

Arkansas Department of Human Services

RFP: 710-23-074

Eligibility Support Services



Technical Proposal

REDACTED ELECTRONIC

May 8, 2024
1:00 p.m. Central Time

Prepared for:

Arkansas Department of Human Services

Attn: Office of Procurement
P.O. Box 1437 Slot W345
700 Main Street
Little Rock, AR 72203-1437

Prepared by:



Automated Health Systems, Inc.

9370 McKnight Road, Suite 300
Pittsburgh, PA 15237

RESPONSE SIGNATURE PAGE

Type or print the following information.

PROSPECTIVE CONTRACTOR'S INFORMATION					
Company:	Automated Health Systems				
Address:	9370 McKnight Rd. Suite 300				
City:	Pittsburgh	State:	PA	Zip Code:	15237
Business Designation:	<input type="checkbox"/> Individual <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Public Service Corp <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit				
Minority and Women Owned Designation*:	<input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> American Indian <input type="checkbox"/> Service-Disabled Veteran <input type="checkbox"/> African American <input type="checkbox"/> Hispanic American <input type="checkbox"/> Women-Owned <input type="checkbox"/> Asian American <input type="checkbox"/> Pacific Islander American				
AR Certification #: _____ * See Minority and Women-Owned Business Policy					
PROSPECTIVE CONTRACTOR CONTACT INFORMATION					
<i>Provide contact information to be used for solicitation related matters.</i>					
Contact Person:	Joseph P. Cain III, CPA	Title:	Chief Financial Officer		
Phone:	412-367-3030 Ext. 2210	Alternate Phone:	412-956-7092		
Email:	ahsexecutivegroup@automated-health.com				
CONFIRMATION OF REDACTED COPY					
<input checked="" type="checkbox"/> YES, a redacted copy of submission documents is enclosed. <input type="checkbox"/> NO, a redacted copy of submission documents is <u>not</u> enclosed. I understand a full copy of non-redacted submission documents will be released if requested.					
<i>Note: If a redacted copy of the submission documents is not provided with Prospective Contractor's response packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), will be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See Solicitation Terms and Conditions for additional information.</i>					
ILLEGAL IMMIGRANT CONFIRMATION					
By signing and submitting a response to this <i>Solicitation</i> , a Prospective Contractor agrees and certifies that they do not employ or contract with illegal immigrants and shall not employ or contract with illegal immigrants during the term of a contract awarded as a result of this solicitation.					
ISRAEL BOYCOTT RESTRICTION CONFIRMATION					
By checking the box below, a Prospective Contractor agrees and certifies that they do not boycott Israel and shall not boycott Israel during the term of a contract awarded as a result of this solicitation.					
<input checked="" type="checkbox"/> Prospective Contractor does not and shall not boycott Israel.					

An official authorized to bind the Prospective Contractor to a resultant contract shall sign below.

The signature below signifies agreement that any exception that conflicts with a Requirement of this *Solicitation* may cause the Prospective Contractor's response to be rejected.

Authorized Signature: _____ Title: Chief Financial Officer

Printed/Typed Name: Joseph P. Cain III, CPA Date: May 7, 2024

SECTIONS 1 – 4: VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are NON-mandatory **must** be declared below or as an attachment to this page. Vendor **must** clearly explain the requested exception and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements **shall** cause the vendor's proposal to be disqualified.

AHS takes no exceptions.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

Authorized Signature: _____



Use Ink Only.

Printed/Typed Name: _____

Joseph P. Cain III, CPA

Date: _____

May 3, 2024

State of Arkansas
DEPARTMENT OF HUMAN SERVICES
700 South Main Street
P.O. Box 1437 / Slot W345
Little Rock, AR 72203

ADDENDUM 1

TO: All Addressed Vendors
FROM: Office of Procurement
DATE: April 25, 2024
SUBJECT: 710-24-074 Eligibility Support Services

The following change(s) to the above referenced RFP have been made as designated below:

- ☐ Change of specification(s)
☒ Additional specification(s)
☐ Change of bid opening date and time
☐ Cancellation of bid
☒ Other

OTHER


- Attachment K – Remove and replace with 710-23-074 Attachment K Revised
- Attachment J – Remove and replace with 710-23-074 Attachment J Revised

ADDITIONAL SPECIFICATION(S)

- Section 4.1 Payment and Invoice Provisions – add the following language:
This could refer to Attachment C, Page 7 - After satisfactory presentation and review of the monthly status report by the Contractor, the deliverable will be signed off and the invoice can be submitted.
- Or for a shorter version – Contractor will invoice for monthly services. [710-19-1023 Attachment H Invoice Procedures.pdf \(arkansas.gov\)](#)

The specifications by virtue of this addendum become a permanent addition to the above referenced RFP. Failure to return this signed addendum may result in rejection of your proposal.

If you have any questions, please contact: Karrie Goodnight, DHS.OP.Solicitations@dhs.arkansas.gov (501) 320-3903



Vendor Signature
Automated Health Systems

5/3/24

Date

Company

Contract Number _____
Attachment Number _____
Action Number _____
Failure to complete all of the following information may result in a delay in obtaining a contract, lease, purchase agreement, or grant award with any Arkansas State Agency.
SUBCONTRACTOR: _____ SUBCONTRACTOR NAME: _____

CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM

☐ Yes ☒ No

TAXPAYER ID NAME: Automated Health Systems
IS THIS FOR: Goods? ☐ Services? ☒ Both? ☐

YOUR LAST NAME: _____ FIRST NAME: _____ M.I.: _____

ADDRESS: 9370 McKnight Road, Suite 300

city: Pittsburgh STATE: PA ZIP CODE: 15237 COUNTRY: USA

AS A CONDITION OF OBTAINING, EXTENDING, AMENDING, OR RENEWING A CONTRACT, LEASE, PURCHASE AGREEMENT, OR GRANT AWARD WITH ANY ARKANSAS STATE AGENCY, THE FOLLOWING INFORMATION MUST BE DISCLOSED:

FOR INDIVIDUALS *

Indicate below if: you, your spouse or the brother, sister, parent, or child of you or your spouse is a current or former: member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee:

Position Held	Mark (✓)		Name of Position of Job Held [senator, representative, name of board/ commission, data entry, etc.]	For How Long?		What is the person(s) name and how are they related to you? [i.e., Jane Q. Public, spouse, John Q. Public, Jr., child, etc.]	Relation
	Current	Former		From MM/YY	To MM/YY		
General Assembly							
Constitutional Officer							
State Board or Commission Member							
State Employee							

☐ None of the above applies

FOR AN ENTITY (BUSINESS) *

Indicate below if any of the following persons, current or former, hold any position of control or hold any ownership interest of 10% or greater in the entity: member of the General Assembly, Constitutional Officer, State Board or Commission Member, State Employee, or the spouse, brother, sister, parent, or child of a member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee. Position of control means the power to direct the purchasing policies or influence the management of the entity.

Position Held	Mark (✓)		Name of Position of Job Held [senator, representative, name of board/ commission, data entry, etc.]	For How Long?		What is the person(s) name and what is his/her % of ownership interest and/or what is his/her position of control?	
	Current	Former		From MM/YY	To MM/YY	Person's Name(s)	Ownership Interest (%) Position of Control
General Assembly							
Constitutional Officer							
State Board or Commission Member							
State Employee							

☒ None of the above applies

Contract Number _____
Attachment Number _____
Action Number _____

Contract and Grant Disclosure and Certification Form

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this contract. Any contractor, whether an individual or entity, who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the agency.

As an additional condition of obtaining, extending, amending, or renewing a contract with a state agency I agree as follows:

1. Prior to entering into any agreement with any subcontractor, prior or subsequent to the contract date, I will require the subcontractor to complete a **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM**. Subcontractor shall mean any person or entity with whom I enter an agreement whereby I assign or otherwise delegate to the person or entity, for consideration, all, or any part, of the performance required of me under the terms of my contract with the state agency.
2. I will include the following language as a part of any agreement with a subcontractor:

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this subcontract. The party who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the contractor.
3. No later than ten (10) days after entering into any agreement with a subcontractor, whether prior or subsequent to the contract date, I will mail a copy of the **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM** completed by the subcontractor and a statement containing the dollar amount of the subcontract to the state agency.

I certify under penalty of perjury, to the best of my knowledge and belief, all of the above information is true and correct and that I agree to the subcontractor disclosure conditions stated herein.

Signature  Title Chief Financial Officer Date May 2, 2024

Vendor Contact Person Joseph P. Cain III, CPA Title Chief Financial Officer Phone No. (412) 367-3030

Agency use only

Agency Number 0710 Name Department of Human Services

Agency Contact Person

Contact Phone No.

Contact or Grant No.



AUTOMATED HEALTH SYSTEMS, INC.

410 EQUAL EMPLOYMENT OPPORTUNITY

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I. POLICY

Automated Health Systems, Inc. ("AHS") is an Equal Opportunity Employer. AHS treats, views and evaluates all employees and applicants solely on the basis of ability, qualifications and other job-specific requirements in all phases of employment. In accordance with the Civil Rights Act, the Age Discrimination in Employment Act, the Americans with Disabilities Act (ADA), and all other applicable local, state and federal laws and regulations, it is against AHS policy to discriminate against any employee or applicant for employment on account of characteristics covered by law (see Section IV for characteristics appropriate to specific jurisdictions). In addition, it is the policy of AHS to comply with all federal and state laws concerning the reasonable accommodation of qualified individuals who are employees or applicants with a disability.

II. EMPLOYEES COVERED

This policy covers all employees and applicants of AHS.

III. DEFINITIONS

Equal Opportunity: Equal Opportunity means that all employees and applicants are recruited, hired, paid, promoted, transferred, and afforded benefits and training opportunities without discrimination on account of characteristics protected by law.

Discrimination: The unlawful treatment of a person or group, either intentionally or unintentionally, based on a characteristic protected by law.

Disability: Disability is either a physical or mental impairment that substantially limits a major life activity of an individual, or the perception of such an impairment. Disability does not include the use of illegal drugs.

Reasonable Accommodation: Includes any changes to the work environment or to terms of employment intended to enable a qualified individual with a disability to perform the essential functions of his or her job. This may include making existing facilities readily accessible to and usable by individuals with disabilities, job restructuring, part-time or modified work schedules, telecommuting, reassignment to a vacant position, acquisition or modification of equipment or devices, appropriate adjustment or modifications of examinations, training materials or policies, the provision of qualified readers or interpreters, and other similar accommodations for individuals with disabilities.

Qualified Individual: An individual who, with or without reasonable accommodation, can perform the essential functions of the employment position that such individual holds or desires.

Essential Functions of the Job: Job activities that are determined by the employer to be essential or core to performing the job; these functions cannot be modified.



III. DEFINITIONS (continued)

Undue Hardship: An action requiring significant difficulty or expense by the employer. When determining whether an accommodation would impose an undue hardship, AHS will consider several factors including the nature and cost of the accommodation.

Major Life Activities: Including caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating and working.

Direct Threat: A significant risk to the health, safety or well-being of individuals with disabilities or others when this risk cannot be eliminated by reasonable accommodation.

IV. PROCEDURE

A. Under federal law, protected characteristics include color, race, religion sex (including pregnancy, gender identity and sexual orientation), national origin, age, genetic information and disability. As AHS has offices in multiple states, refer to the following appropriate state-specific policy:

Delaware

In addition to the federal protected characteristics, Delaware law prohibits discrimination based on marital status, and any other characteristic protected by state or applicable local law.

Florida

In addition to the federal protected characteristics, Florida and Tallahassee law prohibit discrimination based on marital status and any other characteristic protected by state or applicable local law.

Illinois

In addition to the federal protected characteristics, Illinois law prohibits discrimination based on marital status, citizenship status, military status, unfavorable discharge from military service and any other characteristic protected by state or applicable local law.

Indiana

In addition to the federal protected characteristics, Indiana law prohibits discrimination based on ancestry, veteran status, off-duty tobacco use, sealed or expunged arrest or conviction record and any other characteristic protected by state or applicable local law.

Maryland

In addition to the federally protected characteristics, Maryland law prohibits discrimination based on marital status, genetic identity and any other characteristic protected by state or applicable local law.



IV. PROCEDURE (continued)

Nebraska

In addition to the federal protected characteristics, Nebraska law prohibits discrimination based on marital status and any other characteristic protected by state or applicable local law.

Ohio

In addition to the federal protected characteristics, Ohio law prohibits discrimination based on military status and any other characteristic protected by state or applicable local law.

Pennsylvania

In addition to the federal protected characteristics, Pennsylvania law prohibits discrimination based on having a GED rather than a high school diploma, the use, handling or training of a guide or support animal for disability or relationship to a person with a disability and any other characteristic protected by state or applicable local law.

Rhode Island

In addition to the federal protected characteristics, Rhode Island law prohibits discrimination based on AIDS/HIV status, status as a victim of domestic abuse, or expression, homelessness and any other characteristic protected by state or applicable local law.

Wyoming

In addition to the federal protected characteristics, Wyoming law prohibits discrimination based on childbirth and related medical conditions, military service or status and off-duty tobacco use.

- B. Automated Health Systems will not discriminate or use discriminatory practices or tests during any and all phases of employment (new hires, transfers, or promotions) by following these guidelines:
1. All personnel responsible for hiring and promoting employees, and for the development and implementation of programs or activities, are required to support and follow this AHS Equal Opportunity Policy in an appropriate manner for the contract/project.
 2. Advertisements related to recruitment will not express a preference for applicants of a particular class and will also announce the fact that AHS is an Equal Opportunity Employer. AHS will advertise positions in media outlets that will provide information and access to the underserved populations.
 3. All candidates for open positions will be considered based upon educational background, experience, skills, merit and the ability to perform essential job functions only.



AUTOMATED HEALTH SYSTEMS, INC.

410 EQUAL EMPLOYMENT OPPORTUNITY

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IV. PROCEDURE (continued)

4. Where lines of progression are used, they shall be based only on length of service and/or job-related qualifications.
5. All protected classes will have equal opportunity to participate in training programs sponsored by AHS.
- C. When an individual with a disability requests accommodation and can be reasonably accommodated to perform the essential functions of the position without creating an undue hardship, they will be given the same consideration as any other applicant.
- D. Applicants or employees will not be accommodated who pose a direct threat to the health, safety and well-being of themselves or others in the workplace when the threat cannot be eliminated by reasonable accommodation.
- E. Employees or applicants should contact the Human Resources Department with any questions or requests for accommodation.
- F. If an employee feels he/she has been discriminated or retaliated against, the employee should follow the Issue Resolution procedure (see Policy 505 Issue Resolution).

Effective Date: January 1996

Revision Date: June 2021
(February 2019)
(November 2016)
(January 2011)
(April 2004)

Approved: Kimberly A. Conner
Kimberly A. Conner, Executive Senior Vice President

PROPOSED SUBCONTRACTORS FORM

• **Do not** include additional information relating to subcontractors on this form or as an attachment to this form.

**PROSPECTIVE CONTRACTOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S)
TO PROVIDE SERVICES.**

Type or print the following information

Subcontractor's Company Name	Street Address	City, State, ZIP

☒ **PROSPECTIVE CONTRACTOR DOES NOT PROPOSE TO USE
SUBCONTRACTORS TO PERFORM SERVICES.**

INFORMATION FOR EVALUATION

- Provide a response to each item/question in this section. Prospective Contractor may expand the space under each item/question to provide a complete response.
- **Do not** include additional information if not pertinent to the itemized request.

See attached for AHS' responses.	Maximum RAW Score Available
E.1 Technical Approach and Solutions	
A. Provide a timeline and milestones for meeting requirements outlined in the solicitation.	5 points
B. Provide a detailed description of how the Prospective Contractor will implement services when the contract is signed.	5 points
C. Provide a list and description of reports provided in a previous project of similar size and scope such as staffing level reports, quality control reports, case and task processing, productivity monitoring and status reports.	5 points
D. Provide a Security Plan as outlined in section 2.8 of the solicitation.	5 points
E. Provide a detailed training plan including the amount of time for a new worker to be fully trained, maximum number of students per class, list of classes each person will take, passing scores, number of attempts to pass, how new policies and procedures will be trained, and approach to training new workers.	5 points
F. Provide a quality improvement plan that describes the Prospective Contractor's approach to quality assurance to meet 95% accuracy including quality control processes for monitoring the quality of performance, communicating deficiencies, and obtaining feedback.	5 points
E.2 Background, Experience and Qualifications	
A. Complete Attachment Client History Form (Question #1)	5 points
B. Provide resumes for all proposed key personnel which shall include relevant projects (past and current) that each individual has supported for state human service programs such as Medicaid, CHIP, SNAP, and TANF. Resumes shall not exceed four (4) pages and must demonstrate past eligibility support services work on at least one (1) eligibility system that supported multiple benefit programs. Resumes shall include the following information: <ol style="list-style-type: none"> 1. Client organization names. 2. Time periods worked. 3. Role of the proposed individual within each project. 4. Brief summary of the project scope. 5. Names, positions, and current telephone numbers of persons who can provide information on the proposed individuals' performance on at least two (2) projects. 6. Years of experience working with eligibility systems for state human services programs. 7. Formal education including degrees completed (Note: Formal education will not be substituted for experience). 8. Any technical certifications relevant to this project. 	5 points
C. Complete Attachment I Client History Form (Question #2)	5 points
E.3 Project Management, Organization and Staffing	
A. Provide an organizational chart that displays the overall business structure including proposed personnel job titles and lines of supervision	5 points
B. Describe the approach to project management and project control methods including the following:	

1. How the contract will be managed	5 points
2. How contract activities will be controlled	5 points
C. Describe the approach to project staffing:	
1. The screening and selection process for meeting staffing requirements	5 points
2. Staff management and support to ensure high retention rates	5 points
D. Provide a staffing continuity plan that allows for staffing need changes throughout the contract, including the ability to scale up or down quickly	5 points



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E.1 TECHNICAL APPROACH AND SOLUTIONS

Since our incorporation in 1979, Automated Health Systems (AHS) has provided program development and administration services related to eligibility, enrollment, outreach, education, etc., in collaboration with State healthcare services and administration programs. We bring:

- 45 years of Medicaid experience.
- 45 years of data entry experience.
- 35 years of Children's Health Insurance Program (CHIP)-related experience.
- 28 years of enrollment operations.
- 15 years of eligibility operations, including Medicaid (Modified Adjusted Gross Income [MAGI] and non-MAGI), CHIP, and childcare assistance.

We recognize the complexity of the Eligibility Support Services Project as well as the critical importance of accurate, timely, and policy-aligned operations. We developed our solution to meet the goals of the RFP and reflect the values of the Arkansas Department of Human Services (DHS).

E.1.A PROVIDE A TIMELINE AND MILESTONES

Provide a timeline and milestones for meeting requirements outlined in the solicitation.

We have planned for a three-month implementation of the Eligibility Support Services Project and have a structured approach to develop and produce deliverables, hire and train staff, and meet the anticipated Go-Live date. We have developed a draft Implementation Plan for the Eligibility Support Services Project (please see Appendix A) that identifies our timeframe for executing the implementation. We will use the following milestones for the implementation of the Eligibility Support Services Project:

- DHS approval of Key Personnel.
- Kickoff Meeting.
- DHS approval of Implementation Plan.
- DHS approval of Risk Management Plan.
- DHS approval of Security Plan.
- DHS approval of Training Plan.
- Successful completion of Readiness Review.

E.1.B DETAILED DESCRIPTION OF IMPLEMENTATION

Provide a detailed description of how the Prospective Contractor will implement services when the contract is signed.

We have a solid trajectory of timely implementations. Our success stems from rigorous execution of detailed Implementation Plans and company-wide expertise in implementation. We have executed complex implementations and understand the precision and factors that must be addressed during the launch of the Eligibility Support Services Project. Many of our implementations included components that exceeded the requirements of the Eligibility Support Services Project. We have successfully launched several contracts in a range of timeframes (Exhibit 1).

Exhibit 1. Sample Timelines for Recent Implementations

Project	Components Involved	Timeframe
Tennessee Health Connection (now)	<ul style="list-style-type: none">• CRM configuration• Omnichannel system installation	9 months



Project	Components Involved	Timeframe
TennCare Connect) Member Service Center	<ul style="list-style-type: none">• Facility set-up• Integration with State systems, including with the Tennessee Eligibility Determination System (TEDS)• Staff training	
Wyoming Customer Service Center	<ul style="list-style-type: none">• CRM configuration• Omnichannel system installation• Facility set-up for Cheyenne-based office• Coordination of work with Illinois-based Call Center• Access to State systems, including the Wyoming Eligibility System (WES)• Staff recruitment and training	5 months
Rhode Island Exchange Contact Center	<ul style="list-style-type: none">• CRM configuration• Omnichannel system installation• Access to the State's Integrated Eligibility System, RI Bridges• Facility set-up• Staff recruitment and training	3 months
Tennessee CoverKids (CHIP) Eligibility	<ul style="list-style-type: none">• CRM configuration• Integration with MAGI-in-the-Cloud for eligibility determination• Mailings production and generation• Staff training	6 months
Indiana Child Care Intake Agent Services	<ul style="list-style-type: none">• CRM configuration• Omnichannel system installation• Facility set-up for nine offices across the State• Access to the State's Automated Intake System for eligibility processing and determination• Staff recruitment and training	3 months
Missouri Beneficiary Support Services	<ul style="list-style-type: none">• Facility build out and set-up• Omnichannel system installation and configuration• Customer Relationship Management (CRM) system configuration• Access to State systems including the Missouri Eligibility and Enrollment System (MEDES)• Staff recruitment and training• Materials production and generation	9 months
Massachusetts Customer Service Center	<ul style="list-style-type: none">• Facility build out and set-up• Omnichannel system installation and configuration• CRM configuration• Access to multiple State systems, including the State's eligibility system, HIX/IES• Staff recruitment and training	6 months
North Carolina Unemployment Call Center	<ul style="list-style-type: none">• Omnichannel system installation and configuration• Staff recruitment and hiring	4 months



Project	Components Involved	Timeframe
	<ul style="list-style-type: none"> Access to multiple State systems, including the State's unemployment system for benefit determination 	
Delaware Enrollment Broker	<ul style="list-style-type: none"> Omnichannel system configuration Staff recruitment and training 	3 months
Nebraska Enrollment Broker	<ul style="list-style-type: none"> CRM configuration Omnichannel system installation Materials production and generation Access to State systems, including the State's eligibility system, ACCESSNebraska Staff training 	3 months

We have a history of implementing complex projects in a range of timeframes.

Within a mutually acceptable timeframe after contract award, we will conduct a kickoff meeting with DHS. The kickoff meeting will be jointly held with DHS' Contract Monitor, DHS-invited team members, the AHS Implementation Team, and our Project Key Personnel.

During the Kickoff Meeting, we will address the timelines for the implementation, requirements for Implementation Plans, service, invoice processing, monitoring, and other required Contract terms and conditions. We will gain input from DHS on our draft Implementation Plan. We will submit the Implementation Plan to DHS to allow time for sufficient review and modifications and incorporate any updates. We will finalize the Implementation Plan in accordance with DHS requirements. A sample slide from our Missouri Beneficiary Support Services Project kickoff meeting is provided in Exhibit 2.

★ Did You Know? ★

In our Missouri Beneficiary Support Services Project, we serve as the point of contact for entering applications, providing case information, and processing change report information related to MAGI/Non-MAGI cases. We serve several programs, including Medicaid, CHIP, Ticket-to-Work, Spend Down, and the Blind Pension Program.

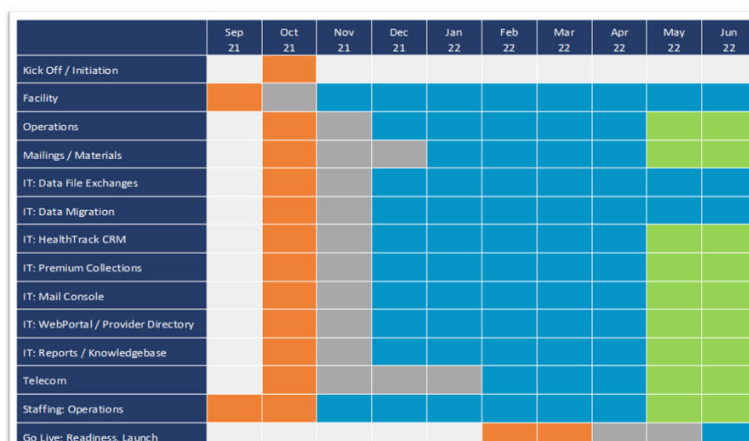
Exhibit 2. Sample Kickoff Meeting



Beneficiary Support & Premium Collections Solution & Services



Project Timeline



Legend	Definition	BSPC involvement
Blank	No activity	Low
Orange	Initiation / Planning	Low / Medium
Gray	Requirements / Meetings	High
Blue	Development, QA / Execution	Low
Green	Training / Documentation	Low

We review responsibilities and timelines in our kickoff meetings.



We are committed to ensuring a successful, timely Project launch, and we bring several features to the Project that support our ability to launch the Project in a rapid timeframe:

- **Flexibility:** We provide DHS with direct access to decision makers, which allows us to be maximally responsive to DHS' needs.
- **Experience:** Not only are we an experienced Medicaid Contractor, but we are experienced at implementing several large-scale Projects in rapid timeframes.
- **Proven Tools and Approaches:** Our methods, approaches, and tools have all been successfully used in our other Medicaid eligibility projects. We will not struggle with challenges of working through unknown solutions.
- **Relationships with Vendors:** We have established relationships with vendors such as Microsoft and Dell, which will enable us to quickly acquire all equipment needed for the Eligibility Support Services Project.
- **Completion of Preliminary Analysis:** We have thoroughly read the RFP, its Amendments, supporting documentation, and relevant documentation available through State websites. We have completed an in-depth analysis of the operational and technical requirements and are prepared to meet with DHS to begin implementation immediately.
- **Experienced Project Management Team:** We provide experienced Implementation and Management Teams who will establish and maintain a strong partner relationship to ensure a coordinated and well executed implementation and provision of eligibility support services.

Our implementation methodology is based on Project Management Body of Knowledge (PMBOK) principles and development and tracking of Implementation Plans and deliverables.

We will assign a top-performing Implementation Manager to lead the implementation. The Implementation Manager will verify that implementation work is performed according to schedule. The Implementation Manager will be complemented by the Key Management Team. They will be onsite to attend meetings as requested. The implementation will be supported by the guidance, expertise, and consultation of our TennCare Connect Team, who perform services similar to those required for the Eligibility Support Services Project. There are many benefits to this approach:

- Our TennCare Connect Team currently uses TEDS to provide Medicaid application, redetermination, and case maintenance updates for the TennCare population.
- TEDS was built by Deloitte, providing us with expertise in applying the system to Medicaid eligibility work.
- We have proven best practices that have enabled us to achieve high performance metrics and quality scores that we can apply to the Eligibility Support Services Project.
- We offer DHS a low-risk solution because processes and procedures are proven to perform well in a high-volume environment.
- We will accelerate the time from implementation to maximum operational productivity and performance due to our in-house expertise.

★ Did You Know? ★

We are actively supporting our Tennessee client with managing high volumes associated with the Public Health Emergency (PHE) unwinding. In fact, in March 2024, in our TennCare Connect Project, we processed 67,332 applications and task interactions, with a focus on renewal packets and various application types. We also processed 96,511 related documents representing 464,291 pages, which we scanned, validated, verified, and indexed to each case in TEDS.



- We minimize the burden on DHS because our solutions, approaches, policies, and procedures are already proven.

Our goal is to minimize the burden on DHS. We use several tools to complete the implementation:

- Structured Implementation Plan that identifies all deliverables, resources, due dates, and milestones.
- SharePoint site to serve as a comprehensive repository for all business rules, Project documentation, deliverables, and reports.
- Risk register to identify and track all real and emerging risks.
- Deliverables matrix to identify and track the priority, status, and due date of all deliverables.
- Weekly internal meetings with the Key Management Team and Senior Executive Team.
- Weekly dashboard reporting to DHS.
- Ongoing communication to DHS.

We ensure we provide DHS with a robust Implementation Team so that no deliverables are missed, and timelines remain on track. Of note, many Senior Executive Team members are directly involved in the implementation, so that emerging issues can be immediately escalated for prompt resolution. Risk management protocols can immediately be implemented without delay if ever needed.

Additional team members who are representative of the caliber of talent we assign to implementations include Ms. Jessica Emark, PMP, Mr. John Pastor, PMP, and Ms. Alicia Kempf, PHR, SHRM-CP.

- [REDACTED]
- [REDACTED]
- [REDACTED]

Implementation Plan

DHS must have confidence the vendor they select will be able to complete the implementation without disrupting service. This confidence comes with the selection of a vendor experienced with successfully implementing programs, including programs that are transitioning from an incumbent Contractor.

Our Implementation Plan specifies our schedule to launch the Project; details all deliverables, subtasks, and dependencies; and defines milestones. It clarifies all involved parties, including DHS, DHS-specified stakeholders, and AHS responsibilities. Our draft Implementation Plan is provided in Appendix A.

¹ The Project has expanded significantly since the launch. We now employ more than 800 staff members.



We provide full assurance to DHS that we will commit the necessary resources to ensure an on-time and seamless Go-Live.

Knowledge Transfer

During the implementation, we focus on learning the nuances of ARIES and obtaining maximum fluency and efficiency with the system's navigation. We have wide experience using a range of eligibility systems, operated by several contractors (Exhibit 3). This experience prepares us to use ARIES to properly perform eligibility activities.

Exhibit 3. Current Experience with State Systems

State	System	Contractor
Massachusetts	HIX/IES	Optum
Missouri	Medicaid Eligibility and Enrollment System (MEDES)	RedMane
Ohio	Ohio Benefits	Accenture
Rhode Island	RI Bridges	Deloitte
Tennessee	TEDS	Deloitte
Wyoming	WES	Northup Grumman (maintained by Deloitte)

We have vast experience with correctly using several State eligibility systems.

Communication and Coordination

There are five routes through which we ensure clear communication with DHS:

- Structured meetings.
- Ad hoc meetings.
- Email/phone communication.
- Project SharePoint site.
- Ongoing implementation status reports.

First, we anticipate we will participate in a series of structured meetings with DHS and DHS-specified Stakeholders. We will provide the agenda, minutes, and tracking of minutes for all meetings. Second, we anticipate that we may need to hold separate breakoff meetings for various topics (e.g., connectivity requirements to State systems are typically a meeting conducted with IT representatives from each entity). Third, a standard component of ongoing communication will be the daily calls and emails within all designated communication channels. A standard best practice we incorporate into our implementation is an email group. DHS simply needs to select this email address and it will automatically be sent to all team members, which relieves DHS of determining who to send a message to. Naturally, individual communication is always welcome, but we have found that this group email account greatly simplifies communication within our team and ensures that all members of our team are automatically up-to-the-minute on all issues that arise. All phone and email correspondence will take place in accordance with DHS protocols for communication and contact persons.

We also offer a Project SharePoint site, where we post all deliverables, agendas, meeting minutes, and Project documentation with the State. The site includes inherent versioning – key for tracking changes to deliverables – and serves as a single repository where DHS can access all needed information. Exhibit 4 depicts a sample SharePoint site for our Maryland Medicaid Provider Enrollment Project.



Exhibit 4. Sample SharePoint Site

Home EDIT LINKS

Maryland Provider Enrollment

Action Items Log

[+ new item](#) or [edit this list](#)

✓	Issue ID	Action Item	Assigned To	Priority	Due Date
There are no items to show in this view of the "Action Items Log" list.					

Q & A Log

[+ new item](#) or [edit this list](#)

✓	Issue ID	Title	Assigned To	Priority	Due Date
There are no items to show in this view of the "Q and A Log" list.					

Documents

[+ New](#) [Upload](#) [Sync](#) [Share](#) [More](#)

✓	Name	Modified	Modified By
	Deliverables	... February 27	Christine Osterlund
	ePREP Logs	... May 8	Christine Osterlund
	NTP Documents from DHMH	... March 13	Charles Crisp
	Operations	... April 16	Christine Osterlund
	Policies and Procedures	... April 14	Christine Osterlund
	Readiness Review	... March 10	Christine Osterlund
	Requirements Gathering	... March 13	Henry Orblson
	Status Meetings Agendas and Notes	... February 27	Christine Osterlund

Our Project SharePoint sites are intuitive and maximize transparency and communication.

Last, an essential tool in implementation success and communication is ongoing reports. We will work with DHS to establish project management and reporting standards, including attendance at weekly meetings. As implementation activities are conducted, we will produce regular reports demonstrating implementation progress.

Participate in Readiness Review Process

We will participate in all DHS-specified Readiness Review practices. We have several tools we use to facilitate a successful Readiness Review.

We use extensive implementation and deliverables tracking tools, which we use to verify all items required for Go-Live are complete. All documents and deliverables are posted to our SharePoint site throughout the implementation, so DHS can access and check off items as they are complete.

We will bring these successful best practices to the Eligibility Support Services Project to ensure a successful Readiness Review and smooth implementation. DHS is welcome in our facilities at any time to monitor our progress throughout the entire implementation. To successfully execute the Readiness Review, we will follow the steps identified in Exhibit 5.

★ Did You Know? ★

"As HealthSource Rhode Island is in the early stages of implementing our Exchange Contact Center administration to AHS, we have appreciated their collaborative, responsive, efficient, and innovative approach. They come to the table as partners."

– Meg Ivatts, Healthsource RI,
Former Chief Operating Officer

Exhibit 5. Steps to a Successful Readiness Review

Step	Description
Establish readiness items in advance	<ul style="list-style-type: none">• Prior to the Readiness Review, we will work with DHS to identify exactly what items will be assessed.• We will also determine the criteria to pass each item.
Publicize schedule	<ul style="list-style-type: none">• We will allocate appropriate time to assess each item.• The agenda will be distributed to both DHS and AHS team members.
Assign business owners	<ul style="list-style-type: none">• Each item will be assigned a business owner who will be responsible for demonstrating the item to DHS.
Dress rehearsals	<ul style="list-style-type: none">• We hold internal dress rehearsals to prepare for Readiness Review, which provides opportunities to practice and correct deficiencies.

We use straightforward keys to ensure we are prepared and organized.



If there are any outstanding tasks after completion of the Readiness Review, we will develop a corrective action plan (CAP) to be reviewed by DHS that will be implemented upon approval. Our adherence to schedules ensures that we allow enough time for these activities to occur and be checked for completion prior to Go-Live. After a successful Readiness Review, we ask DHS for formal written documentation of approval to launch.

Implementation Quality Management

The tools we use to ensure full QA for our implementation include but are not limited to the techniques detailed in Exhibit 6. These tools are incorporated as needed throughout the implementation.

Exhibit 6. Quality Assurance Tools

Tool	Description
Cost of Quality Analysis	<ul style="list-style-type: none">• Determines the extent to which resources are used for activities that prevent poor quality.• Targets quality improvement activities.
Control Charts	<ul style="list-style-type: none">• Graphical display of data over time and against established control limits.• Visualizes the scope of process variance.
Statistical Sampling	<ul style="list-style-type: none">• Samples a defined number of items according to established criteria.• Focuses on a quantitative analysis of a sample of data to ensure conformance to the target measurements.
Flow Charts	<ul style="list-style-type: none">• Visually depicts how processes should work.• Identifies how the tasks interrelate and critical dependencies.• Predicts where problems may occur.
Readiness Checklist	<ul style="list-style-type: none">• Used to track progress on key deliverables as we approach Go-Live.
Deliverables Checklists	<ul style="list-style-type: none">• Verifies all items are completed according to specified requirements.• Verifies the accuracy of the deliverable prior to submission for approval.

Our extensive tools to monitor progress result in an on-time implementation.

We apply additional tools to our implementation process:

- Implementation Weekly Progress Meetings and Dashboard Reports.
- Deliverables Matrix.
- Detailed Implementation Plan Updates.
- Status Meetings and Meeting Minutes.
- Structured Approach to Risk Management.

Implementation Weekly Progress Meetings and Dashboard Reports

The Key Management Team is responsible for producing a Weekly Progress Dashboard Report that summarizes implementation progress. The Weekly Progress Report will be delivered to DHS prior to each weekly meeting.

Deliverables Matrix

In addition to the Dashboard Report, we will use a Deliverables Matrix to track Project deliverables, including the Contract reference, due dates, personnel assigned, and any approvals to-date to ensure all deliverables are tracked throughout the implementation. Through this log, the Implementation Manager will track when all deliverables have been approved, conditionally approved (e.g., additional modifications must be made before approval will be granted) or denied. Exhibit 7 details a sample deliverables matrix from our Maryland Medicaid Provider Enrollment Project implementation.



Exhibit 7. Sample Deliverables Matrix

Deliverables					
RFP	Proposal	Name	Description (more in deliverable detail doc)	Due Date	Responsibility Notes
3.2.2.1	3.2.2.1	Re-Validation & Enrollment Plan	B. Development of Plan C. Required Items of Plan: Project Management Plan (Project Communication Plan, Project Risk Management Plan, Staffing Plan) Project/Work Plan Training Plan Data Conversion Plan Outreach Strategies including Contingency Plans Support Services including Problem Resolution and Escalation Recommended Order for Re-Val & Enrolling Detailed Description of Technology Schedule for Continuous Re-Val, method, and SOP Manual for contacting and deciding on Enrollment for each Provider every 5 years	60d from Contract Commencement	AHS will own plan, DH will provide input for relevant pieces
3.2.2.2	3.2.2.2	Provider Continuous Enrollment, Re-Validation, Re-Enrollment, & Update Plan	Project Management Plan (Project Communication Plan, Project Risk Management Plan, Staffing Plan) Project/Work Plan Training Plan Data Conversion Plan Outreach Strategies including Contingency Plans Support Services including Problem Resolution and Escalation Recommended Order for Re-Val & Enrolling Detailed Description of Technology Schedule for Continuous Re-Val, method, and SOP Manual for contacting and deciding on Enrollment for each Provider every 5 years	60d from Contract Commencement	AHS will own plan, DH will provide input for relevant pieces

We have full tracking of all deliverables.

Detailed Implementation Plan Updates

We will update our Implementation Plan on a weekly basis and submit the Plan to DHS. We will review all risk items on a weekly basis, giving both AHS and DHS an opportunity to proactively identify and respond to emerging items as related to Readiness Review deadlines before they become problematic. These reports will also include the updated Project schedules, near-term activities, and key milestones.

Following the implementation, we will transition from Implementation Plan updates to weekly and monthly operational reporting, which will detail our progress against SLAs.

Structured Approach to Risk Management

Risk management is a critical function within PMBOK methodology. The Risk Management Approach and Plan must be tailored to the scope and complexity of the Eligibility Support Services Project.

We utilize risk management to:

- Identify and avoid potential risks.
- Continually evaluate new risks that may not have been known earlier in the Project.
- Take a proactive and structured approach to manage negative outcomes if a risk occurs.
- Respond to all risks that occur.

Key elements outline our risk management approach:

- **Priority and Authority:** Risk management is a priority for leadership and throughout the program's management levels. Our Implementation Manager has the authority to execute action plans, mitigation steps, and contingency plans.
- **Requirements Analysis:** We complete extensive Requirements Analysis sessions to document all requirements up-front, which prevents future definitions at the last minute.
- **Prioritize Risks:** Our Key Management Team will prioritize all risks (e.g., risks that have a cascading effect and impact multiple levels of the operation are the biggest priority).
- **Scheduling:** We schedule ample time to complete deliverables using a mix of workhour estimating methods. We schedule tasks so critical work is completed by a team, not a solo employee.
- **Ongoing Communication:** We communicate all emerging and real risks on an ongoing basis to our operational, technical, corporate, and client teams.



- **Subject Matter Engagement and Risk Ownership:** Program leadership will regularly and quickly engage subject matter experts. These meetings will establish ownership over risks.
- **Early and Ongoing Assessment:** Risks are identified, assessed, and reviewed continuously in the Project, not just prior to major reviews.
- **Defined Plans and Criteria:** Risk mitigation plans are developed; success criteria and thresholds for contingencies are defined.
- **Multiple Risk Management Tools:** Risk management tool must be maintained with current risk status information; preferably, employ a tool that rapidly produces "dashboard-like" status reports for management. AHS utilizes an Issues Log as a primary tool for reporting and communicating issues that have been identified in the Project. The Key Management Team regularly monitors the Issues Log to track issues and ensure they are investigated and resolved quickly and effectively.

We will use the Issues Log to record and describe issues, analyze and prioritize issues, track and assign responsibility for issues, establish target and deadline resolution dates, monitor resolution status, and record issue resolution for future reference and project learning.

We incorporate the following protocols to manage issues identified in the Register:

- **Review Issues:** We review issues at least weekly, if not daily.
- **Regular Updates:** The Implementation Team remains in ongoing communication (daily or weekly) on the status of issues with all stakeholders.
- **Communicate Resolutions:** We will implement an official communication for all issues when they have been resolved.
- **Documentation:** All issues, actions taken, and resolutions are maintained in the issues log.
- **Review:** We review the Risk Register quarterly to identify and assess lessons learned.

Action Items

Action items, like issues, need to be tracked to ensure they are worked and resolved within the required timeframe. We will utilize an Action Item Log that will mirror the Risk and Issues Log. To ensure action items are captured, we will recap action items, along with due dates at the end of every meeting with DHS. If any discussion is needed it can occur before the meeting is concluded. Meeting notes will be produced for all meetings during the implementation and will contain all action times, who the action item is assigned to and due dates. Finally, the Action Item Log will be updated, and a review of the log will be included on all meeting agendas.

Implementation Results

The Implementation Manager is responsible for developing and submitting the Readiness Review Results Report that will document the completion of all task activities. We will include all specified content and a summary of lessons learned. Exhibit 8 details implementation results we have provided in previous implementations.



E.1.C LIST AND DESCRIPTION OF REPORTS

Provide a list and description of reports provided in a previous project of similar size and scope such as staffing level reports, quality control reports, case and task processing, productivity monitoring and status reports.

We will implement several solutions so that DHS can access their data at their convenience. We will collaborate with DHS to identify reports needed for the Eligibility Support Services Project. We are known for our flexibility in report generation and for “going the extra mile” to supply needed data and information with minimal turnaround time. We will bring this collegial spirit to partnering with DHS for the Eligibility Support Services Project to ensure all reports adhere to State and Federal reporting requirements and to the specified schedule.

Similar reports we include in our Medicaid eligibility Projects include daily, weekly, and monthly reports detailing:

- Performance related to Service Level Agreements (SLAs).
- Staffing levels, including attrition rates, open positions, etc.
- New application volumes, with any increases or decreases relative to previous months’ volumes.
- Number of redetermination requests and completed redeterminations, with any increase or decrease relative to previous months’ volumes.
- Number of case processing tasks broken out by type of task.
- Inventory and productivity.
- Backlog reduction, if applicable.
- Training statistics, including the number of staff who received quality training and types of errors.

★ Did You Know? ★

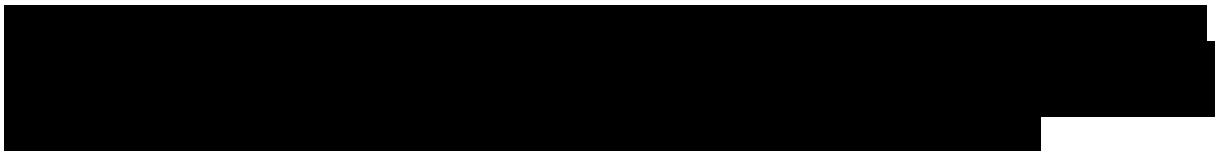
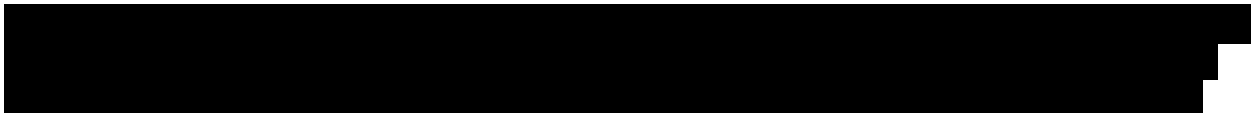
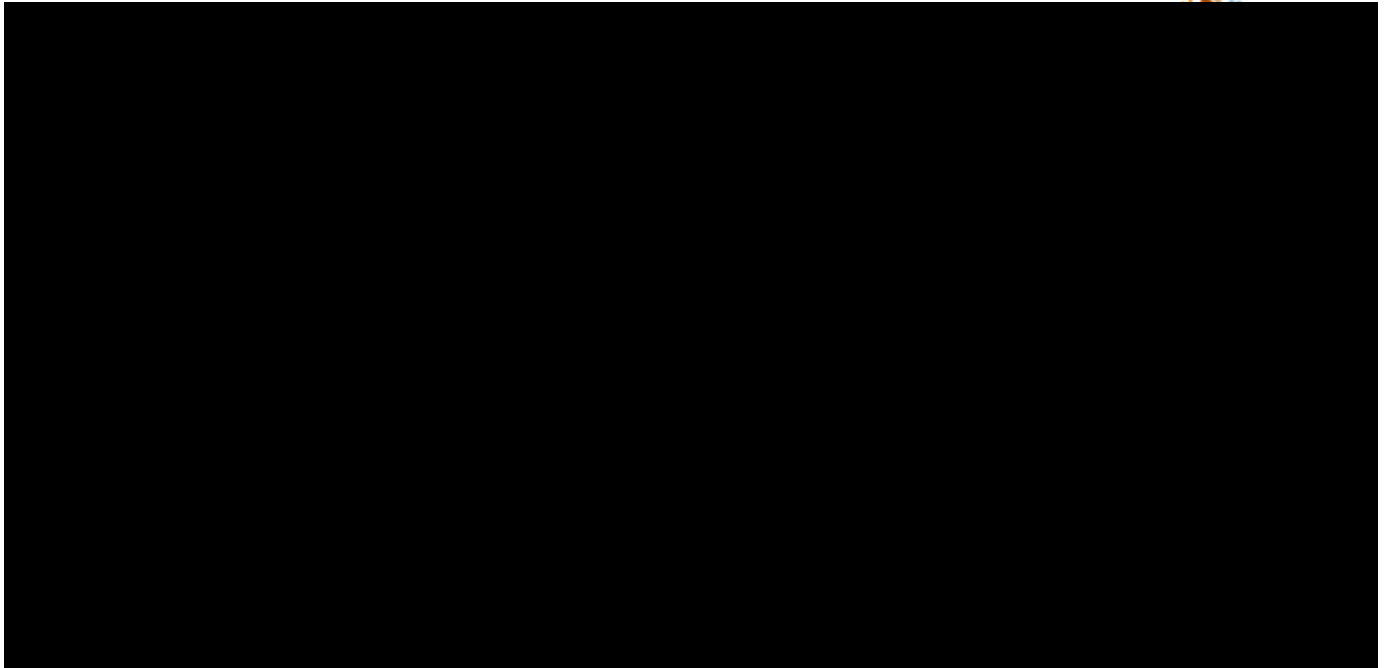
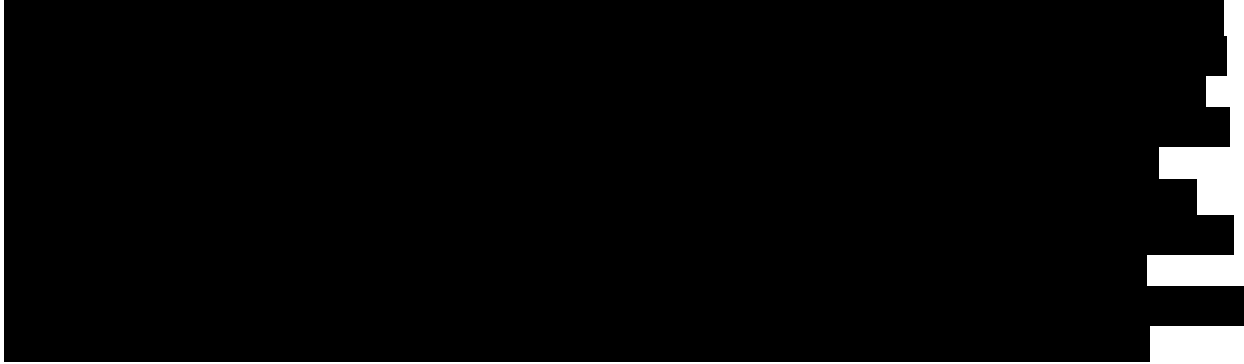
Our reporting systems allow clients to access any information needed, at any time.

- All reporting packages are flexible and can be customized upon request.
- Reports will be developed with DHS’ input to fully meet the State’s needs.



- Quality reporting, including the number of each type of error, trends in employee performance, areas of concern identified, progress on quality initiatives, and resolution rates for quality issues.

We provide detailed graphs, written analyses, narratives, charts, and tables to supplement data points. We provide aging statistics and status indicators as appropriate (e.g., number of applications that are pending 1-2 days, 3-5 days, etc.).





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E.1.D PROVIDE A SECURITY PLAN

Provide a Security Plan as outlined in section 2.8 of the solicitation.

We are well versed in complying with extensive system security and access management standards. We have developed client-specific System Security Plans (SSPs) for multiple projects that align with several stringent Federal guidelines. We completed extensive documentation, policies, and Centers for Medicare and Medicaid Services (CMS)-compliant workbooks and multiple review cycles. We currently comply with Minimal Acceptable Risk Standards for Exchanges (MARS-E) 2.2, as well as NIST SP 800-53A, Rev 5. Our SSPs are in accordance with the following standards and guidelines:



- NIST SP 800-47
- NIST SP 800-53, Rev. 5
- NIST SP 800-18 Guide for Developing Security Plans
- CMS MARS-E 2.2
- CMS ACA SSP
- CMS Risk Management Handbook
- CMS Catalog for Minimum Acceptable Risk
- CMS Information Systems Assessment Procedures, V2

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Automated Health Systems



Automated Health Systems



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Automated Health Systems



mit



E.1.E DETAILED TRAINING PLAN

Accurately processing Medicaid applications is an essential component of representing DHS' work with integrity. Staff must be prepared to work accurately and efficiently. Our comprehensive training program (Exhibit 12) meets these goals.



Exhibit 12. Approach to Training

INITIAL TRAINING

- Includes an initial training orientation period
- Consists of active strategies/didactic sessions
- Ensures staff are prepared for operations and equipped to meet performance standards

ONGOING DEVELOPMENT

- Conducts bi-monthly or more frequently as warranted
- Ensures staff are up-to-date with the most current information
- Consists of routine and quality improvement trainings based on quality monitoring sessions

CONTINUING EDUCATION

- Offers Professional Development Series trainings with elective courses from which to select
- Includes Tuition Assistance Program
- Keeps motivation levels high

Our comprehensive approach to training supports excellent service delivery.

All staff are required to participate in our full training program and pass our comprehensive position-specific evaluation. Staff who experience a break in employment are required to complete a full re-training and recertification prior to performing duties. Training further continues through extensive time shadowing existing staff.

Our training programs are built in a logical arc that begins with an overview of DHS and the core functions and mission of the State's Medicaid and CHIP programs and culminates in the granular, hands-on practical skills that translate into direct success with the Project. We will develop supplementary training program materials to augment DHS' eligibility materials. Our training program will be refined in consultation with DHS to fully leverage DHS' training.

The initial training program introduces and welcomes new staff to AHS. It also addresses critical information, operational work processes, systems training, and other modules needed to successfully serve the Eligibility Support Services Project. The complexity of training for eligibility staff cannot be overstated – within a few weeks staff are required to be proficient in a range of diverse and complex topics related to detailed state and federal policy, such as eligibility for mixed households. Training is provided at an appropriate pace, allowing staff to digest the vast amount of information and hone essential systems and skills. We use a hybrid of computer-based training (CBT) and lectures as the base method of training, supplemented by discussions and multiple hands-on learning opportunities.

We look forward to collaborating with DHS regarding the training of staff on Medicaid eligibility determination, CHIP eligibility determination, cross-training on medical eligibility programs, and training on policies and procedures. In addition to collaboration with DHS regarding training on DHS designated topics, our Training Manager will:

- Work with DHS regarding developing brief CBT and video-based trainings that augment DHS' training and can be used to reinforce key topics while staff are performing their duties.
- Develop any needed quizzes and assessment measures so that we can track employee knowledge, understanding, and retention throughout the training and provide re-training on any area where information is not fully understood.
- Translate DHS training into resources that can be integrated into DHS' knowledge management system, where appropriate.
- Refine our Evaluation Form to align with specific training topics and agendas of DHS.



- Work with the IT Department to program monitoring forms and real-time dashboards so that we can keep track of emerging error-prone areas and provide real time feedback to staff so that errors are immediately corrected.
- Collaborate on the tracking of applications that are returned by State staff so that we can accurately capture the reason applications are returned and provide appropriate re-training.
- Cultivate Supervisor training on complex topics so that Supervisors are prepared to reinforce and monitor areas that may be error-prone during day-to-day work.

While we provide extensive training on all relevant topics to complement all DHS training, the primary goal is to ensure staff are equipped to provide excellent operational processing that meets DHS' needs and accurately processes applications in accordance with DHS standards for accuracy and timeliness and provides callers with the education and assistance needed. We prepare staff to identify potential errors, such as an incorrect calculation that may have arisen from a data entry mistake. This training addresses internal policies and procedures. A sample training program specific to the Eligibility Support Services Project is detailed in Exhibit 13. Please note, we welcome and encourage DHS to participate in or lead any modules as desired.

Exhibit 13. Training Curriculum

Module	Description	Delivery Methods
Data Entry	Staff are trained on the ARIES system, including not only how to data enter applications, but also where data fields reside on the paper application relative to where they are displayed in ARIES. Training emphasizes that staff are to double-check their work and pay particular attention to high-risk areas. Training includes a review of areas that need to be spot checked to verify information is logical, consistent, and no errors occurred.	<ul style="list-style-type: none">• Classroom lectures/CBT• Self-learning modules• Hands-on practice in sandbox environment• Question and answer• Assessment quizzes
Registration	Training includes an understanding of the various application types and how to identify the appropriate application type. Training includes several modules relative to how to identify if the household member is already known in ARIES (e.g., applying existing hierarchies, etc.) and what to do if the staff member is not 100% confident there is a match. The routing for each application type is reviewed and discussed.	<ul style="list-style-type: none">• Classroom lectures/CBT• Self-learning modules• Hands-on practice in sandbox environment• Question and answer• Assessment quizzes
Privacy 101	We stress the importance of protecting all information with which staff are entrusted. Relevant State and Federal laws, regulations, policies and procedures, and repercussions for breaches are discussed. Staff sign a confidentiality statement at the conclusion.	<ul style="list-style-type: none">• Classroom lectures/CBT• Discussion of scenarios• Question and answer• Assessment quiz
Case-Specific Scenarios	We examine a range of scenarios to include account creation, income change, out-of-state address change, move in-state address change, adding a newborn, adding a newly adopted child, marriage, divorce, loss of job, adding an authorized representative, and how these may impact eligibility processing.	<ul style="list-style-type: none">• Classroom lectures/CBT• Discussion• Self-learning modules• Question and answer
Relevant IT Systems	Several sessions address hands-on mastery of ARIES, the knowledge management system, and Microsoft Office	<ul style="list-style-type: none">• Classroom lectures/CBT



Module	Description	Delivery Methods
	programs, including Word, Excel, Outlook email, and PowerPoint. These modules address what systems are the “systems of truth” and what information is logged in each system.	<ul style="list-style-type: none">• Discussion of case scenarios• Hands-on practice• Question and answer• Self-learning modules• Assessment quizzes

We understand the full scope of our responsibilities to prepare staff.

We will also address complex scenarios and potential workarounds as needed. For example, in our Ohio Medicaid Hotline Project, when the State transitioned to their new eligibility system, many individuals were termed in the legacy eligibility system but remained active in the new eligibility system. We had processes in place to identify these individuals, explain the issue, and assist with the re-application. We will work with DHS to identify if there are any relevant instances where staff need to be trained on more complex issues.

We integrate on-the-job test scenarios throughout the entire training. Case scenarios are incorporated into most modules. The Training Manager and Key Management Team will develop all scenarios for training, ensuring complexity is built in as training progresses. Participants will individually complete test scenarios, and the Training Manager will review the scenario with the group. Scenarios are incorporated into module assessments and our final training assessment. We leverage video training as a method to push-out information to staff, reinforce key concepts, and build on skills and proficiency, all of which are vital to supporting retention.

We have standardized our trainings on an eLearning platform, ProProfs, which we use to complement classroom-based learning. The eLearning solution offers extensive advantages over a traditional classroom training:

- **24/7 availability:** The constant availability of training content makes it possible to learn at an individual pace. As a result, faster learners can gain their skills (and ultimate productivity) more quickly without compromising the learning of remaining participants.
- **Supplement initial trainings:** We can ask training participants to re-watch videos at any time on pertinent topics to reinforce essential skills and knowledge.
- **Easy integration with quality scores:** Based on the result of various quality scores, it is easy to push out videos on targeted topics to address any deficiencies – at the moment performance weaknesses are identified.
- **Enhanced learning and engagement:** Research indicates that eLearning enhances learner engagement and improved retention.
- **Capitalization on learning principles for modern-day learners:** eLearning tools respond to the way new generations acquire information and skills. Younger generations are accustomed to using YouTube and other internet resources to acquire skills and knowledge – both on and off the job. Use of eLearning also supports pushing out short bursts of information as opposed to lengthy classroom lectures, which can help with knowledge retention.
- **Time savings:** eLearning reduces the time associated with start-up/wrap-up sessions as well as the time associated with training to a group rather than an individual.
- **Accommodate diverse shifts:** Part-time employees who may work non-traditional hours can still participate in training at times that align with their regular work cycles.

ProProfs offers extensive benefits for DHS:



- **Full security:** Extensive password settings and privacy controls.
- **Assessments:** Customizable assessments that can be matched to each position within the Project.
- **Robust analytics:** Reports of completed, pending, and in-progress attempts for participants.
- **Cloud-based:** No server integration or software installation.
- **Scalable:** Able to grow to meet the ongoing needs of the Eligibility Support Services Project.

ProProfs supports the inclusion of presentations, videos, and recordings into training. However, while we utilize a strong eLearning complement, staff are still provided with daily opportunities for discussion, shadowing, mentoring, and hands-on practice. Further, we integrate case scenarios into nearly every module that build on each other and progress in difficulty. The Training Manager and Key Management Team will develop all scenarios that increase in complexity as training progresses. Scenarios are integrated into ongoing and end-of-training assessments.

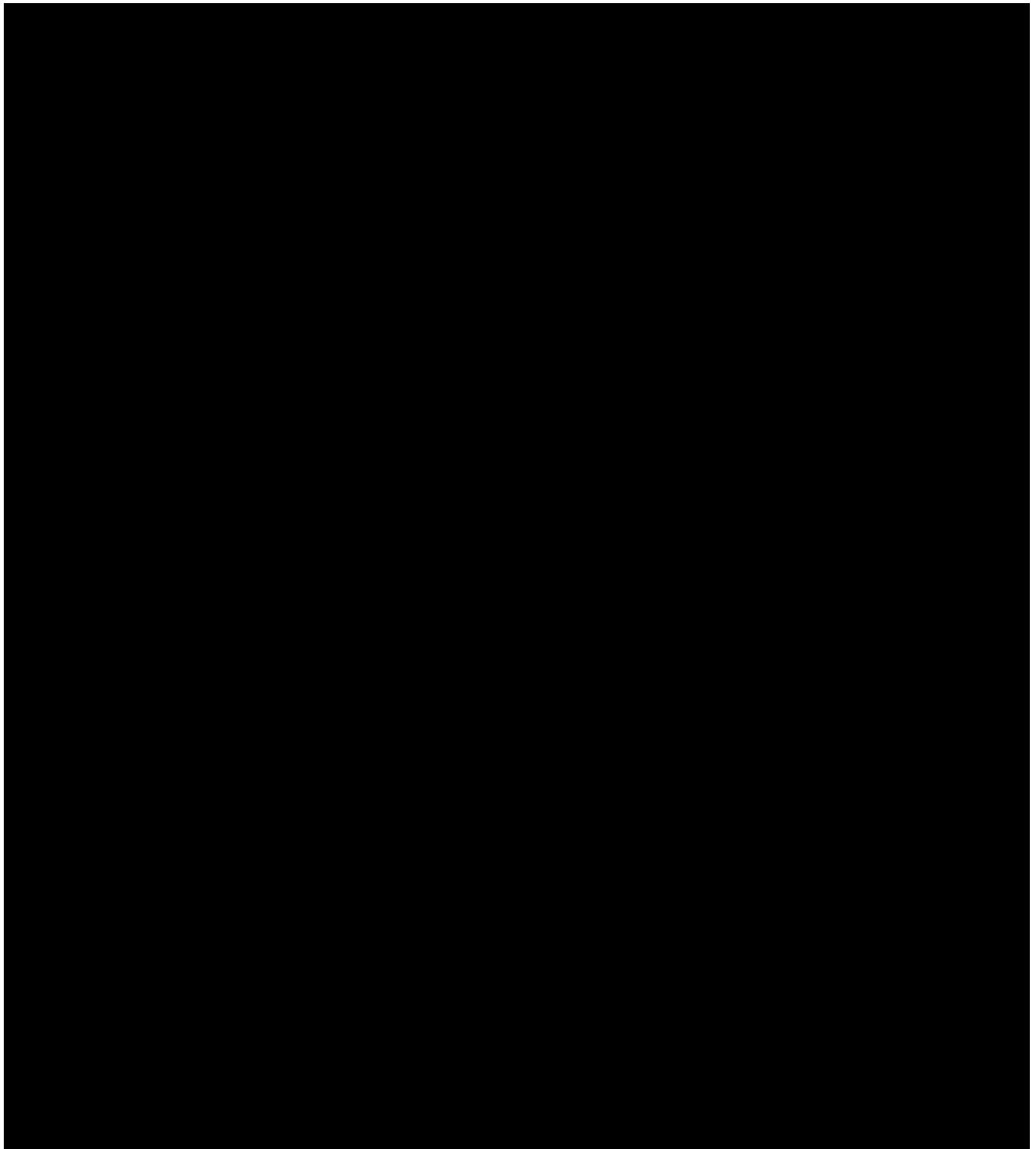
ProProfs includes a full suite of quizzes, training activities, surveys, and course evaluations, all of which are sent electronically and tracked for reporting purposes.

Further, the ability of ProProfs to quickly train staff on the software is essential as new updates are rolled out regarding ARIES. We will be able to quickly develop new training material and push it out to our staff without the challenges of removing our staff from eligibility processing and experiencing detrimental effects to processing performance.

While we leverage the extensive functionality in ProProfs, we still ensure all training materials are visually engaging and support knowledge and skill retention (Exhibit 14).

★ Did You Know? ★

We have a proven ability to quickly train staff. For example, on 12/12/22, our Rhode Island client provided us with a memo regarding Employer Sponsored Insurance (ESI) updates. On 12/13/22, we met with our client who defined the goals for disseminating the information to train staff. Our Quality and Training Manager created training materials, and training sessions were held 12/14/22-12/15/22. Our Training Manager also distributed a Training Memo and asked staff to acknowledge they had read the content. All materials were added to our knowledge management system for reference.



We will take several steps to reinforce any new training materials when needed due to system enhancements or updates, policy changes, etc.:

- **Announcements:** If available, we will work with DHS regarding using an Announcements feature in the knowledge management system to remind staff about the new update.
- **Team Meetings:** We will review ongoing changes, policies, and quality scores to ensure we reflect DHS' standards for performance.



- **Individual Coaching:** We will use our quality form and identify how staff are performing and provide targeted training (e.g., we will review the verification process for staff who fail to follow DHS protocols).
- **Lunch and Learns:** We will address common quality indicators and advanced topics (e.g., how to “spot check” an incorrect calculation) through lunch and learn sessions.

At the end of training, we will administer a final post-test developed in conjunction with DHS. All participants must meet the required threshold prior to performing job responsibilities as determined with DHS. Assessments include program knowledge, systems skills, and mock eligibility work using a combination of training environments, the knowledge management system, and scripting to assess mastery before “graduating.” The Eligibility Specialist will then be placed into on-the-job training before being able to process applications unassisted. If a staff member does not pass the final exam within two attempts, the candidate will not be allowed to handle responsibilities and may be terminated from the contract. Staff must earn a minimum of 85% to pass the assessment.

Following the evaluation test, we complete a nesting period and close supervision during an employee’s first days on the job. During this period, new training graduates have close access to more senior staff, Supervisors, and even training support.

As mentioned, we understand the intense efforts associated with eligibility systems. During the TEDS launch, we were closely involved with TennCare and ensured that our staff were fully aware of the changes. We implemented extensive operational, and training efforts to augment work with TennCare:

- Developed and refined business requirements documents in conjunction with TEDS.
- Developed solution in response to taxonomy changes resulting from TEDS.
- Provided training to staff on workarounds resulting from TEDS.
- Trained staff on TEDS renewal processes.
- Trained staff on how to capture a baby’s date of birth in TEDS.
- Trained staff on logging new jobs or changes in income.
- Trained staff on processes for legacy redetermination request in conjunction with the appeals process.
- Provided TennCare with application reconciliation lists to load to TEDS.
- Resolve pregnancy application legacy reports with TennCare.
- Established processes related to SNAP, birth reporting forms, and CoverKids pregnancy applications with TennCare.
- Trained staff on TEDS termination requests for members 18 and older.

As updates are rolled out for ARIES, we will work with DHS to implement similar workflows and training processes.

E.1.F QUALITY IMPROVEMENT PLAN

Provide a quality improvement plan that describes the Prospective Contractor’s approach to quality assurance to meet 95% accuracy including quality control processes for monitoring the quality of performance, communicating deficiencies, and obtaining feedback.

We have a proven dedication to quality, which we are excited to bring to the Eligibility Support Services Project. Our approach to quality includes not only staff monitoring, but also strong elements of technology and data analytics to drive process improvements, which we will use to augment all DHS quality activities. Our approach to quality has allowed us to attain several rigorous SLAs and, more importantly, earn our clients’ trust. Our dedication to quality is echoed through noted achievements:



- Accuracy ratings in our CoverKids Project exceeded 98%, as rigorously assessed by our client through a 21-point checklist on 100% of applicants.
- On average, over 95% of survey respondents are satisfied with our services in Rhode Island.
- Satisfaction survey results are routinely above 90% for all metrics measured across all Projects; we often implement satisfaction surveys into our operations, regardless of if we are contractually obligated to do so.

To ensure and continually enhance performance levels in pursuit of excellence, we will develop a Quality Assurance Plan (QAP) that addresses all oversight of Project operations, including a quality management system, established monitoring processes, and staff knowledge, skill, and performance. Our evaluation will:

- Describe our circular internal monitoring process.
- Reflect our internal monitoring timeframe.
- Identify responsible staff.
- Cite assessment mechanisms.
- Explain the process of feedback to institute Project improvements.

These activities serve as the backbone of sound Project management and control by:

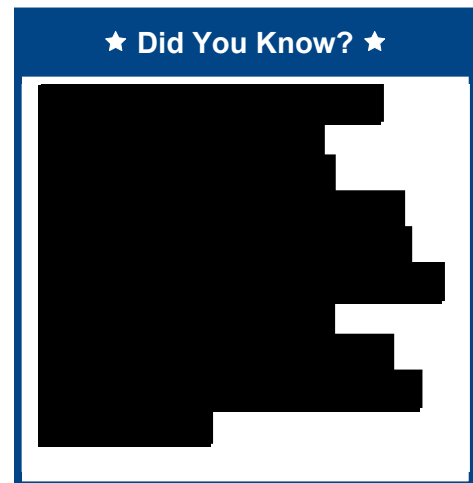
- Establishing performance standards that are process-oriented (based on working backwards from Project objectives, performance standards, and desired outcomes) and broadly utilized (for example, in the recruitment, initial training, and ongoing development of our employees).
- Assessing adherence to these processes and progress toward outcomes via ongoing and comprehensive monitoring at the level of the individual worker and the Project overall.
- Noting and acting upon deviations (positive and negative) through feedback to staff; the former are supported through tangible and intangible rewards (recognition, raises, promotions, etc.) and an internal corrective action plan (incorporating root cause analysis, determining, and then implementing the best way to address the problem/prevent reoccurrence) is set in motion to address the latter.

We will use these key principles as the foundation of our QAP that will be submitted to DHS for review and approval during the implementation period. The Management Team will make any changes requested to the QAP.

The foundation of our QAP is our multifaceted monitoring approaches that ensure we meet or exceed performance standards set forth in the RFP. These monitoring activities will also serve as an early warning system so that any problem can be detected and promptly (and permanently) corrected. Any significant deficiency will be conveyed immediately to DHS, followed summarily by the submission of a CAP, which will describe the situation, its impact, and the steps taken or proposed to effectively address it and prevent reoccurrence.

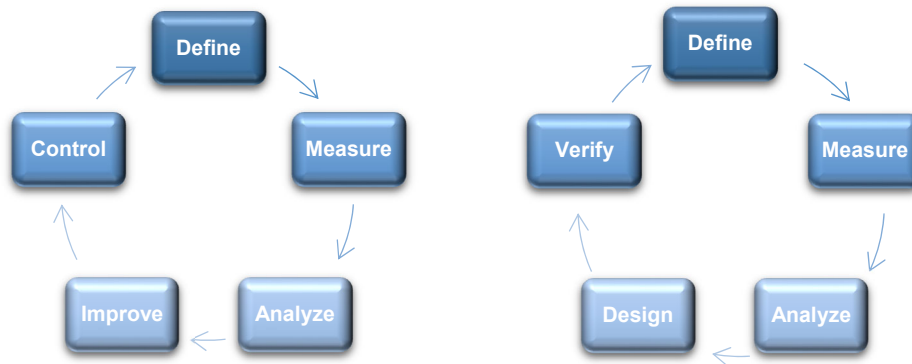
While the overall responsibility for internal monitoring lies with the Quality Manager, bringing the Plan to life is a shared Project-wide responsibility. Project tasks are understood and effectively carried out by our staff, resulting in meeting or exceeding Project objectives and mandated performance objectives.

Our approach to quality uses a combination of best practices learned from our 45-year history operating healthcare projects to serve Medicaid applicants and participants, blended with established, structured



processes designed to yield efficiency and quality operations across all levels of the Project. The structured processes that comprise the second portion of our approach to quality are based on the proven Six Sigma methodology, which involves the implementation of a measurement-based strategy that focuses on process improvement and variation reduction through the application of the DMAIC Cycle and the DMADV Cycle (Exhibit 15).

Exhibit 15. DMAIC and DMADV Six Sigma Methodologies



By applying two Six Sigma methodologies, we realize important benefits to the Project such as improved data-based decision making, systematic problem solving, and employee motivation.

- **DMAIC:** The DMAIC process (define, measure, analyze, improve, control) is an improvement system for existing processes falling below specification and looking for incremental improvement.
- **DMADV:** The DMADV process (define, measure, analyze, design, verify) is an improvement system used to develop new processes or products at Six Sigma quality levels. It can also be employed if a current process requires more than just incremental improvement.

In addition to the Six Sigma approaches described above, we incorporate several best practices into our quality approach:

- **Corporate Culture of Quality:** As an organization, we are dedicated to quality. Quality is celebrated in our projects: staff are recognized for outstanding monitoring scores, and staff jointly celebrate accomplishments related to meeting service level agreements and standards.
- **Standard Operating Procedures:** Our operations are supported by sound operational policies and procedures that provide clear direction on efficient workflow processes. Where possible and permitted by DHS, we embed these into the knowledge management system to maximize staff adherence.
- **Monitoring:** Our monitoring approaches allow for the identification of areas of improvement, direct staff to the correct training, provide supportive methods for improvement, and allow management staff to identify errors early.
- **Technical Solutions:** We use available reporting modules to provide Supervisors and Managers with extensive reporting capabilities and the ability to see in real-time the performance of individual Eligibility Specialists as well as the aggregate performance of the Project.

Our QAP will address the quality oversight of all Project operations. Authored primarily by the Quality Manager, the overall goals of the QAP are to:

- Provide the accurate and timely processing of all application and redetermination tasks.
- Provide the best possible operational performance through processes that support continuous quality improvement. These include:
 - Monitoring performance through analysis of quality activities against performance goals.

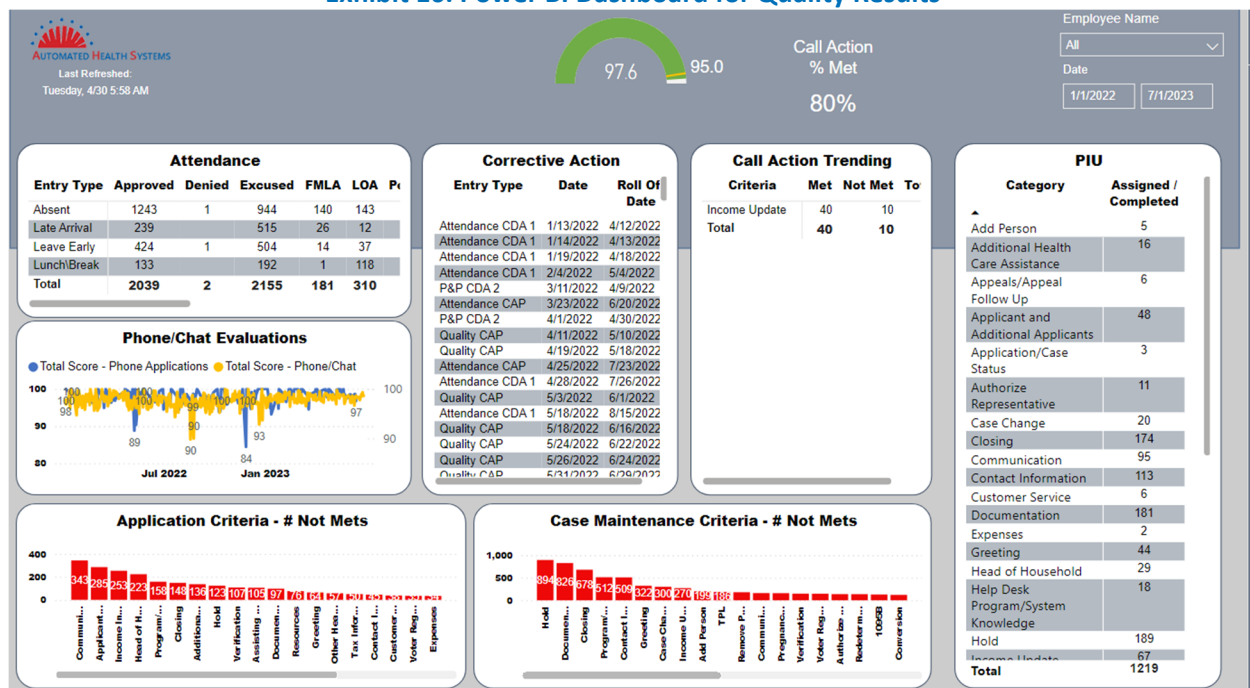
- Implementing interventions to promote achievement of goals.
- Measuring and analyzing the effectiveness of improvement actions.
- Continuously re-evaluating the goals and interventions used.
- Analyze performance that does not meet expectations to identify causes of errors and develop and implement strategies to eliminate those errors.
- Implement tools and tracking resources to ensure ongoing attainment of SLAs.
- Ensure effective coordination of QA activities with DHS and all appropriate stakeholder groups.
- Establish the sampling methodology for all monitoring areas to ensure all appropriate areas and types of transactions are measured.
- Provide the framework to implement appropriate corrective actions that identify the root cause(s) of errors and eliminate them.
- Establish the quality reporting tools, frequencies, requirements, and templates.

All responsibilities, frequencies, and persons responsible will be clearly identified in the QAP. Further, all quality-related reporting will occur in concert with routine, ongoing reporting to DHS.

We will collaborate with DHS regarding our quality program. We bring a strong monitoring framework that we will adapt to DHS' needs and standards.

The quality staff also ensure Supervisors are provided with ongoing data and feedback regarding the performance of Eligibility Specialists on their team, so that they can further contribute to assisting Eligibility Specialists and support sustaining their improvements. Exhibit 16 details the quality results for a specific Eligibility Specialist – the Supervisor can immediately see areas where performance needs correction. These statistics are available in real-time for Supervisors for both their overall team and specific Eligibility Specialists.

Exhibit 16. Power BI Dashboard for Quality Results



Deep insights are provided into our performance.



Quality Assurance Plan

Our proposed QAP utilizes a foundation based on the Six Sigma principles with a focus on process improvement. We blend this structured framework with our proven experience implementing and operating QAPs in various healthcare and Medicaid operations. This comprehensive approach results in:

- High levels of issue identification.
- Rapid correction and resolution.
- Ongoing performance refinement and improvement.
- Employee engagement and satisfaction.
- High levels of flexibility to adapt to changing workflows and systems – a critical issue for the Eligibility Support Services Project, as several components of the Project will be re-procured.

There are multiple components that we will integrate into the QAP for this Project:

- Policies and Procedures
- Training
- Operational Monitoring
- Returned by Staff Monitoring
- Robotic Process Automation (RPA)
- SLA Monitoring
- Data Analysis
- Corrective Disciplinary Action Follow-Up

Policies and Procedures

As mentioned, policies and procedures will underlie all operational workflows in the Eligibility Support Services Project. All policies and procedures will be incorporated into our QAP and integrated into DHS' knowledge management system following approval.

Training

Training is a fundamental component of our approach to ensuring quality services and is extensively described in Section E.1.D.

Operational Monitoring

Our monitoring approach is one component of our overall quality framework. All staff will participate in ongoing monitoring. The Operations Manager will develop Evaluation Forms that are specific to the Eligibility Support Services Project. The Evaluation Form will include specific items that are to be monitored and the criteria to pass or fail each item. They also include indicators if any of the fields are "critical fails or urgent issues" that must be addressed immediately. Each category will be weighted appropriately. The Evaluation Forms will be developed in consultation with DHS and approved by DHS.

Items that will be monitored for eligibility staff are presented in Exhibit 17.

Exhibit 17. Eligibility Evaluation

Topic	Items Assessed
Index	<ul style="list-style-type: none">• Was the application indexed in ARIES within the SLA for timeliness?
Application Data	<ul style="list-style-type: none">• Was all application data entered into ARIES correctly?• Did the staff member review data entry prior to accepting data?• Did the staff member correctly accept data in ARIES?



Topic	Items Assessed
Notice Generation	<ul style="list-style-type: none">• Did the staff member generate the correct Request for Information (RFI) notice if missing information was unavailable?• Prior to generating the RFI notice, did the staff member attempt to obtain the missing information from additional data sources and integrations in ARIES?• Did the staff member generate the appropriate notice?
Pending Applications	<ul style="list-style-type: none">• Did the staff member log the necessary next steps• If the applicant provided additional information, did the staff member appropriately load the information and apply it to the case in ARIES?• Did the staff member pend the application correctly?
Calculations	<ul style="list-style-type: none">• Did the staff member calculate the applicant's MAGI correctly?• Did the staff member perform other calculations correctly?
Routing	<ul style="list-style-type: none">• Did the staff member notate the case correctly?• Did the staff member correctly identify if the case should be routed to DHS?• Did the staff member use the correct routing protocol?
Determination	<ul style="list-style-type: none">• Did the staff member make the correct eligibility recommendation for Family Medical cases?• Did the staff member make the correct eligibility determination for CHIP cases?• Did the staff member make a final determination, disposition, or recommendation for each pregnant or newborn applicant within the required timeframe?
Dates	<ul style="list-style-type: none">• Did the staff member translate the correct effective date and log the date appropriately?• Does the enrollment reflect the correct effective date?

We have several questions we assess for eligibility processing.

Our goal is to immediately address and eliminate any issues that we identify during monitoring sessions. We leverage SharePoint to create custom flows that are triggered automatically when a staff member is monitored and scored. Flows are customized based on the specific deficiencies that were identified during the monitoring. The QA Specialist completes the monitoring, then uses the custom flows that trigger an immediate email sent to the Eligibility Specialist, which provides the entire Evaluation Form, so they can identify where they need to improve. We specifically developed our emails to include several components to further drive performance:

- Positive comments on items that scored well.
- Courteous language (e.g. "please be mindful," etc.).
- Direct links to assigned CBT and video training.
- Deadlines for completing training.

Additionally, we consider critical fails/urgent issues and the need for the corrective disciplinary process. Whenever Eligibility Specialists miss these items, an email is immediately sent to their Supervisor to alert them of the critical fail so they can respond instantly and reinforce the quality results. If the breach of quality was severe (as defined by policy and DHS approval), we will implement disciplinary action.

Returned by State Monitoring

We will track all applications that are returned by state (RBS) to any of our Eligibility Specialists, reason returned, date, and application type. At a minimum, we will conduct retraining for Eligibility Specialists based on the reasons applications have been returned. Briefly, Supervisors will review all RBS tasks and



determine the error that resulted in the return. They will then assign the RBS to the appropriate Eligibility Specialist to complete.

The key for RBS tasks is not just to complete the task in the assigned time, but to trend and identify common issues that contribute to these issues, which allows us to implement appropriate actions. Our steps are:

- Supervisors will receive return to staff tasks, assign them to the appropriate Eligibility Specialist, and verify they have been completed within the assigned timeframe.
- Supervisors will document all RBS tasks, identify the staff who worked on the case, and implement the appropriate action.
- RBS types and issues will be logged into the staff's employee record.
- RBS tasks will be relayed to the quality assurance unit for tracking.
- The Management/Supervisory team will complete a weekly reporting of all RBS tasks, by type and staff, which will be shared with the Quality and Training Teams.
- We will implement as needed:
 - Corrective training.
 - Monitoring for additional data elements.
 - Knowledge management system updates and articles, upon approval from DHS.



SLA Monitoring

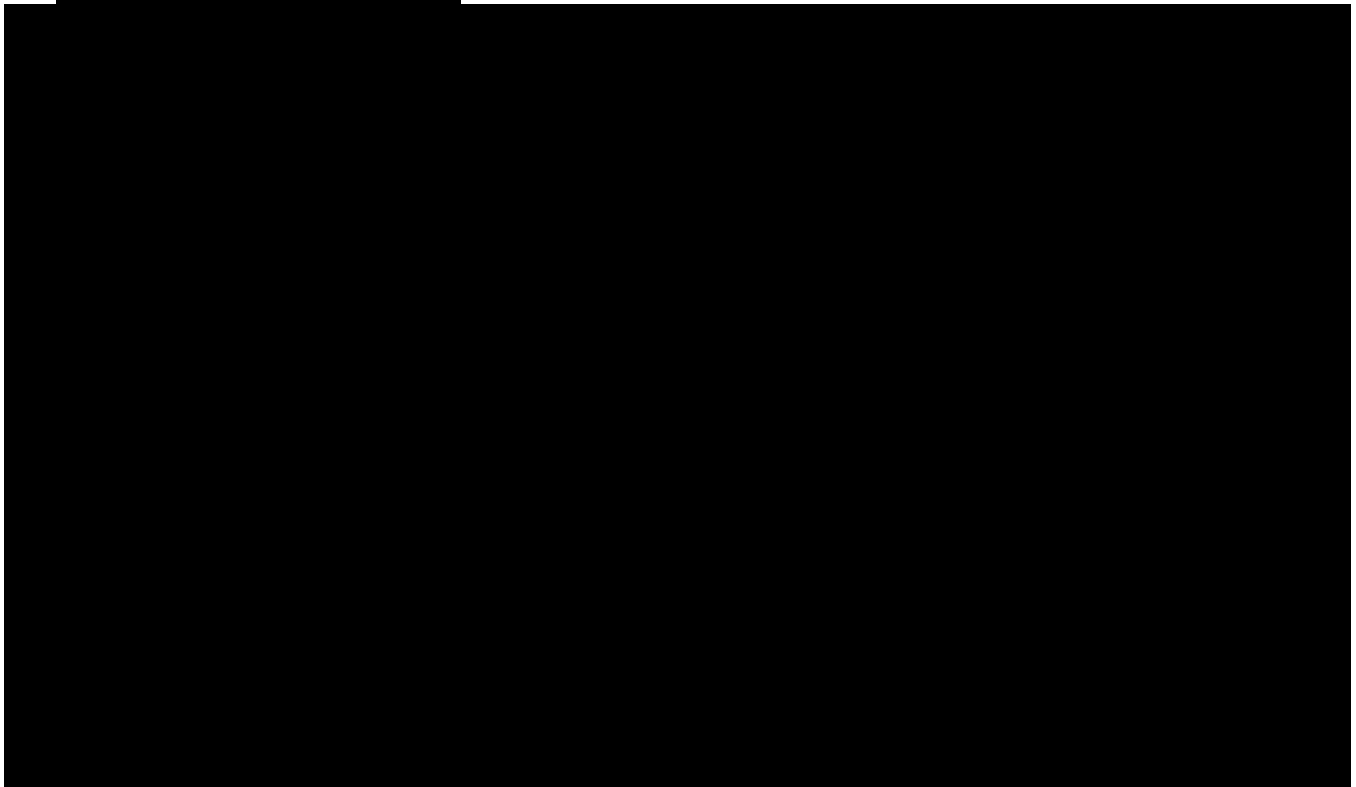
The Key Management Team will track and trend a range of statistics to assess all required metrics. Metrics include the performance indicators outlined in Attachment B to the RFP. Where possible and appropriate, we will have real-time notifications and alerts prior to missing an SLA so that our Management Team can take immediate action.

² This process halted with the successful re-procurement of our contract in 2021, which merged our work with the Application Processing Center.



Data Analysis

Numerous sources of data will be available to us, which include data from ARIES, tracked evaluation forms, tracked by RBS types, satisfaction surveys, etc. The Quality Manager will review all sources of data on an ongoing basis to identify potential and emerging problems, as well as to verify if any corrective actions put in place have been successful.



Corrective Disciplinary Action Follow-Up

We will implement appropriate corrective disciplinary actions, as needed. When an Eligibility Specialist receives a corrective disciplinary action (CDA) related to work quality, the Supervisor may require as part of the corrective action plan an increase in monitoring and/or side-by-side training for a set period to track improvement. The QA Specialist will be responsible for the appropriate monitoring and will complete the monitoring as requested, utilizing the Evaluation Form according to our monitoring procedures.



E.2 BACKGROUND, EXPERIENCE AND QUALIFICATIONS

We have extensive experience administering contracts similar to the Eligibility Support Services Project. The services we support through these contracts include program eligibility screening, eligibility processing, application assistance, information and referral services, comprehensive education, benefit inquiry, complaint resolution, and countless others. All our contracts reflect our mission to provide a personalized approach to our clients. We bring the resources, workflows, and operational expertise to administer a top-performing operation, combined with the passion and commitment of a company that was formed solely to provide services to fragile populations.

E.2.A COMPLETE ATTACHMENT CLIENT HISTORY FORM

Complete Attachment Client History Form (Question #1).

We have provided our completed Attachment Client History Form Appendix B.

E.2.B PROVIDE RESUMES FOR ALL PROPOSED KEY PERSONNEL

Provide resumes for all proposed key personnel which shall include relevant projects(past and current) that each individual has supported for state human service programs such as Medicaid, CHIP, SNAP, and TANF. Resumes shall not exceed four (4) pages and must demonstrate past eligibility support services work on at least one (1) eligibility system that supported multiple benefit programs. Resumes shall include the following information:

Client organization names.

Time periods worked.

Role of the proposed individual within each project.

Brief summary of the project scope.

Names, positions, and current telephone numbers of persons who can provide information on the proposed individuals' performance on at least two (2) projects.

Years of experience working with eligibility systems for state human service programs.

Formal education including degrees completed (Note: Formal education will not be substituted for experience).

Any technical certifications relevant to this project.

We have provided resumes for key personnel in Appendix C.

E.2.C COMPLETE ATTACHMENT I CLIENT HISTORY FORM

Complete Attachment I Client History Form (Question #2)

We have provided our completed Attachment Client History Form in Appendix B.



E.3 PROJECT MANAGEMENT, ORGANIZATION AND STAFFING

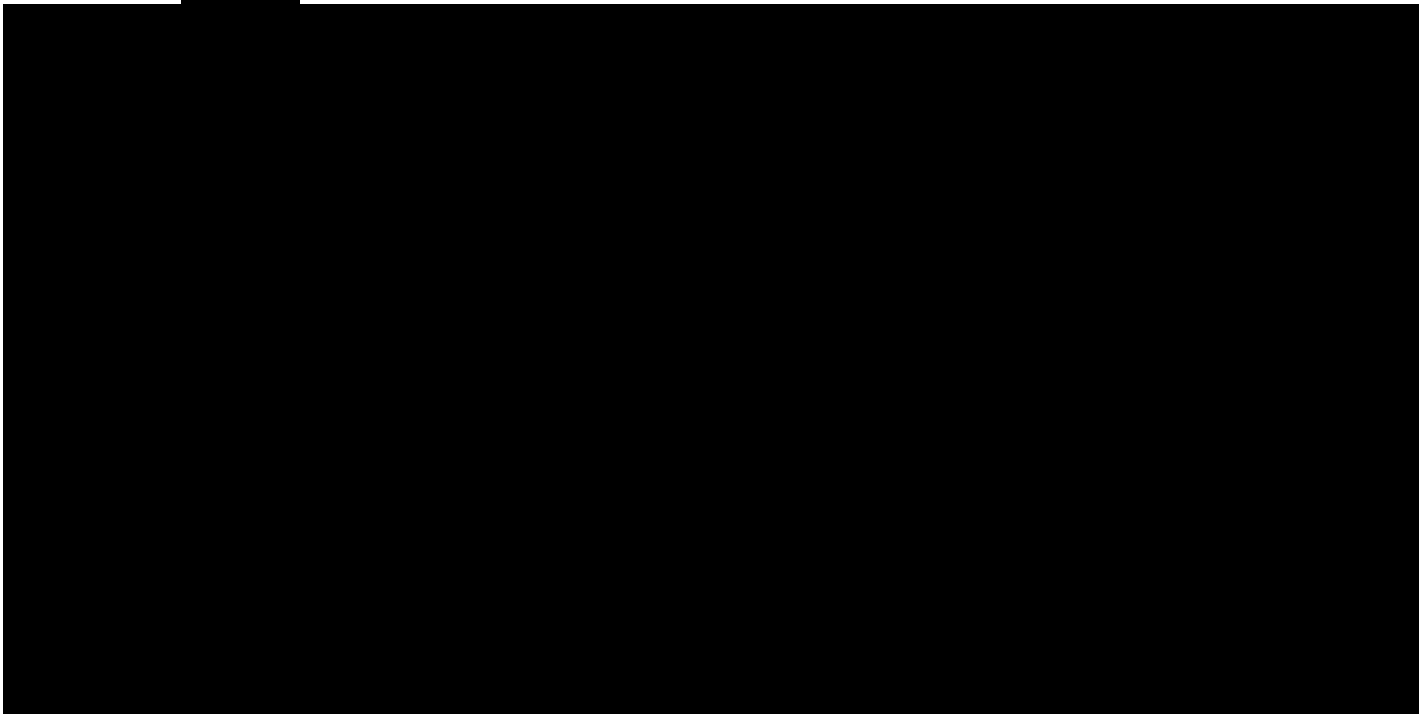
We are excited to bring our overall corporate experience and talented, experienced personnel to the Eligibility Support Services Project. Our corporate and personnel qualifications exceed the requirements of the RFP and allow us to bring best practices, proven tools and approaches, and lessons learned to the Eligibility Support Services Project that will allow us to:

- Support a smooth transition to our administration of the Eligibility Support Services Project.
- Perform the full scope of work and meet SLAs.
- Provide full supervision and knowledge retention to support successful eligibility operations.
- Provide ample leadership to deliver excellent service in a high-staff, complex environment.

E.3.A ORGANIZATIONAL CHART

Provide an organizational chart that displays the overall business structure including proposed personnel job titles and lines of supervision.

We leveraged our corporate experience, the requirements of the RFP, and strong staffing analyses to determine the staffing model for the Project. This staffing model provides considerable flexibility and includes a complement of full-time and part-time personnel. Our staffing model is led by our Project Director, [REDACTED].



We have structured our organization to be fully responsive to DHS' needs. [REDACTED], our Project Director, has full authority to make decisions on behalf of the Project and reports directly to Dr. Moses Haregewoyn, AHS' President, ensuring rapid issue resolution.

Additionally, Key Personnel can contact any member of our Senior Executive Team at any time. These members can leverage all available staff within their departments. Further, unique among most



contractors, we provide our clients with direct access to our Senior Executive Team, including our President, which facilitates rapid issue resolution.

E.3.B APPROACH TO PROJECT MANAGEMENT AND PROJECT CONTROL

Describe the approach to project management and project control methods including the following:

1. *How the contract will be managed.*
2. *How contract activities will be controlled.*

Our plan to meet the requirements of the RFP is based on:

- A commitment to DHS and allowing DHS to focus on advanced services and apply their subject expertise to complex and strategic responsibilities.
- PMBOK best practices.
- Organizational best practices learned through operating Medicaid operations across the country.
- Strong Project and Corporate leadership to guide the implementation and ongoing operational performance of the Eligibility Support Services Project.
- Proven protocols to address common implementation challenges and ensure a timely launch.
- Management, coaching, and best practices to ensure operational success as documented through SLA attainment.

E.3.B.1 How the Contract Will Be Managed

How the contract will be managed.

During the operational period, our Key Personnel lead the overall performance of the Eligibility Support Services Project and manage the contract.

[REDACTED]

[REDACTED]

[REDACTED]



[REDACTED]

[REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

[REDACTED]

[REDACTED]

In addition to our Key Personnel, we have developed a comprehensive structure to support the overall performance of the Eligibility Support Services Project. Additional positions are described below.

Supervisors: Supervisors supplement the activities of the Operations Manager in developing and maintaining an organizational climate that facilitates the attainment of the goals and objectives of the Eligibility Support Services Project. This position is responsible for the assignment of work among all Eligibility Specialists, monitoring day-to-day operations, eligibility processing performance reports, enforcing company policy, and assisting ongoing long-term employee development. This position's primary responsibilities include ensuring optimal productivity in providing accurate and consistent eligibility processing. The Supervisor will report all activities, trends, and concerns (and recommended solutions) to the Operations Manager. The Supervisor oversees the Lead Eligibility Specialist.



Lead Eligibility Specialist: The Lead Eligibility Specialist will assist in overseeing the day-to-day operations of the Eligibility Support Services Project by providing leadership, support, and mentoring to Eligibility Specialists. This position participates in on-the-job training for the Eligibility Specialist in conjunction with the Supervisor. This position coordinates with the Supervisor on the required training and follow-up of staff based on quality assurance monitoring results. The Lead Eligibility Specialist works closely with the Supervisor to support and assist the Eligibility Specialist by handling questions regarding complex case processing. This position will perform all the duties of the Eligibility Specialist while also mentoring less experienced Eligibility Specialists.

Eligibility Specialist: The Eligibility Specialist is responsible for providing accurate and timely processing of all assigned MAGI and non-MAGI Medicaid applications, redeterminations, and ongoing case tasks. The Eligibility Specialist processes all work in ARIES, evaluates findings, and generates additional requests for information as needed. The Eligibility Specialist adheres to State and Federal law and requirements and adheres to DHS policies and procedures. Eligibility Specialists initiate DHS-approved procedures to grant, modify, deny, or terminate eligibility assistance in accordance with DHS' policies. The Eligibility Specialist participates in ongoing quality monitoring, participates in ongoing training initiatives, and relays questions and issues to the Lead Eligibility Specialist.

Quality Manager: The Quality Manager is responsible for oversight, development, and implementation of staff quality activities for the Eligibility Support Specialist Project on all subject matters. The position will assist the Eligibility Specialists with using all resources to drive accurate and efficient processing. The Quality Manager will develop the overall QAP for the Eligibility Support Services Project in conjunction with the Operations Manager and Project Director. The position will directly oversee the work of the QA Specialist to verify that all staff are processing eligibility activities in accordance with DHS protocols and SLAs are being met.

QA Specialist: The QA Specialist is responsible for monitoring all areas of the Eligibility Support Services Project to ensure accurate processing across all applications, redeterminations, and case updates. The QA Specialist will utilize information from the monitoring assessments to recognize staff with high quality scores, recommend improvement scores for staff with low scores, identify trends within the Project, and identify operational deficiencies. The position ensures that quality improvement initiatives and special projects are communicated in a positive and effective manner.

Training Manager: The Training Manager is responsible for developing and implementing staff training in conjunction with DHS-provided training for the Eligibility Support Services Project on all subject matter areas. The position will liaise extensively with the Project Director, Operations Manager, and DHS on the development of initial and quality improvement training and will make ongoing recommendations to updates to the knowledge management system. The Training Manager will oversee the Trainer.

Trainer: The Trainer is responsible for ongoing training for Eligibility Specialists. The Trainer will use a range of strategies and media, knowledge management system resources, and asynchronous tools to deliver training. The Trainer will track results, including feedback, performance assessments, and satisfaction rates. The Trainer will collect feedback for the Supervisors and collaborate with the Training Manager on the necessary improvements for training.

Human Resources Manager: The Human Resources Manager is responsible for coordinating with the Project Director and Operations Manager on the recruitment and staffing needs for the Eligibility Support Services Project. The Human Resources Manager is responsible for managing talent acquisition and staffing, and overseeing all functions related to employee relations. The Human Resources Manager uses proactive recruitment and retention practices to maintain the capability of responding quickly to



staff attrition, absenteeism, poorly performing personnel, and/or increases in workload volume. This position makes every effort to retain qualified staff.

IT Helpdesk: The IT Helpdesk Specialist communicates with end users of varying skill levels and understanding. The IT Helpdesk Specialist identifies problems, performs initial analysis of the situation, and forwards information to the appropriate technical staff if the position cannot be resolved. This position performs follow-up communication with the end users until the problem is permanently resolved. The position assists the management team during onboarding with equipment set-up and provides network login information.

In addition, our corporate team is available to support the Eligibility Support Services Project. Our corporate team, including representatives from IT, Human Resources, Payroll and Benefits, Accounting, Telecommunications, etc. supports the implementation and provides ongoing operational oversight following Go-Live. Each of these teams brings ample resources to support the Project:

- **Human Resources:** Our Human Resources Team brings strong expertise in hiring and onboarding large teams of staff so that projects are fully staffed and trained by Go-Live. Most recently, they hired and trained approximately 100 staff for Go-Live in our Missouri Beneficiary Support Services Project and 250 staff for our MassHealth Contact Center Project. Our MassHealth Contact Center has significantly expanded, and we now employ 800 staff on the Project.
- **IT:** Our IT Team consists of Helpdesk Specialists, Business Analysts, and Network Administrators who will configure the overall infrastructure and connectivity for the Eligibility Support Services Project. They will also ensure the proper equipment for staff.
- **Payroll and Benefits:** Our Payroll and Benefits Team supports new hires with onboarding.
- **Accounting:** Our Accounting Team supports the invoicing and payments for the Project.

E.3.B.2 How Contract Activities Will Be Controlled

How contract activities will be controlled.

Our Project control is defined by PMBOK principles and methodology. We have adopted project management best practices as a critical means to establish the governance structure that outlines the lines of authority for each unit of work as related to Project operations and requirements. The governance structure includes the reporting lines to our clients and internal Executive Team. We use this structure to track risks, issues, communication, and ongoing performance for responsibilities, external reporting to keep our clients updated on operations, assurances (including required performance metrics, additional operational metrics that track Project performance, time tracking, quality assurance protocols, etc.), and project control processes that measure performance against the scope, budget, time, and resources. This experience prepares us well to apply the PMBOK methodology to the Eligibility Support Services Project. The multiple forms of project management and control that we will apply to the Eligibility Support Services Project are described in the following pages.

Communications Management

We have established protocols to ensure communication occurs in a structured, organized, and streamlined manner that improves transparency and accessibility.

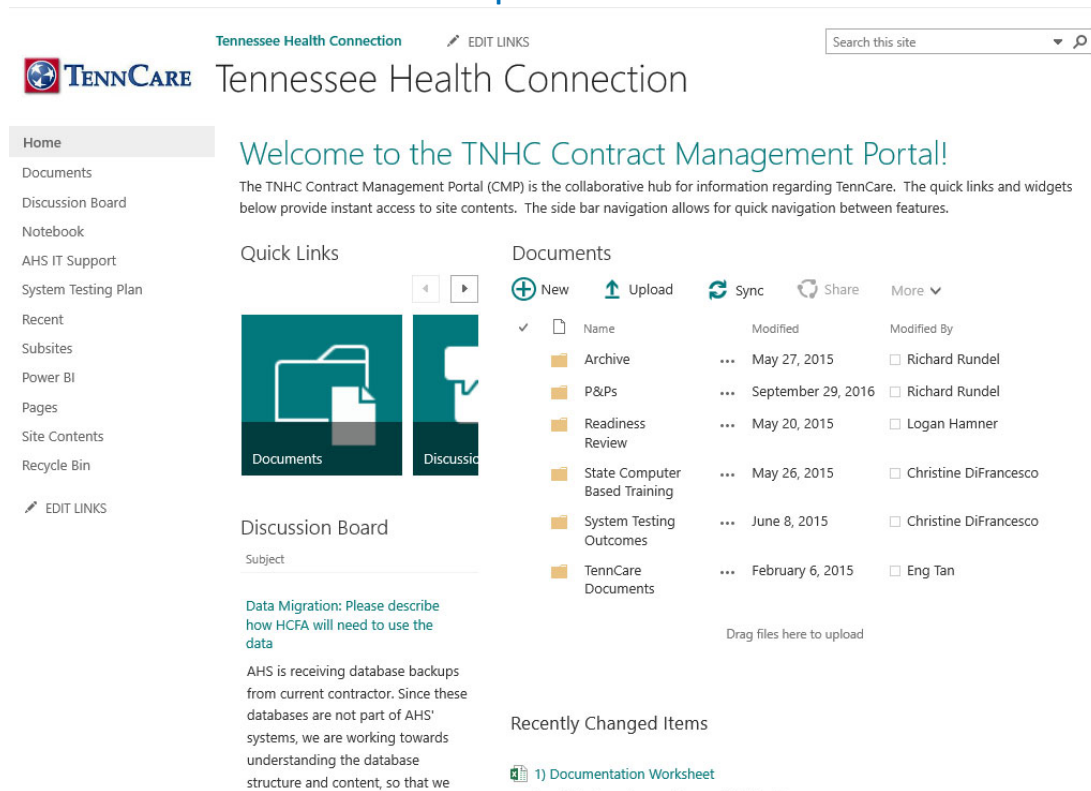
First, during the implementation period, we will establish a Communication Plan that details the guidelines for who receives each type of communication. Once approved, this Plan will be posted to our SharePoint site. The Communication Plan will serve as the guiding document for all future communication. The Communication Plan will be updated on a regular basis in response to Eligibility Support Services Project developments. Contact methods will outline how and when communication will

occur and the role of DHS for each type of communication as the modules are implemented. The Communication Plan will outline communications for the Eligibility Support Services Project implementation and subsequent and associated timelines and workgroups as appropriate. We will maintain a current copy of the Communication Plan on our Project SharePoint site.

The Implementation Team, Key Management Team, and all Project staff are required to communicate on a daily/weekly/monthly basis with DHS. External communication with DHS is fluid and ongoing and includes both formal structured communication (e.g., through scheduled meetings, written submission of deliverables including weekly and monthly status reports, ongoing reporting, etc.) and informal (e.g., through ongoing phone and email correspondence). The Project Director shares our Communication Plan with our team to guide adherence to appropriate communication protocols, define workgroup participation, and outline responsibilities for each team member for various topics.

Exhibit 20 provides a sample of our SharePoint site used in our TennCare Connect Project. Documents are intuitively laid out, discussion through SharePoint is fluid, and searching is easy.

Exhibit 20. Sample Client SharePoint Site



Tennessee Health Connection EDIT LINKS

Search this site

TENN CARE Tennessee Health Connection

Home
Documents
Discussion Board
Notebook
AHS IT Support
System Testing Plan
Recent
Subsites
Power BI
Pages
Site Contents
Recycle Bin
EDIT LINKS

Welcome to the TNHC Contract Management Portal!
The TNHC Contract Management Portal (CMP) is the collaborative hub for information regarding TennCare. The quick links and widgets below provide instant access to site contents. The side bar navigation allows for quick navigation between features.

Quick Links

Documents

Name	Modified	Modified By
Archive	May 27, 2015	Richard Rundel
P&Ps	September 29, 2016	Richard Rundel
Readiness Review	May 20, 2015	Logan Hamner
State Computer Based Training	May 26, 2015	Christine DiFrancesco
System Testing Outcomes	June 8, 2015	Christine DiFrancesco
TennCare Documents	February 6, 2015	Eng Tan

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Discussion Board

Subject

Data Migration: Please describe how HCFA will need to use the data

AHS is receiving database backups from current contractor. Since these databases are not part of AHS' systems, we are working towards understanding the database structure and content, so that we

Recently Changed Items

1) Documentation Worksheet

Comprehensive documentation that facilitates clear communication is easily available.

Risk and Issue Management

Our comprehensive approach to risk management is described in Section E.1.B.

Scope Management

Scope management is an integrated component of our overall project management methodology. There are two major areas of scope management: controlling work outside of the scope of the Eligibility Support Services Contract and performing all work inside the Contract to its fullest extent. AHS believes in being a true partner to DHS and does not use scope management practices to prevent work outside of



our contractual requirements. When these scenarios arise, we focus on identifying ways to implement the systems and functions that are necessary for DHS to meet their goals and objectives. However, we do prioritize scope management principles to ensure we perform and work under the Contract to its fullest extent. Our practices ensure that our work includes all tasks and deliverables within the Contract to successfully execute the Project. We use several processes to ensure the scope is fully addressed:

- **Collect Requirements:** We will participate in DDI and Requirements Analysis meetings and produce requirements documents and meeting minutes as artifacts. For example, during the initial startup, AHS works with DHS and other stakeholders to confirm our understanding of the RFP requirements in requirements validation sessions.
- **Define Scope:** We hold internal meetings to verify understanding of scope and contractual requirements and produce Project scope statements as artifacts.
- **Validate Scope:** We submit deliverables to DHS for feedback, review, and approval. We maintain the documentation of feedback and approval as artifacts.
- **Control Scope:** We hold internal and external monitoring sessions of the Project status to identify and manage scope changes. We maintain change management requirements, requirements document updates, and Project Plan version updates as artifacts.

Status Reporting

We generate extensive reports to track progress and performance. Please see Section E.1.C for a description of our approach to status and dashboard reporting.

E.3.C APPROACH TO PROJECT STAFFING

Describe the approach to project staffing:

DHS needs the Contractor to bring a strong staffing model to the Eligibility Support Services Project that:

- Is flexible and has ample personnel to meet SLAs throughout the duration of the Contract.
- Is led by a team of expert personnel with extensive knowledge of Medicaid, eligibility operations, and operational excellence.
- Responds to the needs, challenges, and requirements set forth by DHS and stakeholders.

We are excited to bring a strong staffing model, led by a team of expert staff. We have developed our staffing model to ensure excellent service during all phases of the Eligibility Support Services Project.

We have developed our staffing model to accommodate the necessary complexity of the overall Eligibility Support Services Project operations, meet contractual requirements, and deliver excellent operations and performance. To ensure we establish the right number and types of staff as well as the best skill sets to serve the State and partners, we consider all available data (e.g., population sizes, scope of work, performance standards, comparable historical documentation), and leverage our corporate expertise to determine our staffing plans. In doing so, our staffing projections are maximally accurate because our approach allows for expertise in critical subject matter areas and considers SLA and performance requirements of the RFP.

With our comprehensive understanding of the contractual and operational requirements of the Eligibility Support Services Project we have developed a staffing plan (Exhibit 21) that will enable us to:

- Execute all required deliverables.
- Exceed all performance metrics.
- Meet or exceed the State's performance expectations.



Exhibit 21. Proposed Staffing Model

[illegible]

The screening and selection process for meeting staffing requirements.

- Allocate the correct types of positions to meet the scope of work.
- Provide the correct number of staff for each position.
- Leverage retention strategies that support high levels of employee satisfaction, high performance levels, and knowledge retention, which is essential in a complex environment.

Staff management and support to ensure high retention rates.

We have established recruiting networks across the country that enable us to recruit and onboard high-caliber talent. Our methodology allows us to realize the benefits associated with excellent recruitment:



- Increased diversity among employees.
- Increased candidate quality.
- Increased Supervisor satisfaction with their teams.
- Decreased time-to-hire.
- Scalable recruitment practices to respond to changing demands.
- Increased ability to recruit for various skills, positions, backgrounds, etc.

Our comprehensive recruitment and screening program has been proven effective and scalable. Our success is particularly critical for the Eligibility Support Services Project. As mentioned, we currently employ more than 800 employees for our MassHealth Contact Center.

Our recruitment strategies include the following components:

- Leverage structured job descriptions.
- Leverage comprehensive recruitment process.
- Leverage employee referral programs.
- Evaluate recruitment data.
- Evaluate successful employees.
- Maintain an ongoing pipeline.

★ Did You Know? ★

Our Executive Senior Vice President of Human Resources, Ms. Kimberly Conner, was a finalist in the Talent, Recruitment & Retention category for the Pittsburgh Human Resources Association.

Leverage Structured Job Descriptions

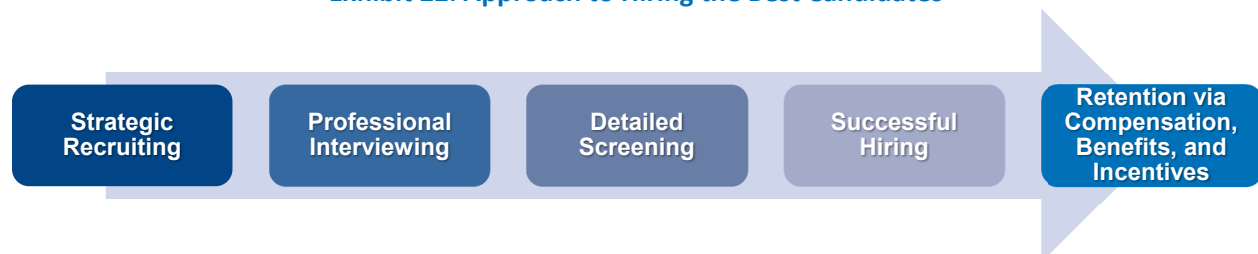
We use detailed and structured job descriptions that align with the requirements of the RFP and specify performance expectations to clarify all candidate expectations surrounding responsibilities and performance. We then use the required education, experience, skills, and abilities to guide our recruitment strategy.

Leverage Comprehensive Recruitment Process

We use a combination of structured recruiting processes and rigorous retention practices to remain fully staffed and meet SLAs (Exhibit 22). These methods guide our overall recruitment approach and are tailored based on the unique needs and environments of each of our Project locations. Our recruitment strategies are tailored to:

- Attract a wide net of talent that we refine during the assessment and interview process.
- Seek out staff with the attention to detail that is required for Medicaid eligibility processing work.
- Accommodate “no-shows” for interviews, which are common in competitive markets.

Exhibit 22. Approach to Hiring the Best Candidates



Every action we take from initial sourcing through hiring is intended to secure the best staff.

We use a variety of recruitment methods to attract potential candidates (e.g., postings on our corporate website, online recruitment, word of mouth, etc.).



Our interviewing process is an example of our ongoing refinement of recruitment strategies to meet client needs. We found that we needed to refine our interview process to best identify the candidates capable of performing the in-depth and detailed oriented eligibility-processing requirements for our Medicaid eligibility contracts. We adopted our interview process to include behavior-based questions and pre-employment online assessments to determine the candidate's fit for the position. Examples of components are:

- **Professionally Developed Pre-Employment Assessments:** We utilize assessments from Criteria Corp., which offers web-based pre-employment testing software to match the skill sets needed for each position. (The testing portfolio includes a variety of aptitude, personality, and skills tests.) For example, we utilize a series of three assessments, including an Employee Personality Profile, Computer Literacy & Internet Knowledge Test, and a timed typing test to assess typing speed and accuracy for applicants.
- **AHS Training Assessment:** We request candidates watch a brief training video and then complete basic processing tasks. We score the response based on how accurately the candidate captured the information. This assessment ensures our staff possess the skills needed to learn and correctly perform complex process workflows.

We offer competitive wages and benefits, continued education incentives, certification training (with incentives to promote), and continually seek employee feedback to maintain high employee satisfaction and, in turn, foster retention. We structure our organization so there are opportunities for advancement for Eligibility Specialists.

Once we have identified candidates and an offer has been extended and accepted (after we have completed a background check), we begin the onboarding process. This onboarding process was strategically designed by our HR Department to respond to the unique needs of onboarding staff for Medicaid-related projects (Exhibit 23). Our onboarding process is a critical step in completing the recruitment process and is designed to result in high "show rates" on Day 1.

Exhibit 23. Onboarding Process

Time Period	Step	Description
Pre-Boarding	Job Offer Letter	Formal letter from HR reiterating start dates, locations, and times for first day of work, salary provisions, and key items necessary for the first day.
	Security Clearance Requirements	Formal communication from HR requesting that the employee sign all forms required for any security clearance (e.g., access to systems, etc.).
	Additional Outreach	Phone-based outreach from HR explaining any additional details as needed (e.g., changes to training agenda, etc.).
Onboarding	Electronic Onboarding	Formal communication from HR requesting that the employee complete required forms required for the first day via our onboarding software.
	Orientation	Welcome and training by HR.
	Project Welcome	Welcome by the Management Team explaining expectations for the position and Project.
	Training	All formal training is provided by AHS over the training period.
Employee Engagement	Mentoring and Monitoring	Performance mentoring and monitoring by Project staff to review and counsel staff on their performance.



Time Period	Step	Description
	Ongoing Status Meetings	Meetings and trainings to review key concepts, explain new ideas, and review performance.
	Ongoing Training	Updates and quality improvement training throughout the duration of the Project. Refresher trainings on key areas (e.g., annual trainings on HIPAA, nondiscrimination, and personal security). Ongoing leadership training for Supervisors and Managers.

Our onboarding process helps candidates be successful throughout the Project.

Our onboarding approach (Exhibit 24) prevents the potential disconnects and inconsistencies found in many onboarding processes.

Exhibit 24. AHS' Solutions to Potential Onboarding Issues

Potential Issue	AHS Onboarding Solution
Employees accept the position but hear nothing from the company until they start.	<ul style="list-style-type: none"> Planned communication from HR, including emailed communications detailing start dates, salary information, and instructions for employee's first day. New hires are provided with electronic onboarding to review informational introduction videos about the company and to complete pertinent information prior to their first day.
Employees accept a position but are uncertain as to what they will do once on the job.	<ul style="list-style-type: none"> Detailed job descriptions are shared with candidates during interviews. Candidates interview directly with the Team Member who will oversee their performance.
Overwhelming amount of information presented during new hire training.	<ul style="list-style-type: none"> Structured training that: <ul style="list-style-type: none"> Logically builds content. Allows adequate time for observation. Addresses critical topics employees need for job performance. Presentations uploaded to SharePoint site for referencing.
Training does not address critical job functions.	<ul style="list-style-type: none"> Proven training curriculum designed around staff responsibilities.
Job responsibilities are vague or poorly structured.	<ul style="list-style-type: none"> Clear policies and procedures and operational workflows. Job descriptions are developed with Supervisors and Managers.
Training stops after employees Go-Live.	<ul style="list-style-type: none"> Ongoing mentorship from senior staff. Seat new staff near seasoned staff to ensure newer staff have ongoing access to assistance. Regular monitoring, goal setting, and feedback to staff on their performance. Ongoing refresher trainings. Regular meetings with Supervisors. Ongoing communication from the Key Management Team.

Our onboarding approach prevents unnecessary pitfalls to successful employment and retention.

Leverage Employee Referral Programs

We will leverage "Lead Our Growth." Lead Our Growth is our employee referral program. Staff members will receive a financial reward if they refer a candidate to us who is ultimately hired. In our Rhode Island Exchange Contact Center Project, approximately 22% of employees are hired through this initiative. We



have found that rates are higher among bilingual candidates who often have deep connections to prospective candidates in their communities. We also analyze backgrounds of successful candidates and employees to identify if there are common backgrounds that we can more directly target.

Evaluate Recruitment Data

We continuously evaluate our progress toward meeting staffing targets—an essential component, particularly during the initial Project implementation. Metrics we evaluate are:

- Time-to-fill to ensure we properly time and structure recruiting activities to result in fully staffed projects on Day 1.
- Source of hire, which is essential, as all sourcing strategies are not created equal, and it is imperative that we leverage the sources that most successfully contribute to qualified candidates who remain committed to their positions.
- Quality of hire demonstrated through ongoing quality scores, which guides us in refining our recruitment strategies.
- Applicants per opening.
- Offer acceptance rate.

Evaluate Successful Employees

After employees begin their tenure with us, we carefully evaluate their ongoing success and factors needed to further support success. For example, we have tight feedback loops between our Supervisors and Training Teams to ensure that as areas for improvement are identified in New Hires, they are communicated to our Training Team to refine and strengthen training.

Additionally, we evaluate successful employees with long-term retention and identify if there are common backgrounds, skills, or experiences among them. We then build these characteristics into our interview and assessment processes.

Maintain an Ongoing Pipeline

We constantly recruit and maintain a full pipeline of candidates on an ongoing basis to remain fully staffed. This pipeline consists of both internal staff who have demonstrated they are ready to be promoted and prospective external candidates. We continuously assess our pipeline to ensure it is prepared to meet the changing needs of the project. We couple this pipeline with ongoing analytics related to staffing that may indicate an employee is preparing to leave the organization by using data on employees' attendance and performance. For example, if employees have a dip in quality or productivity scores, it may be an indicator that they are dissatisfied. We also assess attendance for unexpected and increased absences, which are also signs of employee dissatisfaction. We are acutely tuned into these signs so that we can either counsel the employee and/or request that HR intervene or examine our pipeline to ensure we have a pool of resources who can be contacted if needed. This analysis ensures sufficient staff are available to meet productivity and quality standards.

Staff Retention

Our approach to retention is based on proven practices that we utilize across our organization. We combine these practices with an ongoing analysis of retention rates and the effectiveness of our strategies. We continuously adapt our strategies in response to our clients' emerging needs to provide a team of trained and engaged staff who are excited to serve the Eligibility Support Services Project.

Once staff are onboard, we implement several strategies to maximize staff retention. Retaining talented staff results in better service and greater ability to respond to evolving requirements and needs.



Employee Selection

Underlying our approach to retention is careful employee selection, which ensures we recruit staff with appropriate skills, education, and relevant backgrounds, as well as the attention to detail that is required for eligibility processing operations.

Training Plans

We have comprehensive training plans to provide clear expectations for job performance, skills, and knowledge needed. We provide ongoing trainings to keep skill levels high and keep staff challenged, engaged, and overall happy on the job. Please refer to Section E.1.D for details on our training approach.

Streamlined Configuration

Our systems configuration is strongly focused on maximizing service. Where possible, we integrate business rules and client-approved operational processes into our systems, which drive accuracy among staff and contribute to employee success and satisfaction. It further removes a common challenge of employees feeling overwhelmed on their first days on the job.

Staff Communication

Supervisors will provide ongoing communication with staff through several mechanisms:

- **First and Fourth Month Manager Meeting:** Supervisors will meet with new employees after 30 days of employment to ensure they have the tools they need to be successful in the position and to answer any questions. After the fourth month of employment, Supervisors conduct performance reviews to show the employees how they are progressing and discuss their development plans.
- **Team Meetings:** Supervisors will hold ongoing meetings to foster engagement, involvement, and team building. Meetings allow us celebrate successes and collaborate on future projects.
- **Coaching:** Supervisors will provide one-on-one coaching to staff to provide targeted feedback on strengths and weaknesses and provide a path to prepare staff for future opportunities. We tie this feedback into our ongoing process improvement efforts so that as we begin to pilot new initiatives and processes, we have a specialized group of talent prepared to take on these initiatives.
- **Special Projects:** Based on the results of coaching and staff performance, we select employees for special projects. This involvement further motivates staff.
- **Staff Recognition:** Supervisors will email employees to acknowledge performance and increase morale.
- **Real-Time Staff Feedback:** We have refined the quality assurance process to deliver near real-time feedback to staff. This close communication provides Supervisors with insights into any concerns or issues that may affect retention so that proactive action can occur.

Career Paths

Our staffing plans include career paths through which we retain and develop top-performing talent. We start by creating more responsibility within day-to-day work. A common path for an Eligibility Specialist involves the progression to a Lead Eligibility Specialist, Supervisor, and Manager.

Incentives

We use a range of incentive strategies to keep staff motivated (Exhibit 25). Staff are publicly acknowledged for perfect attendance, high-quality scores, and performance, which creates an example for all staff and is a visible demonstration of the qualities we value most.



Exhibit 25. Incentives

Type of Incentive Applied	Recognition Provided
Weekly Attendance Drawing <ul style="list-style-type: none">Rewards Monday attendance	Cash Incentive
Monthly Performance Program <ul style="list-style-type: none">Perfect Attendance100% of Processing MonitorsTop Performers	Cash Incentive
Lead Our Growth Program <ul style="list-style-type: none">Employees who refer candidates to join the team	Cash Incentive after referred employee completes training
Wellness Program (Corporate Health Challenge) <ul style="list-style-type: none">ParticipantQualifier	Cash Incentive for participation and completion of the voluntary program; additional incentives for qualifiers who show progress toward their goals

We provide ongoing and creative incentives to continuously engage staff.

Mentoring

We provide new employees with mentoring by more seasoned staff. Mentors are selected based on their experience, performance, and ability to listen, coach, and remain patient and supportive. Mentors are frequently Supervisors. Mentors focus on not just ensuring that the employee is growing their skills and demonstrating behaviors that are consistent with AHS expectations, but also on developing long-term behaviors that will assist in achieving future goals and lead to participating in special projects and tasks that will prepare them for promotions. We have found these initiatives result in multiple benefits:

- To the Project:** Faster induction of new employees, higher profitability, increased productivity, lower staff turnover, easier succession planning, increased motivation, higher engagement, and improved communication.
- To the Mentee:** A supportive relationship, impartial advice, and encouragement, help with problem-solving, increased performance, increased self-confidence, higher motivation, greater job satisfaction, and professional development opportunities.
- To the Mentor:** Opportunity to share own experiences, increased job satisfaction, develop stronger professional relationships, enhanced peer recognition, practice using facilitation and interpersonal skills, and increased personal satisfaction through helping others.

Corporate Culture

Our corporate culture promotes a positive environment where employees are valued, treated fairly, and rewarded. We provide staff with dual monitors and new computers to demonstrate our commitment to them. We have a “Wall of Fame” that celebrates high-performing staff.

Benefits Package

Our benefits package is second-to-none. We offer health care benefits that are not offered by any of our competitors. Benefits include company-sponsored health insurance (100% employer-paid for the employee), dental and vision insurance, life insurance, supplemental insurances, tuition assistance, 401(k), and PTO. Of note, our 100% employer paid for health insurance is a rarity in the industry. We offer continued education incentives, ongoing training, and continually seek employee feedback to maintain high employee satisfaction and foster retention.



Exit Interviews

We conduct exit interviews with voluntary and involuntary separations to gather feedback on what went well and what could be improved. Feedback informs decisions regarding recruitment, onboarding, coaching, quality assessments, employee feedback mechanisms, and bonus and incentive programs.

E.3.D PROVIDE STAFFING CONTINUITY PLAN

Provide a staffing continuity plan that allows for staffing need changes throughout the contract, including the ability to scale up or down quickly.

We understand the critical importance of ensuring sufficient staff are available to process applications and redeterminations. Our approach is guided by ongoing analytics that trend volumes, processing times, and eligibility tasks across time, which we will use to refine the precise number of staff for each day, week, and month.

For short-term increases in volumes, we will employ several strategies:

- **Suspend Non-Essential Time from Processing:** We will suspend all non-essential time away from processing (e.g., for trainings, meetings, or special projects).
- **Manage PTO and Vacation Time:** We manage PTO and vacation time to ensure full attendance.
- **Overtime:** Where appropriate, we increase overtime.
- **Leverage Temporary Staff:** We will leverage temporary staff and use them to assist.
- **Operational Improvements:** We evaluate our operations to identify if there are improvements that will improve processing times.

★ Did You Know? ★

In response to a spike in volumes in our Maryland Medicaid Provider Enrollment Project, we immediately implemented flex time (allowing staff to make up time that normally would have been considered PTO) and flexible overtime.

On a long-term basis, we will hire additional staff. We will conduct a careful and ongoing analysis guided by performance data for the Eligibility Support Services Project to identify the correct numbers and types of personnel needed for each position. Corporate Human Resources personnel will be fully and actively engaged to assist with recruitment activities.

If we need to scale down quickly, we apply several best practices to effectively manage staff during decreases:

- **Clear Communications:** When we hire additional staff for temporary surges, we communicate that the position is a temporary position.
- **Identify Top Performing Employees:** We track the performance of employees and strive to retain those with excellent performance. When the assignment concludes, we identify if there are available positions open in our other contracts and provide these staff with the first opportunity to take an open position on another AHS contract.
- **Effective Messaging:** When we need to let go of significant numbers of employees, we work with the Supervisory-Management Team to make the communication and transition effective. Our Human Resources Department is familiar with the requirement surrounding layoffs. They articulate the benefits available to employees who are being laid off, our resources that are available to support them, and encourage them to revisit our openings in the future. We also work with employees who are being retained and explain the cyclical nature of the business to help manage unexpected attrition.

Appendix A: Draft Implementation Plan

Appendix B: Client History Form

Attachment I

Client History Form
RFP # 710-23-074

Client History Form

Instructions: This form is intended to help the State gain a full understanding of each Respondent's background and experience in eligibility determinations for Medicaid. This form **must** be accurately completed and signed by the same signatory who signed the Proposal Signature Page (please see final page below).

The State reserves the right to verify the accuracy of responses by contacting any of the listed clients; therefore, all applicable clients **must** be listed. For purposes of this form, the "client" is not an individual, but the entity which held the contract. By way of explanation, in the Contract resulting from this RFP, Arkansas's DHS will be the client. For each listed client, Respondents **must** include the client entity's name, address, and phone number. Additionally, Respondents are encouraged to provide an individual's contact information for a person at the client entity who is knowledgeable of the named project. If the State contacts the clients listed, the State reserves the right to either contact the listed individual and/or another person at the client entity. Omission of a relevant client will constitute a failure of form completion.

The boxes below each prompt will expand if necessary. If there are no contracts which meet the definition, Respondent **must** state "none."

1. Provide a company background summary including the date established, location, type of ownership, and the total number of employees that provide eligibility support services.


AHS was established on July 1, 1979 as a company founded with the mission of supporting underserved citizens and connecting them to benefits. We are a privately held corporation. We currently employ over 2,000 employees all of whom support government agencies that provide benefits and services to fragile populations. We administer several contracts that serve over 12 million Medicaid eligibles through a broad range of Medicaid services including Medicaid eligibility application and processing support, customer service support, and Enrollment Broker services). Across these contracts, 699 employees provide eligibility support services that are similar to those required by the Arkansas Eligibility Support Services contract. An additional 900 employees provide phone-based assistance and support in applying for benefits through various eligibility systems and understanding their associated eligibility criteria.

We are headquartered in Pittsburgh, Pennsylvania. We have additional equipped, state-of-the-art call center facilities in Pittsburgh, Pennsylvania; Nashville, Tennessee; Tallahassee, Florida; Columbus, Ohio; Cheyenne, Wyoming; St. Louis, Missouri; Marlborough, Massachusetts; and Providence, Rhode Island. Our organizational structure has enabled us to handle rapid expansion brought on by new contract awards, as well as to cultivate deep relationships with existing clients, responding to their changing needs and priorities.

As a mid-sized company that offers direct access to our Senior Executive Team, our size and corporate structure affords the State numerous benefits. We focus on developing strong relationships, quality of service, and in-depth program knowledge. Our corporate staff are invested in meeting our client's needs, will actively participate in the Project, and remain directly accessible to the State. We have 12 Projects under contract, ranging in size from five to over 800 FTEs. The lead for each Project is fully supported by our Senior Executive Team, all of whom have direct, hands-on, practiced experience operating or overseeing similar Projects.

2. Please list three (3) examples where you served as the **prime contractor** for a project similar in size, complexity, and scope in the past five (5) years for a state government entity. Provide the following for each example: A description of work performed including experience with eligibility determinations for Medicaid applications, renewals, and changes of circumstance, the contract period, contract amount, staff FTE count, names, positions, and client contact information.

Please see attached.

Authorized Signature:  Title: Chief Financial Officer
Printed/Typed Name: Joseph P. Cain III, CPA Date: May 2, 2024



CLIENT HISTORY FORM

1. COMPANY BACKGROUND

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We have 12 Projects under contract, ranging in size from five to over 800 FTEs. The lead for each Project is fully supported by our Senior Executive Team, all of whom have direct, hands-on, practiced experience operating or overseeing similar Projects.

2. LIST THREE EXAMPLES

*Please list three (3) examples where you served as the **prime contractor** for a project similar in size, complexity, and scope in the past five (5) years for a state government entity. Provide the following for each example: A description of work performed including experience with eligibility determinations for Medicaid applications, renewals, and changes of circumstance, the contract period, contract amount, staff FTE count, names, positions, and client contact information.*

Below we highlight our TennCare Connect, Wyoming Customer Service Center, and Rhode Island Exchange Contact Center Projects.

TennCare Connect (formerly Tennessee Health Connection)

Our work for this Project began with the provision of Medicaid application and eligibility intake services for the State of Tennessee, which included an extensive call center component (approximately 70,000 calls per month) and inbound document processing that involved processing almost 4,000 documents per day. We implemented several protocols to drive call center efficiency, accuracy, and compliance with State rules, including dynamic scripting, which is based on rules-driven logic and automatically presents the correct content to a customer's inquiry based on the response to a previous question. We have demonstrated our commitment to continuous quality improvement by making continuous



enhancements to our scripting based on requests from TennCare and internal Project staff. We have made enhancements for appeals, verifications, authorized representative protocols, application status, newborn applications, redeterminations, non-MAGI intake, address and other case changes, terminations, and other outbound campaigns.

Our document processing trajectory is outstanding and highlighted by quality rates that consistently exceed 99%. We scan, image, and index documents within 24 hours of receipt and have met all SLAs for timeliness since Contract inception.

We also provided ongoing support for TennCare's redetermination efforts. Throughout our tenure with the State, we have taken on several additional components to meet the State's needs, which have been instrumental in supporting the State with their redetermination initiatives. Specifically, we demonstrated our ability to support improvements and integration with partners, improving the customer experience when we:

- Received all redetermination inbound calls into our Contact Center, which involved hiring an additional 120 staff to respond to the forecasted increase.
- Provided updates to callers on the status of redetermination activity.
- Filed appeals related to redetermination calls.
- Performed outbound calls to Medicare Savings Program (MSP) recipients to update addresses related to redetermination activities.
- Staffed a dedicated Help Desk to assist callers with technical issues related to the TennCare Connect Member Portal and TennCare Connect Mobile App.

Within our work in Tennessee, we have also provided call center and eligibility processing for the State's CoverKids (CHIP) program. In 2015, we were selected as the Contractor for the CoverKids' application and eligibility determination project. We received and reviewed documents for completeness and entered application information into our customer relationship management (CRM) system, upon which our Rules Engine accessed MAGI-in-the-Cloud. Based on the results from MAGI-in-the-Cloud, our system completed the eligibility determination, approved/denied/pended the application, and generated mailings as appropriate. We scanned, imaged, and indexed documents within 24 hours (approximately 700 pages per day) and had comprehensive quality processes in place to ensure we met SLAs for timeliness, turnaround, and accuracy. Specifically, different staff members were responsible for scanning, preliminary eligibility assessment, and final eligibility determination.

Our implementation of CoverKids marked several critical benefits to the State. Specifically, we completely revamped the CoverKids program to result in:

- Enhanced customer service with more consistent and accurate information that ultimately improved customer service, first call resolution, and timely processing.
- Improved data and reporting paperless application processing.
- Multiple bi-directional interfaces with the State, carriers and other vendors that eliminated gaps in data currency and improved the timely processing of applications and facilitated appropriate entry into the Health Plans.

We participated with the State and their Contractors to develop an entirely new Program Eligibility Manual, mailing notices, and multiple forms and reports. This collaboration demonstrates our partnership and flexibility. Further, the Eligibility Manual underwent more than 25 extensive revisions that resulted in ongoing changes and modifications to our systems configuration, workflows, processes, policies and procedures, and training materials during our implementation.



We were instrumental in supporting the State with the rollout of the Tennessee Eligibility Determination System (TEDS) and supporting applicants and members with questions on how to use and navigate TEDS. We worked closely with TennCare during the rollout to understand our role and achieved their “consolidated contact center that supports “the positive health and wellbeing of TennCare’s service population by providing the best customer service to every appellant, applicant, member and partner through an integrated service model”¹ and transformed the overall customer experience into a comprehensive repository for member services.

TennCare implemented a 21-point checklist that they used to review 100% of applications. We were known for not missing a single item across several months of review. In fact, during our entire operation of the CoverKids Project, we were never subject to a single negative action. TennCare selected CoverKids for the initial pilot of TEDS and CoverKids data was the first data that was populated into TEDS, demonstrating TennCare’s confidence in our accuracy, expertise, and partnership. Our role in supporting the State with this vision was instrumental in helping the State earn the National Association of State Chief Information Officers (NASCIO) 2019 State IT Recognition Award.

Our work related to appeals for the State of Tennessee demonstrates the excellent call center operations we implement and the positive impacts these operations have on accurate eligibility determination. When we implemented the Tennessee Health Connection contract, we recognized the need for specialized attention related to appeals. Specifically, a 2014 lawsuit alleging that thousands of people claimed their applications for Medicaid were not resolved created a litigious environment and intense pressure on TennCare. We analyzed the work needed to correctly intake and address appeals according to TennCare standards and created a specialized Appeals Unit, consisting of staff with additional expertise and training. We also implemented several innovations, including dynamic scripting, which correctly pre-populates the next question for CSRs to ask based on a customer’s previous response, as well as Dynamics 365 knowledge management resources, which allows staff to expertly access information and provide consistent assistance. These steps were instrumental to ensure staff provided consistent and accurate assistance and met the State’s needs in a litigious environment where there were significant issues surrounding appeals.

We continue to make enhancements related to appeals. We implemented process changes to better support members outside of an appeal, which resulted in a 68% reduction in appeal volume from the previous year. We implemented quality improvement training and refresher training related to appeals. The process related to appeals submission changed from initially submitting appeals through our CRM to now submitting appeals through TEDS. We implemented several processes to improve the quality, including updated scoring guidelines, ongoing training, and enhanced training. As a result of our efforts, the number of appeals items we review with zero errors increased to greater than 90%.

We have achieved several accomplishments in our TennCare Connect Project:

- **Streamlined the Intake of Appeals:** The State of Tennessee experienced a high volume of appeals. We streamlined the intake process to refine the information that is collected from customers via enhanced scripting, which supports the State in more efficiently processing the appeal. We accessed the State’s Appeal System (TEAMS), which allowed us to provide more detailed information, ultimately resulting in an increase in first call resolution.
- **Outstanding Performance:** We invested in ongoing programmatic, staffing, technical, and operational measures to keep service high and met 100% of SLAs for two consecutive years, responded to significant volume increases, made countless changes to programming to support

¹ NASCIO Submissions 6 State of TN TEDS



TennCare, and maintained high performance during the TEDS rollout. We achieved unprecedented levels of quality to members, applicants, and stakeholders, and unprecedented levels of SLA attainment. We supported a high level of performance during the TEDS rollout.

- **Enhanced Service Activities.** We implemented extensive activities that ensure consistency and quality across our operation. Examples include, but are not limited to: quality control initiatives for outbound mail notices, enhanced immigration/alienage application processing, CoverKids Redetermination, and testing on various other file integration special requests.
- **Improved Escalation Process:** We implemented a task-based process for communication and efficiency that improved the escalation process resulting in higher efficiency and more timely processing.
- **Assumed Calls Related to Redetermination:** The State's Medicaid population had never undergone a redetermination process, which created multiple challenges for the Redetermination Vendor who faced issues with timely mailings for this population. Accordingly, the State made the change to have TennCare Connect be the primary point of contact to answer calls related to Medicaid redetermination. We absorbed this work into our call center, preparing staff and systems in a rapid period to adapt to the changing volume and type of calls.
- **Enhanced Reporting:** We implemented extensive reporting that provided TennCare with the information necessary to understand the services provided throughout the CoverKids community (e.g., call statistics, application and eligibility statistics, document management, enrollment, etc.).

In January 2021, we were successfully re-awarded the TennCare Connect contract. The Contract now includes an expanded scope of work and consolidated the work formerly performed by the State's APC Contractor into our service. It also includes the migration to a managed service technology model where all technology is provided under a separate Contract with the Technology Vendor. Our execution of this new Contract phase demonstrates several components critical to success in this effort, as well as the Eligibility Support Services Project:

- We provided a collegial implementation and were prepared to continue providing our technology when the Technology Vendor was delayed so that services were uninterrupted.
- We provide ongoing consulting expertise to TennCare where we share best practices regarding the use, configuration, and analytics provided through the Technology Vendor; we are currently collaborating with TennCare on innovative approaches to automations to streamline service and accuracy.
- We can expand our scope of work to maximize our services along the member continuum.
- We can use a range of State-provided technology tools in a manner that maximizes efficiency, service, and performance.
- Regardless of the complexity of the Contract, we are capable of meeting SLAs, in fact, in July 2023, we answered approximately 75,000 calls with an abandonment rate of 4%.
- We process a high volume of tasks – in March 2024, we processed 67,332 tasks.
- We are committed to high levels of transparency with the State.

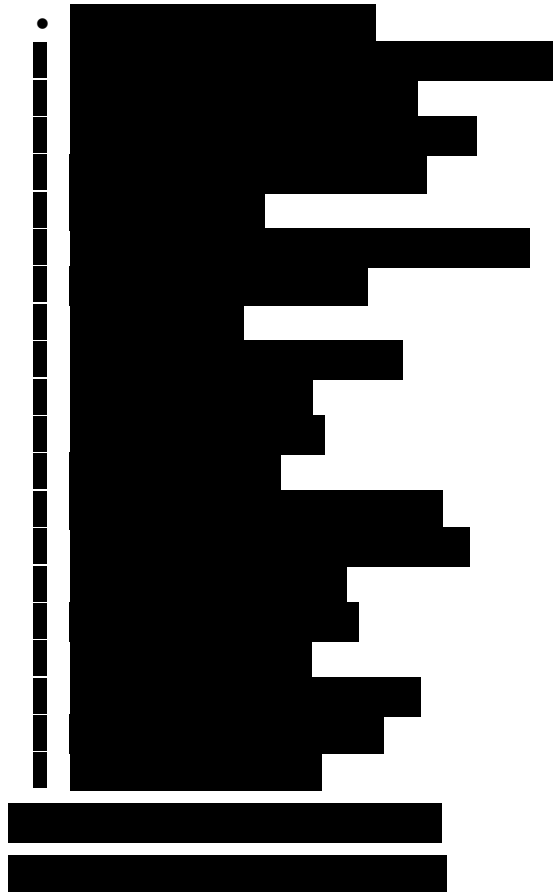
We perform a high volume of work with outstanding rates for accuracy. In April 2024, we processed a high volume of tasks:

- Application Registration: 18,226
- Closed Over 90 Days: 546
- Inactive: 1,171
- Regular Case Maintenance Verification: 35,373



- Regular New Application – Existing Coverage: 1,048
- Regular New Application Verification – No Coverage 6,992
- Regular Renewal: 5,907
- Regular Renewal Verification: 13,401

The staffing FTE counts are (please note, our FTE counts have varied significantly during PHE unwinding):



The client information is:

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Wyoming Customer Service Center

In 2020, we were awarded a Contract by the Wyoming Department of Health (WDH) to provide a Customer Service Center with application and eligibility processing, document processing, and call center responsibilities for the State's Medicaid program. Our work includes:

- Disseminating program education and information.
- Answering customer inquiries regarding eligibility.
- Screening customers for programs.
- Processing applications, renewals, and client changes using the Wyoming Eligibility System (WES).



- Following-up on needed customer verifications.
- Providing timely front-line customer service responsibilities.
- Responding to hearing requests related to cases.
- Answering basic questions regarding denials and closures of benefits.
- Performing other case management functions.
- Providing staffing and training.
- Managing the centralized mailroom.
- Maintaining quality assurance and conducting quality control activities.
- Providing reporting.

During the COVID-19 pandemic, we executed the implementation and launched on time, which involved (many of these components are not relevant to the Eligibility Support Services Project, but we highlight to showcase our ability to manage the scope of work):

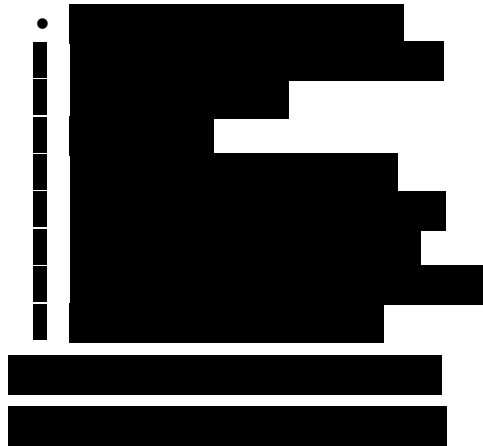
- **CRM:** We configured our CRM to track work processes and log documentations. We included a sophisticated knowledgebase to guide staff through efficient operations.
- **Telecommunications:** We implemented a cloud-based phone system. We also configured ongoing Project tracking tools and dashboards to monitor performance.
- **Document Processing:** We developed processing tools so that hard copy applications are received, quality reviewed, scanned, and indexed to the proper case.
- **Hiring and Training:** We hired and trained a strong team of staff to perform work.
- **Automations:** We implemented automations to reduce processing time and increase accuracy. Examples include automated upload and assignment of a document to the State systems following the processing within our CRM and automated record location and demographic intake from the State's system during applicant verification.

We have achieved several Project accomplishments:

- **Timely Implementations:** The Project launched during the COVID-19 pandemic and included facility acquisition and build out, omnichannel system installation, staff hiring and training, and CRM system configuration. We completed the implementation phase and launched on time. We are meeting call center and application processing SLAs.
- **Implemented Improvements:** We incorporated several operational improvements to the Project, including robotic process automation (RPA) to drive efficiency and accuracy, Project dashboard, and dynamic scripting.
- **Public Health Emergency (PHE) Unwinding:** We completed extensive analytics, forecast models, and staffing projections to anticipate potential call volumes associated with the PHE unwinding. Analytics factored in the timing of notices and communication efforts associated with the PHE unwinding. We are meeting all SLAs associated with call volume during the PHE unwinding. We have trained staff to understand the PHE unwinding and give accurate and timely assistance related to the State's redetermination process. We are collaborating with WDH to resolve scenario-based case works (e.g., procedural closures and activities that require various manual interventions) and quality reviews to confirm they are handled properly per CMS' unwinding guidance.
- **Behavioral Health Amendment:** We processed an amendment to support a manual eligibility process for individuals needing behavioral health services.

The FTE counts are:

- [REDACTED]



The client information is:

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Rhode Island Exchange Contact Center

In 2015, AHS was selected as the Contractor for the Rhode Island Exchange Contact Center Project, which performs Medicaid and Qualified Health Plan (QHP) application intake and task-based eligibility processing utilizing the State's Eligibility System, RI Bridges, and the Exchange Worker Portal. We implemented the Project in 60 days, which involved:

- Learning the State's complex rules surrounding Medicaid and QHP eligibility and enrollment, advanced premium tax credits (APTC), and related topics.
- Translating rules into friendly, accurate scripting.
- Developing comprehensive training and quality assurance modules.
- Installing the phone system.
- Populating our knowledge management system.
- Developing relationships with Navigators and Certified Application Counselors.

We managed our performance throughout the State's implementation of RI Bridges, which had critical issues in functionality, leading to case errors that affected our performance. We identified affected groups and worked with HSRI to create outbound messaging that informed customers of the issues. This work was a critical bridge to the success of RI Bridges and a positive customer service experience.

We continued to improve our performance and launched several innovations that improved service:

- **Dynamic Scripting:** Guides customers through a consistent call flow aligned with HSRI policy.
- **Live Chat:** Provides additional avenues for convenient self-service.
- **Automated Password Resets:** Provides additional self-service for common inquiries.
- **Plan Discussion Guide:** Streamlines the discussion surrounding QHP selection.
- **Long Call Initiative:** Identifies and targets the reasons for long calls.
- **Internal Reference Desk:** Reduces transfers to the State.



Rhode Island has been so impressed with our performance that they increased our scope through several amendments and special projects:

- Contact Center for dual eligibles for the Integrated Care Initiative, which provides services to dual eligibles.
- User Acceptance Testing for RI Bridges, the State's Integrated Eligibility System.
- Rhode Island Department of Human Services Triage to assist their hotline.
- Newborn Adds to work newborns to the parents' RI Bridges Account.
- Verification Backlog to resolve 40,000 Medicaid and QHP verifications.
- Escalation Backlog to resolve 7,900 escalations.
- Medicaid Annual Plan change Opportunity to assist up to 150,000 Medicaid households who can select a new Plan.
- Rhode Island Department of Human Services Pilot to allow access for field staff to assign tasks as needed using our system. The work includes SNAP, Cash Assistance, Medical, Child Care, Constituent Referrals, and Long Term Services and Supports (LTSS).
- Rhody Health Options to assist 11,000 recipients who transitioned to Fee for Service.
- Email survey to target customers who accessed services through a Navigator.
- Rhode Island Department of Human Services outbound calling campaigns (e.g., reminders about SNAP appointments, etc.).
- Future customers (we logged potential customers who did not qualify for a special enrollment period during the year and notified them of open enrollment dates).
- Tier 2 Support to provide escalations, emergency adds, and other advanced functions.
- QHP and Mixed Family Verifications.

In the paragraphs that follow, we provide a description of how we have supported eligibility processing in Rhode Island.

Rhode Island recognized our operational proficiency with eligibility processing and requested we process eligibility verifications. There was an initial backlog of over 40,000 tasks. Within a few months, our staff used a defined process to clear the backlog and facilitate entry into critical programs:

- Enter RI Bridges.
- Check the Electronic Case File for updated documents.
- Review the information and compare it to the application.
- Update and rerun the application.
- Validate and pass data points as accurate based on documents.
- Outreach on missing data points if needed.
- Log tickets for system issues, if needed.
- Facilitate with other teams for determination, if needed.

This performance demonstrates our ability to:

- Develop and apply efficient workflows and operations that ensure work is done quickly.
- Provide high-caliber training to staff so that they can perform at optimal levels.
- Leverage data tracking to manage work.
- Process the various types of verification documents that accompany public assistance program applications.
- Leverage multiple State systems.

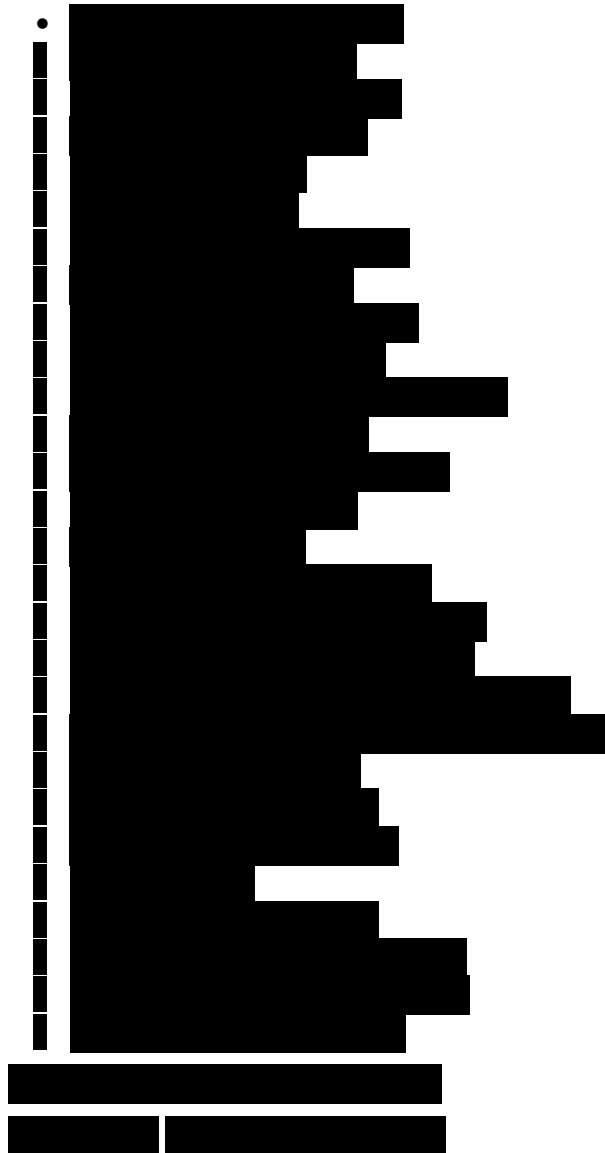
Additionally, we provide the following support to the Rhode Island Department of Human Services:



- **Recertification/Renewal Tasks:** We support processing renewals. These renewals usually are for Medicaid-related programs, but they may be affiliated with other Department of Human Services programs such as SNAP or RIWorks. Renewals fall into two categories:
 - **Active Renewals**, which require the client to submit a Department of Human Services Form 1010 or Renew My Benefits Form. This form includes “confirmation of application accuracy” or “request revisions to be made to the application” options.. The information may be supplemented with other documents (e.g., pay stubs) to accurately adjust the case. Our staff will review the form and any supporting documentation to make updates requested by the customer, or to confirm that there are no changes and State workers are free to run eligibility.
 - **Passive Renewals**, which the customer is not technically required to respond to, is a case by which they have no changes to make to the application. If they do need the case to be revised, they may submit any documentation to the electronic case form, which our staff will review and utilize to make changes to the State system.
- **Verification Tasks:** Verification Tasks are generated when information from the RI Bridges application is communicated to external sources, but certain data points get flagged for potential inaccuracy when the data does not match. Customers must provide documentation that verifies these data points, which may be for Income, Citizenship, RI Residency, Date of Birth, etc. When documents are submitted after a Verification Task is generated, the AHS Team steps in. Our objective is to review the document submitted to see if it is sufficient and valid to verify the data point for the individuals. We make updates to the application per the documents provided, then request the State run eligibility. Previously, our team would work any verification sent to us, but the Department of Human Services will now only send verifications that need to be processed in tandem with a Renewal Task.
- **LTSS Case Adjustments:** For LTSS cases, certain forms may be submitted to request adjustments are made to a client’s LTSS application. We assist the Department of Human Services by reviewing the forms, identifying what data field needs to be adjusted, and adjusting if it is within our capacity to do so. Please note, we do not process requests for Spouse Removal, Income adjustments, or Assets/Resources adjustments as these are handled solely by the State.
- **USPS Address Updates:** Often, customers will move to a different location and not alert the State of this change for it to be updated on the application. In instances where this occurs, a return mail document may be sent back with the new mailing address listed. A spreadsheet is sent to our team with the account numbers and their corresponding addresses that were returned by USPS, and we simply update the Physical and Mailing address in the application to match this.
- **Triage:** Utilizing the State’s phone system, Virtual Contact Center, our Triage representatives act as the first point of contact for customers who need to get in touch with the Department of Human Services and its subsequent departments. The Triage Team will identify what program the customer needs assistance with and transfer the customer to the appropriate internal queue or external agency/department. They may also assist with updating basic demographic information.
- **Contact Requests (Reach Backs):** Customers who request assistance during a time where the Department of Human Services is at capacity for appointments and cannot accept walk-ins fill out a form detailing their credentials and their request for assistance. The AHS Team outreaches to these customers, providing answers to their questions and directing them to the appropriate State internal queue or external agency.

The staffing FTE counts are (please note, we significantly increase our staffing levels during open enrollment):

- [REDACTED]



The client information is:

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Appendix C:

Key Personnel Resumes
