



**Texas Department of Insurance**  
**Purchase Order # 45400 16-0167**

Payment Terms: **NET30** Freight Terms: **FOB Destination** Ship Via: **VNDR** PCC: **D** Date: **09/01/15** PO Method: **DG** Dispatch: **Dispatch Via Print** Rev Dt:

**PLEASE NOTE: ADDITIONAL TERMS AND CONDITIONS ARE LISTED AT THE END OF THE PURCHASE ORDER.**

**Vendor:** CCH INCORPORATED  
 PO BOX 4307  
 CAROL STREAM IL 601974307  
 United States

**Ship To:** 2F0032  
 7915 Cameron Road  
 Austin TX 78754  
 United States

**Vendor ID:** 1133504158

**Purchaser:** JoAnn Johnson  
**Phone:** 512/676-6150  
**Fax:** 512/463-6159  
**Email:** joann.johnson@tdi.texas.gov

**Bill To:** Attn: Acctng - Mail Code 108-3A  
 P. O. Box 149104  
 Austin TX 78714-9104  
 United States

**Fax:**  
**Email:** Invoices@tdi.texas.gov

**PO Information:**

Online access to Medicare and Medicaid Guide for four users in General Counsel Division, Office of Policy Development Counsel  
 CCH Medicare and Medicaid Guide - internet version for law firms  
 Subscription period: 9/1/15 - 8/31/16.

Account No. 4001424183

Subscription Period: September 1, 2015 through August 31, 2016

Vendor contact:  
 Chito F. Reyes, Ph: (888) 381-3847, Email: chito.reyes@wolterskluwer.com

TDI Contact:  
 Contract Monitor: Liz Morris, Ph: (512) 463-6139, Email: liz.morris@tdi.texas.gov

Contract Administrator: Dana Burton, Ph: (512) 305-7528, Email: dana.burton@tdi.texas.gov

TDI has determined an advance payment is required due to the following circumstances: A state agency may make an advance payment to a vendor who is selling specialized or proprietary goods or services to the agency if the vendor requires the payment to be made in advance. (reference State of Texas Purchase Policies and Procedures Guide, Chapter 2, Section 2.002).

Certification. The terms of the contract are considered complete and payment can be made when the terms and conditions of the order have been met and the goods and/or services have been certified.

Online access to Medicare and Medicaid Guide (Law Firms) for up to five users @ \$3,079.00  
 Four users in General Counsel Division, Office of Policy Development Counsel @ \$615.80 /user = \$2,463.20  
 One user in Compliance Division @ \$615.80 (PR 13426 submitted by Gloria Neenan)  
 Subscription period: 9/1/2015 to 8/31/2016  
 See Line 1 attachment for renewal information from vendor.

Vendor: Wolters Kluwer (<http://www.wolterskluwer.com>)  
 Vendor contact: Stephanie Davis | Healthcare Solutions Manager | Healthcare Regulatory Coding Solutions  
 Wolters Kluwer Law Business  
 stephanie.davis@wolterskluwer.com  
 Toll-free phone/fax: 888-348-6388

**Authorized Signature**

*JoAnn Johnson, CFP*

**08/31/2015**



**Texas Department of Insurance**  
**Purchase Order # 45400 16-0167**

Line-Sch	Line Description	Class/Item	Quantity	UOM	Unit Price	Extended Amt	Due Date
1- 1	Online access to Medicare and Medicaid Guide for four users in General Counsel Division, Office of Policy Development Counsel	956/35	4.0000	EA	615.80000	2463.20	09/01/2015
						<b>Schedule Total</b>	<input type="text" value="2463.20"/>
						<u>ReqID:</u> 0000013559	
						<b>Item Total for Line # 1</b>	<input type="text" value="2463.20"/>
2- 1	CCH Medicare and Medicaid Guide - internet version for law firms Subscription period: 9/1/15 - 8/31/16.	956/35	12.0000	MO	51.32000	615.84	09/01/2015
						<b>Schedule Total</b>	<input type="text" value="615.84"/>
						<u>ReqID:</u> 0000013426	
<p>Medicare Medicaid Guide - internet version            Total subscription cost for FY16 is \$3,079.00.            Legal will pay for four users (\$2,463.20) and Consumer Protection will pay for one user (\$615.80).            Subscription for (FY16) 09-01-15 to 08-31-16</p> <p>Note to purchasing:            Please combine PR#13426 with PR#13559 and assign to the same purchaser.</p> <p>Reference: (FY15) PR#10939 PO#7395</p> <p>Vendor: Wolters Kluwer Law Business            Contact person: Chito F. Reyes            Toll Free Phone Fax: 888.381.3847            chito.reyes@wolterskluwer.com</p>							
						<b>Item Total for Line # 2</b>	<input type="text" value="615.84"/>

**Total PO Amount**

All Shipments, Shipping papers, invoices and correspondence must be identified with our Purchase Order Number. Overshipments will not be accepted unless authorized by Buyer prior to Shipment.

**Authorized Signature**  
  
08/31/2015



**Texas Department of Insurance**  
**Purchase Order # 45400 16-0167**

**Terms and Conditions:**

The Purchase Order Terms and Conditions can be found at:

<http://www.tdi.texas.gov/general/aspurch.html>

**Authorized Signature**

*Jean Johnson, CFP*

**08/31/2015**