

STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES

CONTRACT AMENDMENT

Contractor: Colonial Cooperative Care, Inc.
Contractor Address: 45 Salem Tpke, Norwich, CT .06360
Contract Number: 09DSS1201EL / 104CCC-MED-02
Amendment Number: A6
Amount as Amended: \$9,219,450.00
Contract Term as Amended: 7/1/2009 to 6/30/2018

The contract between Colonial Cooperative Care, Inc. ("Contractor") and the Connecticut Department of Social Services ("Department"), which was last executed by the parties and approved by the Office of the Attorney General on 7/10/2009, and previously amended on 8/14/14, 3/3/15, 8/31/15, 4/25/16, 7/26/16 is hereby further amended as follows:

1. The total maximum amount payable under this contract has increased by \$1,331,100 from \$7,888,350 to \$9,219,450 to support services provided for SFY 2018.
2. For the period of 7/1/17 through 6/30/18, Part A, Section VIII. labeled PAYMENTS, subsection c of Amendment 5 is deleted and the following is substituted in lieu thereof:
 - c. The Contractor will submit and sign monthly invoices at the amount of \$110,925 and submit to:

Mr. Peter Palermino
CT Department of Social Services
Economic Security Unit
55 Farmington Ave
Hartford, CT 06105
peter.palermino@ct.gov

All terms and conditions of the original Contract, and any subsequent amendments thereto, which were not modified by this Amendment remain in full force and effect.

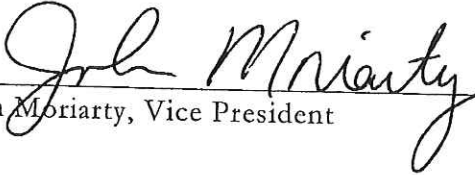
SIGNATURES AND APPROVALS

09DSS1201EL/104CCC-MED-02 A6

The Contractor IS a Business Associate under the Health Insurance Portability and Accountability Act of 1996 as amended.

CONTRACTOR

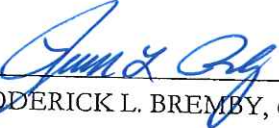
Colonial Cooperative Care, Inc.



John Moriarty, Vice President

6/12/17
Date

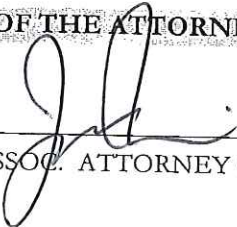
DEPARTMENT OF SOCIAL SERVICES



RODERICK L. BREMBY, Commissioner

6/13/2017
Date

OFFICE OF THE ATTORNEY GENERAL



ASST. / ASSOC. ATTORNEY GENERAL (*Approved as to form*) Joseph Rubin

6/21/17
Date



STATE OF CONNECTICUT
NONDISCRIMINATION CERTIFICATION – Affidavit
By Entity
For Contracts Valued at \$50,000 or More

Documentation in the form of an affidavit signed under penalty of false statement by a chief executive officer, president, chairperson, member, or other corporate officer duly authorized to adopt corporate, company, or partnership policy that certifies the contractor complies with the nondiscrimination agreements and warranties under Connecticut General Statutes §§ 4a-60(a)(1) and 4a-60a(a)(1), as amended

INSTRUCTIONS:

For use by an entity (corporation, limited liability company, or partnership) when entering into any contract type with the State of Connecticut valued at \$50,000 or more for any year of the contract. Complete all sections of the form. Sign form in the presence of a Commissioner of Superior Court or Notary Public. Submit to the awarding State agency prior to contract execution.

AFFIDAVIT:

I, the undersigned, am over the age of eighteen (18) and understand and appreciate the obligations of

an oath. I am John Moravsky of Colonial Cooperative Care, an entity
Signatory's Title Name of Entity

duly formed and existing under the laws of Connecticut.
Name of State or Commonwealth

I certify that I am authorized to execute and deliver this affidavit on behalf of
Colonial Cooperative Care and that Colonial Cooperative Care
Name of Entity Name of Entity

has a policy in place that complies with the nondiscrimination agreements and warranties of Connecticut

General Statutes §§ 4a-60(a)(1) and 4a-60a(a)(1), as amended.

John Moravsky
Authorized Signatory

John Moravsky
Printed Name

Sworn and subscribed to before me on this 7th day of June, 20 17.

Michelle Lynn McLean
Commissioner of the Superior Court/
Notary Public

MICHELLE LYNN MCLEAN
NOTARY PUBLIC
MY COMMISSION EXPIRES DEC 31, 2018 Expiration Date



MICHELLE LYNN MCLEAN
NOTARY PUBLIC
MY COMMISSION EXPIRES DEC. 31, 2018



STATE OF CONNECTICUT GIFT AND CAMPAIGN CONTRIBUTION CERTIFICATION

Written or electronic certification to accompany a State contract with a value of \$50,000 or more, pursuant to C.G.S. §§ 4-250, 4-252(c) and 9-612(f)(2) and Governor Dannel P. Malloy's Executive Order 49.

INSTRUCTIONS:

Complete all sections of the form. Attach additional pages, if necessary, to provide full disclosure about any lawful campaign contributions made to campaigns of candidates for statewide public office or the General Assembly, as described herein. Sign and date the form, under oath, in the presence of a Commissioner of the Superior Court or Notary Public. Submit the completed form to the awarding State agency at the time of initial contract execution and if there is a change in the information contained in the most recently filed certification, such person shall submit an updated certification either (i) not later than thirty (30) days after the effective date of such change or (ii) upon the submittal of any new bid or proposal for a contract, whichever is earlier. Such person shall also submit an accurate, updated certification not later than fourteen days after the twelve-month anniversary of the most recently filed certification or updated certification.

CHECK ONE: Initial Certification 12 Month Anniversary Update (Multi-year contracts only.)

Updated Certification because of change of information contained in the most recently filed certification or twelve-month anniversary update.

GIFT CERTIFICATION:

As used in this certification, the following terms have the meaning set forth below:

- 1) "Contract" means that contract between the State of Connecticut (and/or one or more of its agencies or instrumentalities) and the Contractor, attached hereto, or as otherwise described by the awarding State agency below;
- 2) If this is an Initial Certification, "Execution Date" means the date the Contract is fully executed by, and becomes effective between, the parties; if this is a twelve-month anniversary update, "Execution Date" means the date this certification is signed by the Contractor;
- 3) "Contractor" means the person, firm or corporation named as the contractor below;
- 4) "Applicable Public Official or State Employee" means any public official or state employee described in C.G.S. §4-252(c)(1)(i) or (ii);
- 5) "Gift" has the same meaning given that term in C.G.S. § 4-250(1);
- 6) "Principals or Key Personnel" means and refers to those principals and key personnel of the Contractor, and its or their agents, as described in C.G.S. §§ 4-250(5) and 4-252(c)(1)(B) and (C).

I, the undersigned, am a Principal or Key Personnel of the person, firm or corporation authorized to execute this certification on behalf of the Contractor. I hereby certify that, no gifts were made by (A) such person, firm, corporation, (B) any principals and key personnel of the person firm or corporation who participate substantially in preparing bids, proposals or negotiating state contracts or (C) any agent of such, firm, corporation, or principals or key personnel who participates substantially in preparing bids, proposals or negotiating state contracts, to (i) any public official or state employee of the state agency or quasi-public agency soliciting bids or proposals for state contracts who participates substantially in the preparation of bid solicitations or request for proposals for state contracts or the negotiation or award of state contracts or (ii) any public official or state employee of any other state agency, who has supervisory or appointing authority over such state agency or quasi-public agency.

I further certify that no Principals or Key Personnel know of any action by the Contractor to circumvent (or which would result in the circumvention of) the above certification regarding **Gifts** by providing for any other Principals, Key Personnel, officials, or employees of the Contractor, or its or their agents, to make a **Gift** to any Applicable Public Official or State Employee. I further certify that the Contractor made the bid or proposal for the Contract without fraud or collusion with any person.

CAMPAIGN CONTRIBUTION CERTIFICATION:

I further certify that, on or after January 1, 2011, neither the Contractor nor any of its principals, as defined in C.G.S. § 9-612(f)(1), has made any **campaign contributions** to, or solicited any contributions on behalf of, any exploratory committee, candidate committee, political committee, or party committee established by, or supporting or authorized to support, any candidate for statewide public office, in violation of C.G.S. § 9-612(f)(2)(A). I further certify that **all lawful campaign contributions** that have been made on or after January 1, 2011 by the Contractor or any of its principals, as defined in C.G.S. § 9-612(f)(1), to, or solicited on behalf of, any exploratory committee, candidate committee, political committee, or party committee established by, or supporting or authorized to support any candidates for statewide public office or the General Assembly, are listed below:

Lawful Campaign Contributions to Candidates for Statewide Public Office:

<u>Contribution Date</u>	<u>Name of Contributor</u>	<u>Recipient</u>	<u>Value</u>	<u>Description</u>
0				

Lawful Campaign Contributions to Candidates for the General Assembly:

<u>Contribution Date</u>	<u>Name of Contributor</u>	<u>Recipient</u>	<u>Value</u>	<u>Description</u>
0				

Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement.

Colonial Cooperative Case
 Printed Contractor Name

JL Moriarty
 Signature of Authorized Official

John Moriarty
 Printed Name of Authorized Official

Subscribed and acknowledged before me this 7th day of June, 2017

Michelle Lynn McLean
 Commissioner of the Superior Court (or Notary Public)

MICHELLE LYNN MCLEAN
NOTARY PUBLIC
 MY COMMISSION EXPIRES DEC. 31, 2018

My Commission Expires



STATE OF CONNECTICUT

Written or electronic PDF copy of the written certification to accompany a large state contract pursuant to P.A. No. 13-162 (Prohibiting State Contracts With Entities Making Certain Investments In Iran)

Respondent Name: _____

INSTRUCTIONS:

- CHECK ONE: [] Initial Certification. [] Amendment or renewal.

A. Who must complete and submit this form. Effective October 1, 2013, this form must be submitted for any large state contract, as defined in section 4-250 of the Connecticut General Statutes. This form must always be submitted with the bid or proposal, or if there was no bid process, with the resulting contract, regardless of where the principal place of business is located.

Pursuant to P.A. No. 13-162, upon submission of a bid or prior to executing a large state contract, the certification portion of this form must be completed by any corporation, general partnership, limited partnership, limited liability partnership, joint venture, nonprofit organization or other business organization whose principal place of business is located outside of the United States. United States subsidiaries of foreign corporations are exempt. For purposes of this form, a "foreign corporation" is one that is organized and incorporated outside the United States of America.

Check applicable box:

- [x] Respondent's principal place of business is within the United States or Respondent is a United States subsidiary of a foreign corporation. Respondents who check this box are not required to complete the certification portion of this form, but must submit this form with its Invitation to Bid ("ITB"), Request for Proposal ("RFP") or contract package if there was no bid process. [] Respondent's principal place of business is outside the United States and it is not a United States subsidiary of a foreign corporation. CERTIFICATION required. Please complete the certification portion of this form and submit it with the ITB or RFP response or contract package if there was no bid process.

B. Additional definitions.

- 1) "Large state contract" has the same meaning as defined in section 4-250 of the Connecticut General Statutes; 2) "Respondent" means the person whose name is set forth at the beginning of this form; and 3) "State agency" and "quasi-public agency" have the same meanings as provided in section 1-79 of the Connecticut General Statutes.

C. Certification requirements.

No state agency or quasi-public agency shall enter into any large state contract, or amend or renew any such contract with any Respondent whose principal place of business is located outside the United States and is not a United States subsidiary of a foreign corporation unless the Respondent has submitted this certification.

Complete all sections of this certification and sign and date it, under oath, in the presence of a Commissioner of the Superior Court, a Notary Public or a person authorized to take an oath in another state.

CERTIFICATION:

I, the undersigned, am the official authorized to execute contracts on behalf of the Respondent. I certify that:

- [] Respondent has made no direct investments of twenty million dollars or more in the energy sector of Iran on or after October 1, 2013, as described in Section 202 of the Comprehensive Iran Sanctions, Accountability and Divestment Act of 2010. [] Respondent has either made direct investments of twenty million dollars or more in the energy sector of Iran on or after October 1, 2013, as described in Section 202 of the Comprehensive Iran Sanctions, Accountability and Divestment Act of 2010, or Respondent made such an investment prior to October 1, 2013 and has now increased or renewed such an investment on or after said date, or both.

Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement.

John Miranay Printed Respondent Name

John Miranay Printed Name of Authorized Official

Signature of Authorized Official

Subscribed and acknowledged before me this 4th day of June, 2017. Michelle Lynn McLean Commissioner of the Superior Court (or Notary Public)

MICHELLE LYNN MCLEAN NOTARY PUBLIC MY COMMISSION EXPIRES DEC. 31, 2018

My Commission Expire





STATE OF CONNECTICUT CONSULTING AGREEMENT AFFIDAVIT

Not Applicable

Affidavit to accompany a bid or proposal for the purchase of goods and services with a value of \$50,000 or more in a calendar or fiscal year, pursuant to Connecticut General Statutes §§ 4a-81(a) and 4a-81(b). For sole source or no bid contracts the form is submitted at time of contract execution.

INSTRUCTIONS: We have no relationship w/ a consultant for State of CT business N/A

If the bidder or vendor has entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1): Complete all sections of the form. If the bidder or contractor has entered into more than one such consulting agreement, use a separate form for each agreement. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public. If the bidder or contractor has not entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1): Complete only the shaded section of the form. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public.

Submit completed form to the awarding State agency with bid or proposal. For a sole source award, submit completed form to the awarding State agency at the time of contract execution.

This affidavit must be amended if there is any change in the information contained in the most recently filed affidavit not later than (i) thirty days after the effective date of any such change or (ii) upon the submittal of any new bid or proposal, whichever is earlier.

AFFIDAVIT: [Number of Affidavits Sworn and Subscribed On This Day: 1]

I, the undersigned, hereby swear that I am a principal or key personnel of the bidder or contractor awarded a contract, as described in Connecticut General Statutes § 4a-81(b), or that I am the individual awarded such a contract who is authorized to execute such contract. I further swear that I have not entered into any consulting agreement in connection with such contract, except for the agreement listed below:

Table with columns: Consultant's Name and Title, Name of Firm (if applicable), Start Date, End Date, Cost, Description of Services Provided.

Is the consultant a former State employee or former public official? [] YES [] NO

If YES: n/a Name of Former State Agency Termination Date of Employment n/a

Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement. Colonial Cooperative Case, Signature of Principal or Key Personnel, Date 6/7/17, Printed Name of Bidder or Contractor, John Moroney, Awarding State Agency DSS

Sworn and subscribed before me on this 7th day of June, 2017. Michelle Lynn McLean, Commissioner of the Superior Court or Notary Public

My Commission Expires MICHELLE LYNN MCLEAN NOTARY PUBLIC MY COMMISSION EXPIRES DEC. 31, 2018

W-1270

STATE OF CONNECTICUT - DEPARTMENT OF SOCIAL SERVICES

REQUEST FOR PAYMENT

DSS ACCOUNTS PAYABLE

Voucher #: VR Processed by:

VR Date:

Voucher Approved by:

Date:

PAYEE INFORMATION

Vendor Invoice #: _____

Purchase/Contract Type:

PO

POS

PSA

MOA/TI

BOND

Vendor/Contractor Name: Colonial Cooperative Care, Inc.

Check One: Competitive

Non-Competitive

Business Address: 45 Salem Tpke, Norwich, CT .06360

Spending Plan Code:

ACU

CORE-CT Contract #:

09DSS1201EL A6

DSS Contract #:

104CCC-MED-02

PO #:

Receipt #

FEIN #:

061498411

Vendor # 0000016297

Contract Period:

From: 7/1/2009

To: 6/30/2018

Payment Period:

Total Contract: \$9,281,450.00

From:

To:

Previous Payments: \$ _____

Program is operating in compliance with Contract and expenditures have been incurred accordingly.

Authorization: John Moriarty

Contractor Name (print)

Contractor Signature

Date

DON'T FILL IN BELOW - THIS IS FOR DSS USE ONLY: DSS PROGRAM VERIFICATION - If multi funding source, provide all appropriate accounts.

Amount	Budget Reference	Fund	Department	Program	SID	Account	Project/Grant	Chartfield 1	Chartfield 2
\$	20		DSS					168	
\$	20		DSS					168	
\$	20		DSS					168	
\$	20		DSS					168	

I do certify that this program is operating in compliance with Contract and expenditures are authorized and properly chargeable as indicated.

Authorization: Peter Palermio

DSS PROGRAM STAFF REP Signature

Date

(860) 424-5006
Phone #

Co-sign (if required) Signature

Phone #

DSS FISCAL STAFF APPROVAL - Name (sign & date)

*Financial Report Required Yes No

*Financial Report within last 3 mos. Yes No

*Attach Explanation If Report Is More Than 3 Months Old

