitted PHI by the MCHCP designated recipient, Business Associate shall destroy all MCHCP-related PHI and thereafter retain no copies in any form for any purpose whatsoever. Within seven (7) business days following full compliance with the requirements of this subsection, an authorized representative of Business Associate shall certify in writing addressed to MCHCP’s Privacy and Security Officers that Business Associate has fully complied with this subsection and has no possession, control, or access, directly or indirectly, to MCHCP-related PHI from any source whatsoever.

Notwithstanding the foregoing, Business Associate may maintain MCHCP-PHI after the termination of this Agreement to the extent return or destruction of the PHI is not feasible, provided Business Associate: (i) refrains from any further use or disclosure of the PHI; (ii) continues to safeguard the PHI thereafter in accordance with the terms of this Agreement; (iii) does not attempt to de-identify the PHI without MCHCP’s prior written consent; and (iv) within seven (7) days following full compliance of the requirements of this subsection, provides MCHCP written notice describing all PHI maintained by Business Associate and certification by an authorized representative of Business Associate of its agreement to fully comply with the provisions of this paragraph.

6.4 Survival. All obligations and representations of Business Associate under this Section 6 and subsection 7.2 shall survive termination, expiration, or cancellation of the Contract and this Agreement.
7  **Miscellaneous.**

7.1 **Satisfactory Assurance.** Business Associate expressly acknowledges and represents that execution of this Agreement is intended to, and does, constitute satisfactory assurance to MCHCP of Business Associate’s full and complete compliance with its obligations under the HIPAA Rules. Business Associate further acknowledges that MCHCP is relying on this assurance in permitting Business Associate to create, receive, maintain, use, disclose, or transmit PHI as described herein.

7.2 **Indemnification.** Each party shall, to the fullest extent permitted by law, protect, defend, indemnify and hold harmless the other party and its current and former trustees, employees, and agents from and against any and all losses, costs, claims, penalties, fines, demands, liabilities, legal actions, judgments, and expenses of every kind (including reasonable attorneys’ fees and expenses, including at trial and on appeal) arising out of the acts or omissions of such party or any subcontractor, consultant, or workforce member of such party to the extent such acts or omissions violate the terms of this Agreement or the HIPAA Rules as applied to the Contract.

Notwithstanding the foregoing, if Business Associate maintains any MCHCP-related PHI following termination of the Contract and this Agreement pursuant to subsection 6.3, Business Associate shall be solely responsible for all PHI it maintains and, to the fullest extent permitted by law, Business Associate shall protect, defend, indemnify and hold harmless MCHCP and its current and former trustees, employees, and agents from and against any and all losses, costs, claims, penalties, fines, demands, liabilities, legal actions, judgments, and expenses of every kind (including reasonable attorneys’ fees and expenses, including at trial and on appeal) arising out of the acts or omissions of Business Associate or any subcontractor, consultant, or workforce member of Business Associate regarding such PHI to the extent such acts or omissions violate the terms of the Act or the HIPAA Rules.

7.3 **No Third Party Beneficiaries.** There is no intent by either party to create or establish third party beneficiary status or rights or their equivalent in any person or entity, other than the parties hereto, that may be affected by the operation of this Agreement, and no person or entity, other than the parties, shall have the right to enforce any right, claim, or benefit created or established under this Agreement.

7.4 **Amendment.** The parties agree to work together in good faith to amend this Agreement from time to time as is necessary or advisable for compliance with the requirements of the HIPAA Rules. Notwithstanding the foregoing, this Agreement shall be deemed amended automatically to the extent any provisions of the Act or the HIPAA Rules not addressed herein become applicable to Business Associate during the term of this Agreement pursuant to and in accordance with any subsequent modification(s) or official and binding legal clarification(s), to the Act or the HIPAA Rules.

7.5 **Interpretation.** Any reference in this Agreement to a section in the HIPAA Rules means the section as in effect or as amended. Any ambiguity in this Agreement shall be interpreted to permit compliance with the HIPAA Rules.
THE UNDERSIGNED PERSONS REPRESENT AND WARRANT THAT WE ARE LEGALLY FREE TO ENTER THIS AGREEMENT, THAT OUR EXECUTION OF THIS AGREEMENT HAS BEEN DULY AUTHORIZED, AND THAT UPON BOTH OF OUR SIGNATURES BELOW THIS SHALL BE A BINDING AGREEMENT TO THE FOREGOING TERMS AND CONDITIONS OF THIS BUSINESS ASSOCIATE AGREEMENT.

Missouri Consolidated Health Care Plan

By: ______________________________
Title: Executive Director
Date: ____________________________

DSS Company

By: ______________________________
Title: ____________________________
Date: ____________________________