F1

Item# Vendor Name		е	Contract No.	Amend No. Method of Procureme		ment	Cont	riod	Service Type	
1	COMPANY INC		4600039554	03	03 Request for Proposal		01/20/2017	То	01/18/2021	TGS
•	al Contract mount		nt Annual act Amount	Amen	dment Amount		riginal Total ected Amount		Updated Tot Projected Amo	
\$1,2			69,156.00	\$1	,300,000.00	\$^	1,269,155.91		\$8,884,091.3	37
Agency #		Ag	ency Name				Division			
0472	Arkansas	Geograph	ic Information Sy	stems Offi	ice					

**Contract Summary** 

The purpose of this contract is to acquire digital orthoimagery services for the entire State of Arkansas. The digital orthoimagery is to be collected at a minimum resolution of one foot (30 cm) and during leaf-off ground conditions. Optional products at higher resolution may be provided as agreed upon by the vendor and the Arkansas GIS Office. This orthoimagery acquisition is in accordance with the state's GIS Strategic Business Plan.

Purpose for Amendment To extend the contract date

**Reason for Amendment** 

No material change

- 101100	asiy itovicwou c		il dots Nepolt							
Item#	Vendor I	Name	Contract No.	Amend No.	Method of Procure	ment	Cont	ract Pe	eriod	Service Type
2	UNIVERSITY OF MEDICAL SO		4600031919	10	Intergovernmenta	al 07/01/	2014	То	06/30/2020	PCS
Ori	ginal Contract Amount		nt Annual ct Amount	Amen	dment Amount	Original T Projected A			Updated Tot Projected Amo	
\$	6,803,634.23	\$7,60	02,750.45	\$	150,000.00	\$6,803,63	4.23		\$47,625,439.	61
Agency		_	ency Name			Divisio	n			
0710	Δ	rkansas Depart	tment of Human	Services	Division of	f Aging Adults 8 Service		oral He	alth	
Contrac	t Summary	(DBHS-RTI) a treatment of p	s an integral cor sychiatric disord	mponent of ers and tra	i-10-120, created the I f the Arkansas DHS, C aining of mental health of Arkansas for Medi	Division of Behavi professionals.	vioral He Pursuan	alth Se t to Act	ervices, for the store 1082, the DBHS	udy and S-RTI may
Purpose	e for Amendment				Arkansas State Hospit ental health professio		this con	itract th	nat provides for th	ne study
Reason	for Amendment									
No mate	erial change									

			•						
Item#	IKASO CONSULTING LL		Contract No.	Amend No.	Method of Procurem	ent Cont	tract P	eriod	Service Type
3	IKASO CON	SULTING LLC	4600043715	02	Invitation for Bid	01/01/2019	То	12/31/2020	PCS
Original Contrac Amount \$380,700.00		Current Annual Contract Amount \$380,700.00		Amen	dment Amount \$0.00	Original Total Projected Amount \$380,700.00		Updated Tot Projected Amo \$380,700.0	ount
Agency	#	Ag	jency Name			Division			
0710		Arkansas Depa	rtment of Human	Services		Office of Procurement			
Contract	: Summary	complex and Children and Compressive	costly information Family's (DCFS)	n technolo Children's	nal procurement service gy system replacement s Reporting Information Systems (CCWIS) stand	solicitations including System (CHRIS) system	replace	ement of the Divis	sion of

Purpose for Amendment Amend to extend to continue professional procurement services.

#### **Reason for Amendment**

No material change

Item#	Vendor Name	dor Name Contract No. Amend No. Method of Procurement			Con	Service Type		
4	COUNSELING CLINIC INC	4600044360 02		Request for Qualifications	07/01/2019	То	06/30/2020	PCS

Original Contract Amount	Current Annual Contract Amount	Amendment Amount	Original Total Projected Amount	Updated Total Projected Amount
\$990,464.25	\$1,010,464.25	\$20,000.00	\$6,933,249.75	\$6,933,249.75

Agency # Agency Name Division

O710 Arkansas Department of Human Services Division of Aging Adults & Behavioral Health Services

**Contract Summary** To initiate an agreement for the continued provision of mental health services.

**Purpose for Amendment** Amend to add additional funding to this Community Health Center contract for Forensic Evaluations and Forensic Outreach Restoration Program (FORP).

**Reason for Amendment** 

No material change

Item#	Vendor I	Name	Contract No.	Amend No.	Method of Procu	rement	Cont	ract Pe	riod	Service Type
5	DELTA COU ASSOCI		4600044361	02	Request for Qualif	ications	07/01/2019	То	06/30/2020	PCS
	inal Contract Amount 955,926.13	Contra	nt Annual act Amount 6,926.13		dment Amount \$11,000.00	Proj	riginal Total jected Amount 6,691,482.91		Updated Tot Projected Amo \$6,691,482.9	ount
Agency	#	Ag	ency Name				Division			
0710	A	Services	Division	of Aging	Adults & Behavion Services	oral He	alth			
Purpose	for Amendment		l additional fundir each Restoration		Community Mental I (FORP).	Health Ce	enter contract for l	Forensi	c Evaluations ar	nd

### Reason for Amendment

No material change

	isiy iteviewea e									
Item#	Vendor I	Name	Contract No.	Amend No.	Method of Procure	ement	Contr	act Pe	eriod	Service Type
6	WESTERN AI COUNSELING 8		4600044362	03	Request for Qualific	ations	07/01/2019	То	06/30/2020	PCS
	ginal Contract Amount	Contra	ent Annual act Amount		dment Amount	Proje	riginal Total ected Amount		Updated Tot Projected Amo	ount
\$:	2,223,618.73	\$2,3	315,618.73	;	\$92,000.00	\$1	5,565,331.11		\$15,565,331.	11
Agency	<i>,</i> #	Αç	gency Name				Division			
0710	А	irkansas Depa	rtment of Human	Services	Division of		Adults & Behavio Services	ral He	alth	
Contrac	t Summary	To initiate an	agreement for th	e continue	ed provision of mental	health s	ervices.			
Purpose	for Amendment		d additional fundii reach Restoratior		Community Mental He (FORP).	ealth Cer	nter contract for F	orens	ic Evaluations an	d
Reason f	or Amendment									
No mate	rial change									

1 10 1100	asiy iteviewea e	oci vices com	tracts report							
Item#	Vendor I	Name	Contract No.	Amend No.	Method of Proc	urement	Cont	ract Pe	eriod	Service Type
7	CENTERS FOR FAMILIES		4600044363	02	Request for Qual	lifications	07/01/2019	То	06/30/2020	PCS
	ginal Contract Amount 1,977,586.85	Contra	nt Annual ect Amount 12,586.85		dment Amount 135,000.00	Proj	riginal Total ected Amount 3,843,107.95		Updated Tot Projected Amo \$13,843,107.	ount
Agency	y #	Age	ency Name				Division			
0710	А	rkansas Depar	tment of Human	Services	Divisio	on of Aging	Adults & Behavior Services	oral He	alth	
Contrac	t Summary	To initiate an a county	agreement for th	e continue	d provision of mer	ntal Health	services. Service	cover	age area is South	n Pulaski
Purpose	e for Amendment		I additional fundi each Restoratior		Community Mental (FORP).	Health Ce	nter contract for	Forens	ic Evaluations an	d
Reason	for Amendment									
No mate	erial change									

1 10 110	usiy iteviewed e		tradio report							
ltem#	Vendor N	Name	Contract No.	Amend No.	Method of Procure	ement	Contr	act Pe	eriod	Service Type
8	NORTHEAST A		4600044364	02	Request for Qualific	cations	07/01/2019	То	06/30/2020	PCS
	ginal Contract Amount 55,135,957.85	Contra	nt Annual act Amount 61,957.85		dment Amount 126,000.00	Proj	riginal Total ected Amount 5,951,704.95		Updated Tot Projected Amo \$35,951,704.	ount
Agenc	y #	Age	ency Name				Division			
0710	) А	rkansas Depar	tment of Human	Services	Division	of Aging	Adults & Behavio Services	oral He	ealth	
Contrac	et Summary	Service cover	age areas are Fu	ulton, Izard	d provision of menta I, Sharp, Randolph, ( Woodruff, St. Franci	Clay, Lav	vrence, Greene, I			
Purpos	e for Amendment	Amend to add Forensic Outr	d additional fundir each Restoratior	ng to this 0 n Program	Community Mental H (FORP).	ealth Cei	nter contract for F	orens	ic Evaluations an	d
Reason	for Amendment									
No mate	erial change									

	<u> </u>		<u> </u>							
Item#	Vendor I	Name	Contract No.	Amend No.	Method of Procu	ırement	Cont	ract Pe	eriod	Service Type
9 R	SOUTH ARI EGIONAL HEAI		4600044365	02	Request for Qualit	fications	07/01/2019	То	06/30/2020	PCS
A	al Contract mount 17,839.27	Contra	ent Annual act Amount 57,839.27		dment Amount \$40,000.00	Proj	riginal Total jected Amount 9,224,874.89		Updated Tot Projected Amo \$9,224,874.	ount
Agency #		Ag	ency Name				Division			
0710	А	rkansas Depar	tment of Human	Services	Division	n of Aging	Adults & Behavior Services	oral He	ealth	
Contract S	ummary		agreement for th vada,Ouachita a		ed provision of ment counties	tal health s	services. Geogra	phical (	coverage area is	Calhoun,
Purpose fo	or Amendment		d additional fundi each Restoration		Community Mental ( (FORP).	Health Ce	nter contract for	Forens	ic Evaluations ar	nd
Reason for No materia	Amendment I change									

	,									
Item#	Vendor I	Name	Contract No.	Amend No.	Method of Procure	ement	Cont	ract Pe	eriod	Service Type
10	SOUTHEA BEHAVIORAL H	-	4600044366	02	Request for Qualific	ations	07/01/2019	То	06/30/2020	PCS
	ginal Contract Amount 1,400,151.90	Contra	ent Annual act Amount 96,351.90		dment Amount \$96,200.00	Proje	riginal Total ected Amount 9,801,063.30		Updated Tot Projected Amo \$9,801,063.3	ount
Agency	<i>,</i> #	Ag	ency Name				Division			
0710	А	rkansas Depar	Adults & Behavio Services	oral He	ealth					
Contrac	t Summary		agreement for th rant, Jefferson, a		ed provision of menta Counties.	health s	ervices. Service	cover	age areas are Ar	kansas,
Purpose	for Amendment		d additional fundi reach Restoration		Community Mental Ho (FORP)	ealth Cer	nter contract for F	- orens	ic Evaluations an	d
	or Amendment rial change									

Previous	siy Kevieweu S	ei vices con	iracis Report							
Item#	Vendor N	Name	Contract No.	Amend No.	Method of Procu	rement	Contr	ract Pe	eriod	Service Type
11	SOUTHWEST / COUNSELING		4600044367	02	Request for Qualif	ications	07/01/2019	То	06/30/2020	PCS
	inal Contract Amount ,151,023.24	Contra	ent Annual act Amount 81,023.24		dment Amount 130,000.00	Proje	riginal Total ected Amount 3,057,162.68		Updated Total Projected Amo \$8,057,162.6	unt
Agency	#	Ag	ency Name				Division			
0710	А	rkansas Depar	tment of Human	Services	Division		Adults & Behavio Services	oral He	alth	
Contract	Summary				d provision of mentar, Little River, Lafay			ead Co	unties.	
Purpose	for Amendment		d additional fundir each Restoration		Community Mental F (FORP).	Health Cer	nter contract for F	- orensi	ic Evaluations an	d
	or Amendment									
No mater	ial change									

- I TOVIOU	Siy iteviewed e		Tradio Roport							
Item#	Vendor N	Vendor Name Contra			Method of Procurement		Contract Period			Service Type
12	OUACHITA R COUNSELII		4600044484	<b>No.</b> 02	Request for Qualific	ations	07/01/2019	То	06/30/2020	PCS
_	inal Contract Amount ,632,751.93	Contra	ent Annual act Amount 12,751.93		dment Amount \$80,000.00	Proje	ginal Total cted Amount ,429,263.51		Updated Total Projected Amo \$11,429,263.8	unt
Agency	#	Ag	ency Name			[	Division			
0710	А	rkansas Depai	rtment of Human	Services	Division of		Adults & Behavio Services	ral He	alth	
Contract	Summary		agreement for the		d provision of mental	health se	ervices. Coveraç	ge are	a is Clark, Garlan	nd, Hot
Purpose	for Amendment		d additional fundii reach Restoration		Community Mental He (FORP).	ealth Cent	ter contract for F	orens	ic Evaluations an	d
	or Amendment									

Previou	isiy Reviewed S	services Con	racts Report							
Item#	Vendor I	Name	Contract No.	Amend No. Method of Procurement		Cont	ract Pe	eriod	Service Type	
13	COUNSELING A		4600044486	04	Request for Qualifi	cations	07/01/2019	То	06/30/2020	PCS
Oriç	ginal Contract Amount	Contra	nt Annual ct Amount		dment Amount		iginal Total ected Amount		Updated Tot Projected Amo	
\$2	2,591,486.02	\$2,92	20,971.84	;	\$71,000.00	\$18	8,140,402.14		\$18,140,402.	14
Agency	#	Age	ency Name				Division			
0710	А	rkansas Depart	ment of Human	Services	Division		Adults & Behavio Services	oral He	alth	
Contrac	t Summary		agreement for the		ed provision of menta	al health s	ervices. Covera	ge are	a is Pope, Yell, F	aulkner,
Purpose	for Amendment		additional fundir each Restoration		Community Mental H (FORP).	lealth Cen	nter contract for I	-orensi	ic Evaluations an	d
Reason f	or Amendment									
No mate	rial change									

Previou	isiy Reviewed a	Services Con	tracts Report							
Item#	Vendor	Name	Contract No.	Amend No.	Method of Procui	rement	Cont	ract Pe	eriod	Service Type
14	OZARK GUIDAN INC		4600044487	03	Request for Qualifi	ications	07/01/2019	То	06/30/2020	PCS
Orig	ginal Contract Amount		nt Annual ct Amount	Amen	dment Amount		iginal Total ected Amount		Updated Total Projected Amo	
\$-	4,447,227.86	\$5,92	29,657.02	\$	120,000.00	\$3	1,130,595.02		\$31,130,595.	02
Agency	<i>,</i> #	Age	ency Name				Division			
0710	A	Arkansas Depart	tment of Human	Services	Division		Adults & Behavio Services	oral He	alth	
Contrac	t Summary				d provision of menta dison, and Newton o		ervices. Covera	ge are	a is Benton, Carr	oll,
Purpose	for Amendment		l additional fundir each Restoration		Community Mental F (FORP).	Health Cer	nter contract for I	Forensi	ic Evaluations an	d
Reason f	or Amendment									
No mate	rial change									

Item#	Vendor I	Name	Contract No.	Amend No.	Method of Procurer	ment	Cont	ract P	eriod	Service Type
15	PROFESS COUNSELING A		4600044488	02	Request for Qualifica	tions	07/01/2019	То	06/30/2020	PCS
	inal Contract Amount 2,202,082.95	Contra	ent Annual act Amount 362,082.95		dment Amount 160,000.00	Projec	ginal Total cted Amount ,414,580.65		Updated Tot Projected Amo \$15,414,580.	ount
Agency	#	Ag	gency Name				Division			
0710	Д	rkansas Depa	rtment of Human	Services	Division of		dults & Behavio Services	oral He	ealth	
ontract	Summary	To initiate an Pulaski coun		e continue	d provision of mental h	nealth se	rvices. Covera	ge are	a is Lonoke, Prai	rie and
Purpose	for Amendment	Amend to ad Forensic Out	d additional fundi reach Restoration	ng to this ( n Program	Community Mental Hea (FORP).	alth Cent	er contract for	Forens	ic Evaluations ar	d
eason fo	or Amendment									
lo matei	ial change									

Item# Vendor		Name	Contract No.	Amend No.	Method of Procureme	ent Cont	tract P	eriod	Service Type
19	AGATE SOFT	WARE INC	4501851064	02	Sole Source by Justification	02/25/2019	То	02/24/2020	TGS
	inal Contract Amount 158,620.00	Contr	ent Annual act Amount 83,570.00	Amen	dment Amount \$0.00	Original Total Projected Amount \$158,620.00		Updated To Projected Amo \$183,570.0	ount
Agency	#	Αg	gency Name			Division			
0960		Arkan	sas State Police						
Contract	Summary	Implementati	on of Intelligrants	, an electro	onic grants managemen	t system for the High	way Sa	fety Office	
Purpose	for Amendment	Amendment order.	is to change the \	WBS codin	g from Federal fiscal ye	ar 2019 to 2020 on th	e rema	ining funds appli	ed to this
eason fo	or Amendment								
lo matei	rial change								

Date Submitted 12/23/2019	Vendor SAFEH SECURITY	AVEN GROUP	Contract No. RA20190056UAF	Contract Period 03/23/2019 12/30/2023	Method of Procurem Request f	<b>ent</b> or	Initial Con Amour \$140,656	nt	Total Projected Amount \$140,656.68
Agency #	LL( Agency N		Division		ntact Name		/ Contact		Agency Contact
0135	University of A		UA Fayetteville				<b>Phone No.</b> 479-575-5314		E-mail Address ellenf@uark.edu
Item #	Category	Short De	escription		Qua	ntity	UM Descri	ption	Cost
00001	Services	Security	Services		000	001	each		\$140,656.68
Date Submitted 01/03/2020	<b>Vendor</b> WATERSHE		Contract No. 4600045833	Contract Period 01/01/2020	Method of Procurem Request f	ent	Initial Con Amour \$40,000	nt	Total Projected Amount \$280,000.00
	AND COM	IMUNITY		12/31/2023	Qualification	-			
<b>Agency #</b> 0425	Agency N		Division	• •	ontact Name	Pho	/ Contact ne No.	DECI	Agency Contact E-mail Address
0425	Insurance Dep	partment		Веску	y Crow	501-3	71-2612	BEC	KY.CROW@ARKANSAS. GOV
Item #	Category	Short De	escription		Qua	ntity	UM Descri	ption	Cost
00001	Personnel	PRO SE	RVICE,COMPENSA	ATION FEE	400	000	Lump Su	ım	\$1.00
Date Submitted 01/03/2020	<b>Vendor</b> HOUSEABO		Contract No. 4600045834	Contract Period 01/01/2020	Method of Procurem Request f	ent	Initial Con Amour \$35,000	nt	Total Projected Amount \$245,000.00
01/00/2020			10000 1000 1	12/31/2023	Qualification	ons	. ,		
<b>Agency #</b> 0425	Agency N Insurance Dep		Division		ontact Name y Crow	Pho	y Contact ne No. 71-2612	BEC	Agency Contact E-mail Address KY.CROW@ARKANSAS. GOV
Item #	Category	Short De	escription		Qua	ntity	UM Descri	ption	Cost
00001	Personnel		RVICE,COMPENSA	ATION FEE	350	-	Lump St		\$1.00
Date Submitted 01/03/2020	<b>Vendor</b> HOUSEABO		<b>Contract No.</b> 4600045835	Contract Period 01/01/2020 To 12/31/2023	Method of Procurem Request f	<b>ent</b> or	Initial Con Amour \$25,000	nt	Total Projected Amount \$175,000.00
Agency #	Agency N	ame	Division		ontact Name	Agency	/ Contact		Agency Contact
0425	Insurance Dep		2		y Crow		<b>ne No.</b> 71-2612	BEC	E-mail Address KY.CROW@ARKANSAS. GOV
Item #	Category	Short De	escription		Qua	ntity	UM Descri	ption	Cost
00001	Personnel		RVICE,COMPENSA	ATION FEE	250	<del>-</del>	Lump St		\$1.00

Date Submitted 01/03/2020	Vendor AREA AGE AGING OI	NCY ON F WEST	<b>Contract No.</b> 4600045841	Contract Period 01/01/2020 12/31/2023	Method of Procurem Request to Qualification	<b>ent</b> for	Initial Con Amou \$40,000	nt	Total Projected Amount \$280,000.00
Agency #	CENT Agency Na		Division		ntact Name		cy Contact		Agency Contact
0425	Insurance Dep		2	Becky Crow			<b>Phone No.</b> 501-371-2612 BE		E-mail Address (Y.CROW@ARKANSAS. GOV
Item #	Category	Short De	scription		Qua	ntity	UM Descr	iption	Cost
00001	Personnel	PRO SEI	RVICE,COMPENS	SATION FEE	400	000	Lump S	um	\$1.00
Date Submitted 01/03/2020	<b>Vendor</b> HOUSEABO		<b>Contract No.</b> 4600045842	Contract Period 01/01/2020 12/31/2023	Method of Procurem Request 1 Qualification	<b>ent</b> or	Initial Co Amou \$35,000	nt	Total Projected Amount \$245,000.00
Agency #	Agency N	ame	Division		ntact Name		cy Contact one No.		Agency Contact
0425	Insurance Dep	partment		Becky	/ Crow		-371-2612	BEC	<b>E-mail Address</b> (Y.CROW@ARKANSAS. GOV
Item #	Category	Short De	scription		Qua	ntity	UM Descr	iption	Cost
00001	Personnel	PRO SEI	RVICE,COMPENS	SATION FEE	350	000	Lump S	um	\$1.00
Date Submitted 01/03/2020	<b>Vendor</b> HOUSEABO		<b>Contract No.</b> 4600045843	Contract Period 01/01/2020 12/31/2023	Method of Procurem Request for Qualification	<b>ent</b> for	Initial Co Amou \$35,000	nt	Total Projected Amount \$245,000.00
Agency #	Agency N	ame	Division		ntact Name		cy Contact		Agency Contact
0425	Insurance Dep				/ Crow		one No. -371-2612	BEC	E-mail Address (Y.CROW@ARKANSAS. GOV
Item #	Category	Short De	scription		Qua	ntity	UM Descr	iption	Cost
00001	Personnel	PRO SEI	RVICE,COMPENS	SATION FEE	350	000	Lump S	um	\$1.00
Date Submitted	Vendor		Contract No.	Contract Period	Method o	ent	Initial Con	nt	Total Projected Amount
01/03/2020	HOUSEABO	OTTI INC	4600045857	01/01/2020 12/31/2023	Request f Qualification		\$35,000	J.UU	\$245,000.00
Agency #	Agency N	ame	Division		ntact Name		cy Contact one No.		Agency Contact E-mail Address
0425	Insurance Dep	partment		Becky	/ Crow		-371-2612	BEC	CY.CROW@ARKANSAS. GOV
Item #	Category	Short De	escription		Qua	ntity	UM Descr	iption	Cost

# **PCS/TGS - Executed Contracts**

Date Submitted 01/03/2020	Vendor HOUSEABO		<b>Contract No.</b> 4600045858	Contract Period 01/01/2020 12/31/2023	d Procurement D20 Request for		Initial Contract Amount \$35,000.00		Total Projected Amount \$245,000.00
Agency #	Agency Na	ame	Division	Agency Cor	ntact Name	_	cy Contact one No.		Agency Contact E-mail Address
0425	Insurance Dep	artment		Becky	Crow		-371-2612	BEC	CY.CROW@ARKANSAS. GOV
Item #	Category	Short De	scription		Quai	ntity	UM Descrip	tion	Cost
00001	Personnel	PRO SEI	RVICE,COMPENS	ATION FEE	350	000	Lump Su	m	\$1.00
Date Submitted	Vendor	Name	Contract No.	Contract Period	Method o		Initial Cont Amoun		Total Projected Amount
12/11/2019	BERNHARD	TME LLC	4600045795	12/09/2019 12/08/2020	Request for Qualification		\$46,121.	00	\$46,121.00
Agency #	Agency Na	ame	Division	Agency Cor	ntact Name		cy Contact one No.		Agency Contact E-mail Address
0865	Departmer Arkansas Her Central Admini	ritage -		DAH Pur	chasing	501-	-324-9580	laura	a.wallace@arkansas.gov
Item #	Category	Short De	scription		Quai	ntity	UM Descrip	tion	Cost
00002	Personnel	PRO SEI	RVICE,REIMBURS	SARLE EXPENSE	S 030	000	each		\$1.00
	i ersonner	I INO OLI	(VIOL,IKEIIVIDOIKE	MOLL LAN LINGL	.0	,00	0		¥•

Date Submitted 12/20/2019	Vendor ARKANSAS LABORATO	TESTING	<b>Contract No.</b> 4600043879	Contract Period 01/06/2019 01/05/2021	Method of Procuremon Competitive	ent Bid	Initial Contr Amount \$48,884.0	<b>Amount</b> 0 \$48,884.00
Agency #	Agency Na	ame	Division	Agency Cor	tact Name		Contact ne No.	Agency Contact E-mail Address
0900	Department of and Touri			CARA I	BONO			cara.clemmons@arkansas.gov
Item #	Category	Short De	scription		Quai	ntity	UM Descript	ion Cost
00021	Services	TECH SE	RVICE,WASTEW	ATER TESTING	000	)18	each	\$11.00
00020	Services	TECH SE	RVICE,WASTEW	ATER TESTING	000	)18	each	\$11.00
00019	Services	TECH SE	RVICE,WASTEW	ATER TESTING	000	)24	each	\$154.00
00018	Services	TECH SE	RVICE,WASTEW	ATER TESTING	000	)24	each	\$77.00
00017	Services	TECH SE	RVICE,WASTEW	ATER TESTING	000	)24	each	\$116.00
00016	Services	TECH SE	RVICE,WASTEW	ATER TESTING	000	004	each	\$116.00
00015	Services	TECH SE	RVICE,WASTEW	ATER TESTING	000	)24	each	\$154.00
00014	Services	TECH SE	RVICE,WASTEW	ATER TESTING	000	)24	each	\$116.00
00013	Services	TECH SE	RVICE,WASTEW	ATER TESTING	000	)24	each	\$82.00
00012	Services	TECH SE	RVICE,WASTEW	ATER TESTING	000	)24	each	\$82.00
00011	Services	TECH SE	RVICE,WASTEW	ATER TESTING	000	)24	each	\$82.00
00010	Services	TECH SE	RVICE,WASTEW	ATER TESTING	000	)24	each	\$116.00
00009	Services	TECH SE	RVICE,WASTEW	ATER TESTING	000	)24	each	\$143.00
80000	Services	TECH SE	RVICE,WASTEW	ATER TESTING	000	)24	each	\$148.00
00007	Services	TECH SE	RVICE,WASTEW	ATER TESTING	000	)24	each	\$77.00
00006	Services	TECH SE	RVICE,WASTEW	ATER TESTING	000	)24	each	\$104.00
00005	Services	TECH SE	RVICE,WASTEW	ATER TESTING	000	)24	each	\$88.00
00004	Services	TECH SE	RVICE,WASTEW	ATER TESTING	000	)24	each	\$187.00
00003	Services	TECH SE	RVICE,WASTEW	ATER TESTING	000	)24	each	\$77.00
00002	Services	TECH SE	RVICE,WASTEW	ATER TESTING	000	)24	each	\$82.00
00001	Services	TECH SE	ERVICE,WASTEW	ATER TESTING	000	)24	each	\$116.00

Item#	Vendor Name	Contract No.	Amend No.	Method of Procurement	Contract Period		Service Type	
1	TRUMMAN OPS INC	4600045589	01	Emergency	10/10/2019	То	04/30/2020	PCS

Original Contract Amount	Current Annual Contract Amount	Amendment Amount	Original Total Projected Amount	Updated Total Projected Amount
\$640,000.00	\$640,000.00	\$0.00	\$640,000.00	\$640,000.00

Agency # Agency Name Division

O710 Arkansas Department of Human Services Division of Provider Services & Quality

Assurance

Provide management for nursing facilities taken into receivership by DHS on various dates between September 30, 2019 and October 3, 2019. Facilities affected include: Trumman Ops, Inc., for Arlington Cove Healthcare, LLC, in

**Contract Summary** Poinsett County.

Coverage area: Poinsett County

Purpose for Amendment Amend to extend for time only for nursing home management

**Reason for Amendment** 

No material change

Amend Service **Contract Period Vendor Name** Contract No. Item# **Method of Procurement** No. Type **OLA OPS INC** 4600045592 01 PCS Emergency То 10/10/2019 04/30/2020 2

**Original Contract Current Annual Original Total Updated Total Amendment Amount Projected Amount** Amount **Contract Amount Projected Amount** \$640,000.00 \$0.00 \$640,000.00 \$640,000.00 \$640,000.00

Agency # **Agency Name** Division

Division of Provider Services & Quality 0710 Arkansas Department of Human Services

Assurance

**Contract Summary** NURSING FACILITIES TAKEN INTO RECEIVERSHIP

Purpose for Amendment Amend to extend time only for nursing home management.

#### **Reason for Amendment**

No material change

Item#	Vendor Name	Contract No.	Amend No.	Method of Procureme	ent Cont	ract Pe	eriod	Service Type
3	SCITY OPS INC	4600045593	01	Emergency	10/10/2019	То	04/30/2020	PCS
A	nal Contract Amount 40,000.00	Current Annual Contract Amount \$640,000.00	Amen	dment Amount \$0.00	Original Total Projected Amount \$640,000.00		Updated Tot Projected Amo \$640,000.0	ount
Agency #		Agency Name			Division			
0710	Arkansa	as Department of Human	Services	Division o	of Provider Services &	Qualit	V	

**Contract Summary** 

Provide management for nursing facilities taken into receivership by DHS on various dates between September 30, 2019, and October 3, 2019. Facilities affected include: SCity Ops, Inc., for Star City Nursing Center, PLLC, dba Lincoln Heights Healthcare in Lincoln County.

Assurance

Purpose for Amendment Amend to extend for time only.

#### **Reason for Amendment**

No material change