

MEMORANDUM OF UNDERSTANDING

Ohio Department of Rehabilitation and Correction

AND

Automated Health Systems, Inc. and the Ohio Department of Medicaid

This Memorandum of Understanding (MOU) is entered into by and between the Ohio Department of Rehabilitation and Correction, hereinafter referred to as "ODRC", at 770 West Broad Street, Columbus, Ohio 43222 and Automated Health Systems, Inc., hereinafter referred to as "AHS", 505 High Street Suite 200, Columbus, Ohio 43215 and the Ohio Department of Medicaid, hereinafter referred to as "ODM", 50 West Town Street Suite 400, Columbus, Ohio 43215. AHS and ODM are collectively referred to as Providers. Collectively, ODRC and Providers are referred to as the "Parties".

WHEREAS, Providers provide inmate Medicaid enrollment services to the ODRC; and

WHEREAS, Providers have identified information on inmate in state custody that is necessary for the Medicaid enrollment process; and

WHEREAS, ODRC and Providers are authorized to enter into this MOU by Ohio Revised Code (ORC), Sections 5120.01 and 5120.09.

NOW THEREFORE, the Parties in consideration of the covenants herein contained do agree as follows:

A. Responsibilities:

1. ODRC will share inmate information set forth in Exhibit 1 (attached hereto and incorporated herein by reference) to Providers via web-browser VPN for connection to the Departmental Offender Tracking System "DOTS".
2. The Providers agree to use the inmate information for Medicaid enrollment purposes only and to not otherwise disseminate the information outside the agency without proper legal authority or consent from ODRC. In this regard the Providers acknowledge that inmate records are non-public under Ohio public record law in accordance with Section 5120.21 of the Ohio Revised Code.

3. ODRC shall maintain in good working condition the available inmate data. Changes to either system that may impact the quality or delivery of information shall be communicated in writing to the contact person identified by each party.
4. The Parties will identify persons to serve as contacts for the purpose of addressing technical and policy issues with the other party.

B. Modification and Termination

1. Parties to this MOU may request of the other Parties, in writing, a modification or amendment to this MOU. The Party receiving the request shall have forty-five (45) calendar days to respond to the request. Such modification or amendment to this MOU shall become effective only when signed and dated by duly designated representatives of all Parties.
2. This MOU may be terminated by the Parties upon mutual written agreement, within a mutually agreeable time period.

C. Indemnification

AHS shall indemnify, protect and hold harmless ODRC from and against any claim, loss, injury, damage, liability or suit involving its misuse of the ODRC information received by Providers under the terms of this MOU.

D. Applicable Law

This MOU is made pursuant to and shall be construed and interpreted in accordance with the applicable law of the State of Ohio.

E. Entire Agreement


This MOU constitutes the entire agreement between the Parties. It shall not be effective until signed by all Parties.

F. Assignment

Parties shall not assign this MOU without written consent of the other Parties.

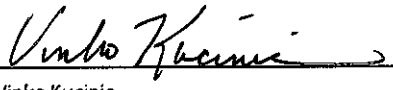
IN WITNESS WHEREOF, the Parties hereto do execute this MOU on the dates set forth below.

OHIO DEPARTMENT OF REHABILITATION AND CORRECTION



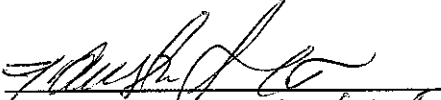
Stuart Hudson,
Managing Director, Healthcare & Fiscal Operations

9/2/14
Date



Vinko Kucinic,
Chief, Bureau of Information Technology

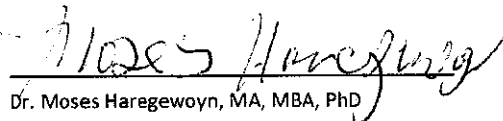
9/2/14
Date



Trevor Clark,
Legal Counsel, ODRC

9/2/14
Date


AUTOMATED HEALTH SYSTEMS, INC.



Dr. Moses Haregewoyn, MA, MBA, PhD
AHS Project Director

8/26/14
Date

OHIO DEPARTMENT OF MEDICAID



John McCarthy,
Director

8/28/14
Date

Exhibit 1

ODRC will make available information set forth in this Exhibit to the Providers via web-browser VPN for connection to the Departmental Offender Tracking System (DOTS). Basic Contractor access to DOTSPORTAL, printable "Detail" Summary Report from OSMRY Screen:

- Inmate ID
- Offender First Name
- Offender Last Name
- Offender Middle Initial
- Social Security Number (SSN)
- Lock – Housing Unit/Dorm the offender current resides
- Race – Race as defined by Federal guidelines (B, W, O)
- Institution – Current Institution acronym (ACI, BECI, CCI)
- Offender Identifiers (Hair Color, Eye Color, Height, Weight, and Gender)
- Security Level
- Admit Date – Date admitted to ODRC
- Latest Job – current job assignment
- County of Commitment – County felony commission occurred
- Federal Bureau Identification Number (BCI)
- Bureau Criminal Identification Number (FBI)
- Court Case Number
- Most Serious Offense
- Alias Names
- Other Inmate Numbers
- Offense Data – Offense, Start, Counts, CL, JTC, Gun Years, Def/Term, Min/County, Docket Number, Felony Degree
- Detainer Information
- Hearing Information
- Movement Information
- Status Information
- Classification Information