

Croft, Celeste

From: Web Form Poster <mcanada@icji.in.gov>
Sent: Tuesday, July 25, 2017 8:46 AM
To: IG Info
Cc: zakers@www.in.gov
Subject: CONFLICTS OF INTEREST - CONTRACTS

INDIANA
STATE ETHICS COMMISSION

JUL 25 2017

FILED

PART 1 - GENERAL INFORMATION

Name (Last): Canada
Name (First): Meredith
Name (Middle): Lauren

Office Address: 101 W. Washington St., Ste. 1170 East Tower
City: Indianapolis
Zip Code: 46204

Title or position within agency: Research Associate Name of agency: Indiana Criminal Justice Institute Office Telephone: 317-232-7174

Email Address: mcanada@icji.in.gov

PART 2 - CONTRACT

List the name for each entity (i.e. vendor, contractor, consultant, subcontractor, or subconsultant) in which you have a financial interest that has a contract with a state agency. Also, list the name of the state agency the entity is contracting with (use a different form for each contract) Wexford Health, contracted medical provider for the Indiana Department of Correction

Entity's business name: Wexford Health

Entity's business name:

This contract was:
made after public notice and, if applicable, through competitive bidding

Description(s) of Contract(s): (Describe the type of contract involved and the effective date and term of the contract if reasonably determinable.) Wexford Health became the contracted medical provider to the Indiana Department of Correction on or about April 1, 2017.

I do not know any of the other terms of the contract.

Description of the Financial Interest: (Describe in what manner the state officer, employee, or special state appointee expects to derive a financial interest from or otherwise has a pecuniary interest in, the above contract. State the approximate dollar value of the interest if reasonably determinable. Attach extra pages if additional space is needed.)

am employed with Wexford Health as a Mental Health Professional on an as-needed basis outside of regular business hours at ICJI.

Wexford's contract was in place with the Indiana Department of Correction (IDOC) prior to the start of my employment with ICJI.

I believe their contract started on or about April 1, 2017 and I began my employment at ICJI on April 3, 2017.

I am paid hourly to provide mental health services to offenders incarcerated with the IDOC.

I do not engage in any business or use any state resources related to my work with Wexford during my regularly scheduled ICJI duties.

PART 3 - AGENCY CERTIFICATION

Approval of appointing authority (to be completed in the case of a contract for professional services only.) Being the (Title of Appointing Authority) of (Name of Contracting Agency)

I hereby affirm that no other state officer, employee, or special state appointee of (Name of the Contracting Agency) is available to perform those services as part of the regular duties of the state officer, employee, or special state appointee.

(Name of Appointing Authority) (Signature)

PART 4 - AFFIRMATION

I submit this statement to the Inspector General pursuant to 42 IAC 1-5-7 (IC 4-2-6-10.5) to disclose my financial interest in a contract with an agency. This contract can be performed without compromising the performance of my official duties and responsibilities as a state officer, employee or special state appointee. I affirm that I do not participate in or have contracting responsibility for the contracting agency. I further affirm that the contract was made after public notice or competitive bidding, if applicable. I also affirm, under penalty of perjury, the truth and completeness of the statements made above and that I am the above named state officer, employee, or special state appointee.

Signed: Meredith Lauren Canada Date: 7/25/2017