

NEW MEXICO HUMAN SERVICES DEPARTMENT

REQUEST FOR PROPOSALS

HEALTH AND HUMAN SERVICES 2020 - MEDICAID ENTERPRISE
MANAGEMENT INFORMATION SYSTEM

FINANCIAL SERVICES



RFP Issued: June 27, 2019

RFP # 20-630-8000-0001

Amendment 1

RFP Release: June 27, 2019

Proposals Due: **September 5, 2019**

Request for Proposals # 20-630-8000-0001 is amended as described herein:

1. Changes to Table 1 RFP Release Timeline, page 16

Brief Description: Update to the Benefit Management Services RFP release date and to the Financial Services proposals due date.

Change From:

Module or BPO	RFP Release Date	Proposals Due
System Integrator	February 20 th , 2017	April 19 th , 2017
Data Services	April 17 th , 2017	June 21 st , 2017
Quality Assurance	March 16 th , 2018	May 16 th , 2018
Consolidated Customer Service Center	November 12 th , 2018	March 21 st , 2019
Financial Services	June 27 th , 2019	August 26 th , 2019
Benefit Management Services	July 10 th , 2019	September 27 th , 2019
Unified Portal	TBD	TBD

To:

Module or BPO	RFP Release Date	Proposals Due
System Integrator	February 20 th , 2017	April 19 th , 2017
Data Services	April 17 th , 2017	June 21 st , 2017

Quality Assurance	March 16 th , 2018	May 16 th , 2018
Consolidated Customer Service Center	November 12 th , 2018	March 21 st , 2019
Financial Services	June 27 th , 2019	September 5, 2019
Benefit Management Services	August 21, 2019	November 6, 2019
Unified Portal	TBD	TBD

2. Changes to Section VI.A Table 2 Sequence of Events, page 24-25

Brief Description: Changes to the Table 2 Sequence of Events.

Change From:

A. SEQUENCE OF EVENTS

The Procurement Manager will make every effort to adhere to the following schedule:

Table 1 Sequence of Events

Action	Responsible Party	Due Date*
1. Issue RFP	HSD	June 27, 2019
2. Distribution List Confirmation	HSD	July 10, 2019
3. Pre-proposal Conference	HSD	July 10, 2019
4. Deadline to Submit Questions	Potential Offerors	July 17, 2019
5. Response to Written Questions	Procurement Manager	July 31, 2019
6. Submission of Proposal	Potential Offerors	August 26, 2019
7. Proposal Evaluation	Evaluation Committee	August 27, 2019 – September 9, 2019
8. Selection of Finalists	Evaluation Committee	September 10, 2019
9. Best and Final Offer	Finalist Offerors	September 16, 2019

10. Oral Presentation(s)	Finalist Offerors	September 19, 2019 – September 20, 2019
11. Finalize Contractual Agreement	HSD/Finalist Offerors	October 31, 2019
12. Approval of Contract (Federal & State)	CMS/DoIT	December 31, 2019
13. Prepare, Negotiate, and Finalize Contract	HSD/Finalist Offerors	January 1, 2020
14. Contract Award	HSD/Finalist Offerors	January 1, 2020
15. Protest Deadline	HSD	15 calendar days after contract award notice

* Dates subject to change based on number of responses and final approval from Federal partners.

To:

A. SEQUENCE OF EVENTS

The Procurement Manager will make every effort to adhere to the following schedule:

Table 2 Sequence of Events

Action	Responsible Party	Due Date*
1. Issue RFP	HSD	June 27, 2019
2. Distribution List Confirmation	HSD	July 10, 2019
3. Pre-proposal Conference	HSD	July 10, 2019
4. Deadline to Submit Questions	Potential Offerors	July 17, 2019
5. Response to Written Questions	Procurement Manager	July 31, 2019
6. Submission of Proposal	Potential Offerors	September 5, 2019
7. Proposal Evaluation	Evaluation Committee	September 6, 2019 – September 19, 2019
8. Selection of Finalists	Evaluation Committee	September 20, 2019
9. Best and Final Offer	Finalist Offerors	September 30, 2019
10. Oral Presentation(s)	Finalist Offerors	October 3, 2019 – October 4, 2019
11. Finalize Contractual Agreement	HSD/Finalist Offerors	November 8, 2019

12. Approval of Contract (Federal & State)	CMS/DoIT	January 10, 2020
13. Prepare, Negotiate, and Finalize Contract	HSD/Finalist Offerors	January 1, 2020
13. Contract Award	HSD/Finalist Offerors	January 10, 2020
14. Protest Deadline	HSD	15 calendar days after contract award notice

* Dates subject to change based on number of responses and final approval from Federal partners.

3. Changes to VI.B, Explanation of Events, page 26

Brief Description: Reorganization of language and numbering in VI.B, Explanation of Events to align with changes made in Table 2 Sequence of Events.

Change From:

13. Prepare, Negotiate and Finalize Contract

The Contract will be finalized based on the most advantageous offer to the Department as stated in Section 11- Finalize Contractual Agreements. In the event that mutually agreeable terms cannot be reached within the Department’s schedule, the Department reserves the right to finalize a Contract with the next most advantageous offer without undertaking a new procurement process.

Offerors are advised that state contracts may require a retainage of up to 20% for work performed and payable upon completion of various operations and maintenance deliverables at contract year end.

Offerors are advised that New Mexico imposes a “gross receipts tax” on certain goods and services which must be paid by government entities based on the location of services provided. Amounts of these taxes vary based on changes approved by local governing bodies, the state legislature, or if the Offeror is an out of state business entity. Offerors proposed fees must include tax.

Offerors are advised to consider tax aspects in pricing their proposals for the full contracted period. The Offeror who is selected as the finalist will be required to obtain a NM Vendor number from the Department of Finance and Administration (DFA).

The negotiated agreement will be reviewed by the Department for technical and legal requirements prior to submission for final signature.

The negotiated agreement will be reviewed by other State and Federal entities as needed, prior to final approval.

The finalized agreement will be processed for final budget processing and routing for signature. The contract will be made effective upon final approval by the State Purchasing Agent.

During contract negotiation, terms related to a performance bond will be finalized.

The Department may include warranty provisions in the final agreement.

Because of the use of Federal funds, this procurement does not qualify for a NM Resident Business Preference or a NM Veteran's Business Preference per NMSA 1978 §13-1-21.

Offerors are advised that this procurement does not require any individuals, organizations, or other parties to limit their participation to one Offeror only. Such individuals, organizations, or other parties may participate in proposals submitted by multiple Offerors to this procurement.

Offerors are advised that the Department may require Offeror to execute a separate HIPAA Business Associate Agreement with final contract award.

Offerors are advised that the work required under this procurement requires compliance with Federal regulations as they apply to Protected Health Information (PHI), Personally Identifiable Information (PII), and Federal Tax Information (FTI).

14. Contract Award

After review of the Evaluation Committee Report and of the signed contractual agreement, the Agency procurement office will award in accordance with the schedule in Section VI. A., SEQUENCE OF EVENTS, or as soon as possible thereafter. This date is subject to change at the discretion of the relevant Agency procurement office.

The contract shall be awarded to the Offeror (or Offerors) whose proposal(s) are most advantageous to the State of New Mexico and HSD, taking into consideration the evaluation factors set forth in this RFP. The most advantageous proposal may or may not have received the most points. The award is subject to appropriate Department and State approval.

15. Protest Deadline

Any protest by an Offeror must be timely and in conformance with Section 13-1-172 NMSA 1978 and applicable procurement regulations. The fifteen (15) calendar-day protest period shall begin on the day following contract award and shall end at 5:00 pm MT on the 15th calendar day after contract award. Protests must be written and must include the name and address of the protestor and the RFP number. Protests also must include a statement of the grounds for protest, including appropriate supporting exhibits and must specify the ruling requested from the party listed below. The protest must be delivered to the HSD Protest Manager:

Office of General Counsel
Rodeo Building
1474 Rodeo Rd.
Santa Fe, New Mexico 87505
Mailing Address: P.O. Box 2348
Santa Fe, New Mexico 87504-2348

Protests received after the deadline will not be accepted.

To:

13. Contract Award

The Contract will be finalized based on the most advantageous offer to the Department as stated in Section 11- Finalize Contractual Agreements. In the event that mutually agreeable terms cannot be reached within the Department's schedule, the Department reserves the right to finalize a Contract with the next most advantageous offer without undertaking a new procurement process.

Offerors are advised that state contracts may require a retainage of up to 20% for work performed and payable upon completion of various operations and maintenance deliverables at contract year end.

Offerors are advised that New Mexico imposes a "gross receipts tax" on certain goods and services which must be paid by government entities based on the location of services provided. Amounts of these taxes vary based on changes approved by local governing bodies, the state legislature, or if the Offeror is an out of state business entity. Offerors proposed fees must include tax.

Offerors are advised to consider tax aspects in pricing their proposals for the full contracted period. The Offeror who is selected as the finalist will be required to obtain a NM Vendor number from the Department of Finance and Administration (DFA).

The negotiated agreement will be reviewed by the Department for technical and legal requirements prior to submission for final signature.

The negotiated agreement will be reviewed by other State and Federal entities as needed, prior to final approval.

The finalized agreement will be processed for final budget processing and routing for signature. The contract will be made effective upon final approval by the State Purchasing Agent.

During contract negotiation, terms related to a performance bond will be finalized.

The Department may include warranty provisions in the final agreement.

Because of the use of Federal funds, this procurement does not qualify for a NM Resident Business Preference or a NM Veteran's Business Preference per NMSA 1978 §13-1-21.

Offerors are advised that this procurement does not require any individuals, organizations, or other parties to limit their participation to one Offeror only. Such individuals, organizations, or other parties may participate in proposals submitted by multiple Offerors to this procurement.

Offerors are advised that the Department may require Offeror to execute a separate HIPAA Business Associate Agreement with final contract award.

Offerors are advised that the work required under this procurement requires compliance with Federal regulations as they apply to Protected Health Information (PHI), Personally Identifiable Information (PII), and Federal Tax Information (FTI).

The Contract will be finalized based on the most advantageous offer to the Department as stated in Section 11- Finalize Contractual Agreements. In the event that mutually agreeable terms cannot be reached within the Department's schedule, the Department reserves the right to finalize a Contract with the next most advantageous offer without undertaking a new procurement process.

Offerors are advised that state contracts may require a retainage of up to 20% for work performed and payable upon completion of various operations and maintenance deliverables at contract year end.

Offerors are advised that New Mexico imposes a "gross receipts tax" on certain goods and services which must be paid by government entities based on the location of services provided. Amounts of these taxes vary based on changes approved by local governing bodies, the state legislature, or if the Offeror is an out of state business entity. Offerors proposed fees must include tax.

Offerors are advised to consider tax aspects in pricing their proposals for the full contracted period. The Offeror who is selected as the finalist will be required to obtain a NM Vendor number from the Department of Finance and Administration (DFA).

The negotiated agreement will be reviewed by the Department for technical and legal requirements prior to submission for final signature.

The negotiated agreement will be reviewed by other State and Federal entities as needed, prior to final approval.

The finalized agreement will be processed for final budget processing and routing for signature. The contract will be made effective upon final approval by the State Purchasing Agent.

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The Department may include warranty provisions in the final agreement.

Because of the use of Federal funds, this procurement does not qualify for a NM Resident Business Preference or a NM Veteran's Business Preference per NMSA 1978 §13-1-21.

Offerors are advised that this procurement does not require any individuals, organizations, or other parties to limit their participation to one Offeror only. Such individuals, organizations, or other parties may participate in proposals submitted by multiple Offerors to this procurement.

Offerors are advised that the Department may require Offeror to execute a separate HIPAA Business Associate Agreement with final contract award.

Offerors are advised that the work required under this procurement requires compliance with Federal regulations as they apply to Protected Health Information (PHI), Personally Identifiable Information (PII), and Federal Tax Information (FTI).

After review of the Evaluation Committee Report and of the signed contractual agreement, the Agency procurement office will award in accordance with the schedule in Section VI. A., SEQUENCE OF EVENTS, or as soon as possible thereafter. This date is subject to change at the discretion of the relevant Agency procurement office.

The contract shall be awarded to the Offeror (or Offerors) whose proposal(s) are most advantageous to the State of New Mexico and HSD, taking into consideration the evaluation factors set forth in this RFP. The most advantageous proposal may or may not have received the most points. The award is subject to appropriate Department and State approval.

14. Protest Deadline

Any protest by an Offeror must be timely and in conformance with Section 13-1-172 NMSA 1978 and applicable procurement regulations. The fifteen (15) calendar-day protest period shall begin on the day following contract award and shall end at 5:00 pm MT on the 15th calendar day after contract award. Protests must be written and must include the name and address of the protestor and the RFP number. Protests also must include a statement of the grounds for protest, including appropriate supporting exhibits and must specify the ruling requested from the party listed below. The protest must be delivered to the HSD Protest Manager:

Office of General Counsel
Rodeo Building
1474 Rodeo Rd.
Santa Fe, New Mexico 87505
Mailing Address: P.O. Box 2348
Santa Fe, New Mexico 87504-2348

Protests received after the deadline will not be accepted.

4. Changes to Section VI.D.2, Number of Copies, page 38-39

Brief Description: Update to number of copies.

Change From:

1. NUMBER OF COPIES

Each Offeror shall deliver:

- **Binder 1:** one (1) original and six (6) identical hard copies of their Technical proposal and required additional forms and material. The original and each copy shall be in separate, labeled binders. Any confidential information in the proposal shall be clearly identified and easily segregated from the rest of the proposal. Binder 1 **MUST NOT** include any cost information.

In addition, the entire proposal including all materials in Binder 1 (not Binder 2) shall be submitted on a single CD. Contents of Binder 2 must be submitted on a separate CD. Proposals submitted on CD must include THREE versions: (1) a version in secure PDF; (2) a version in unsecured Microsoft WORD and/or Excel to enable the Department to organize comparative review of submitted documents; and (3) a redacted PDF for release to public under Inspection of Public Records Act requests. Electronic versions of the proposal must not exceed 10 MB per file, not for the entire proposal submission. Security policies do not allow the State to receive electronic copies via a USB drive.

Within each section of the proposal, Offerors should address the items in the order in which they appear in this RFP. All forms provided in this RFP must be thoroughly completed and included in the appropriate section of the proposal. All discussion of proposed costs, rates or expenses must occur only in Binder #2 on the cost response form.

- **Binder 2:** one (1) original and six (6) copies of their Cost proposal. The original and each copy shall be in separate, labeled binders.
- One (1) electronic version, in addition to the one stated in the Binder 1 of the

proposal containing ONLY the Technical proposal. This copy MUST NOT contain any cost information. Acceptable formats for the electronic version of the proposal are Microsoft Word, Excel and PDF.

- One (1) electronic version of the Cost proposal. Acceptable formats for the electronic version of the proposal are Microsoft Word, Excel and PDF.

Any and all confidential or proprietary information shall be clearly identified and shall be segregated in the electronic version, mirroring the hard-copy submission(s).

Any proposal that does not adhere to the requirements of this Section may be deemed non-responsive and may be rejected on that basis.

To:

1. NUMBER OF COPIES

Each Offeror shall deliver:

- **Binder 1:** one (1) original and **one (1)** identical hard copy of their Technical proposal and required additional forms and material, **and Twelve (12) electronic versions.** Acceptable formats for the electronic version of the proposal are Microsoft Word, Excel and PDF. The original and **the** copy shall be in separate, labeled binders. Any confidential information in the proposal shall be clearly identified and easily segregated from the rest of the proposal. Binder 1 MUST NOT include any cost information.

In addition, the entire proposal including all materials in Binder 1 (not Binder 2) shall be submitted on a single CD. Contents of Binder 2 must be submitted on a separate CD. Proposals submitted on CD must include THREE versions: (1) a version in secure PDF; (2) a version in unsecured Microsoft WORD and/or Excel to enable the Department to organize comparative review of submitted documents; and (3) a redacted PDF for release to public under Inspection of Public Records Act requests. Electronic versions of the proposal must not exceed 10 MB per file, not for the entire proposal submission. Security policies do not allow the State to receive electronic copies via a USB drive.

Within each section of the proposal, Offerors should address the items in the order in which they appear in this RFP. All forms provided in this RFP must be thoroughly completed and included in the appropriate section of the proposal. All discussion of proposed costs, rates or expenses must occur only in Binder #2 on the cost response form.

- **Binder 2:** one (1) original and **one (1)** copy of their Cost proposal. The original and **the** copy shall be in separate, labeled binders.

- One (1) electronic version containing ONLY the Technical proposal. This copy MUST NOT contain any cost information. Acceptable formats for the electronic version of the proposal are Microsoft Word, Excel and PDF.
- One (1) electronic version of the Cost proposal. Acceptable formats for the electronic version of the proposal are Microsoft Word, Excel and PDF.

Any and all confidential or proprietary information shall be clearly identified and shall be segregated in the electronic version, mirroring the hard-copy submission(s).

Any proposal that does not adhere to the requirements of this Section may be deemed non-responsive and may be rejected on that basis.

5. Changes to Section VI.D.3, Proposal Format, page 39

Brief Description: Increase to the page limit of proposal responses from Offerors.

Change From:

3. PROPOSAL FORMAT

This section describes the required format, content and organization for all proposals. Hard copy proposals shall be submitted typewritten, Times Roman twelve (12) (tables, header, footer, original RFP requirement text, and proposal graphics may be in 10-pt font), on standard eight and a half (8½) by eleven (11) inch paper (larger paper is permissible only for charts, spreadsheets, etc.) and shall be placed in the binders with tabs delineating each section. The original FS RFP requirement text must be included in Offerors' proposal responses and cannot exceed the three hundred (300) page limit. The requirement response must be in 12-point font. Response must be no more than three hundred (300) pages in length excluding the title page, table of contents, tabs, pricing, resumes, financial statements, the mandatory State required forms, detailed work plan, detailed implementation schedule and examples of documents. The Offeror is expected to include in the 300 page limit a summary work plan with milestones and a summary implementation schedule. For ease of review, Offerors are encouraged to place examples in an optional separate binder.

To:

3. PROPOSAL FORMAT

This section describes the required format, content and organization for all proposals. Hard copy proposals shall be submitted typewritten, Times Roman twelve (12) (tables, header, footer, original RFP requirement text, and proposal graphics may be in 10-pt font), on standard eight and a half (8½) by eleven (11) inch paper (larger paper is permissible only for charts, spreadsheets, etc.) and shall be placed

in the binders with tabs delineating each section. The original FS RFP requirement text must be included in Offerors' proposal responses and cannot exceed the **four hundred (400)** page limit. The requirement response must be in 12-point font. Responses must be no more than **400** pages in length excluding the title page, table of contents, tabs, pricing, resumes, financial statements, the mandatory State required forms, detailed work plan, detailed implementation schedule and examples of documents. **The State will allow all Offerors to submit one hard copy set of the financial stability statements/financial statements and of the detailed work plan with the Original proposal. The additional copies may be submitted in electronic format.** The Offeror is expected to include in the **400** page limit a summary work plan with milestones and a summary implementation schedule. For ease of review, Offerors are encouraged to place examples in an optional separate binder.

6. Changes to Section VI.D.3.1, Proposal Content and Organization, #11. Response to Specifications (APPENDIX G and Vision for FS), page 40

Brief Description: Clarification on proposal responses expected from Offerors on Appendix G (SOW) and Vision for FS.

Change From:

2. Proposal Content and Organization

Canned or promotional material may be used if referenced and clearly marked; however, use of promotional material should be minimized. The proposal must be organized and indexed (tabbed) in the following format and must contain, at a minimum, all listed items in the sequence indicated. Additional items may be submitted as attachments following the mandatory items listed for Binder 1.

Binder 1: Technical proposal. No cost information in Binder 1.

1. Table of Contents
2. Signed Letter of Transmittal Form (APPENDIX C)
3. Two Page Summary of Offeror's Approach
4. List of References
5. Financial Stability Documents
6. Performance Bond Capacity Statement
7. Signed Campaign Contribution Disclosure Form (APPENDIX E)
8. Signed New Mexico Employee Health Coverage Form (APPENDIX F)
9. Signed Pay Equity Statement
10. Signed Eligibility Statement
11. Response to Specifications (APPENDIX G and Vision for FS)
12. Response to Specifications (APPENDIX H, Experience & Personnel to include Organizational Experience (narrative) and Staffing Model)

13. Additional items (including Required Sample Documents if not included in separate binder)

To:

1. Proposal Content and Organization

Canned or promotional material may be used if referenced and clearly marked; however, use of promotional material should be minimized. The proposal must be organized and indexed (tabbed) in the following format and must contain, at a minimum, all listed items in the sequence indicated. Additional items may be submitted as attachments following the mandatory items listed for Binder 1.

Binder 1: Technical proposal. No cost information in Binder 1.

14. Table of Contents
15. Signed Letter of Transmittal Form (APPENDIX C)
16. Two Page Summary of Offeror's Approach
17. List of References
18. Financial Stability Documents
19. Performance Bond Capacity Statement
20. Signed Campaign Contribution Disclosure Form (APPENDIX E)
21. Signed New Mexico Employee Health Coverage Form (APPENDIX F)
22. Signed Pay Equity Statement
23. Signed Eligibility Statement
24. Response to Specifications (4-5 page summary response for APPENDIX G and Vision for FS)
25. Response to Specifications (APPENDIX H, Experience & Personnel to include Organizational Experience (narrative) and Staffing Model)
26. Additional items (including Required Sample Documents if not included in separate binder)

7. Changes to VII. Response Specifications, paragraph one, page 42

Brief Description: Reorganization of language and changes to numbering in VII. Response Specifications paragraph one.

Change From:

APPENDIX G describes the services to be delivered through this procurement. Offerors must provide their methodology, plan and approach to the services specified in APPENDIX G, and their Vision for FS.

To:

APPENDIX G describes the services to be delivered through this procurement. The State is requiring the entire response to Appendix G to be a 4-5 page summary that includes the following in proposal responses in the order presented below:

- Describe Offeror's understanding of what HHS 2020 is, what the state is seeking from the FS module, and Offeror's ability to deliver quality services in scope.
- Describe Offeror's methodology, plan, approach to the services and vision for FS.
- Describe at least two successful recent BPO projects, comparable to the FS procurement and modular in nature, on which your organization provided Business Services as the prime contractor. Describe how each experience shaped your services, what lessons were learned, and what outcomes were achieved for the client's project. Address how you will leverage previous engagement experience to perform the FS Contractor role for this Project.
- Provide a Work Plan timetable for FS integration. Identify the assumptions underlying your Work Plan timetable and for the items below from your proposal:
 - A. Approach for FS operations and maintenance;
 - B. Approach for integrating with the HHS 2020 EPMO tasks;
 - C. Approach for providing HHS 2020 integration support; and
 - D. Approach for business service configuration.
- Explain your ability and willingness to meet the preliminary set of SLAs and LDs in Appendix K - HHS 2020 Performance Measures. During contract negotiations, the Contractor and State will collaborate to define the SLAs which will be included in the contract. Offeror should understand and agree there will be SLAs that cannot be defined during contract negotiations for operations and will require future Contractor and State collaboration.

8. Changes to Section VII.B.7. Pay Equity Reporting Statement, page 44

Brief Description: The Pay Equity Reporting Statement on page 44 of the RFP shall require Offerors to submit a signed statement of concurrence to the Pay Equity Reporting Requirements as referenced on page 35 in paragraph 30.

Change From:

7. Pay Equity Reporting Statement

The Offeror must agree with the reporting requirements defined in Appendix I, Article 22. This report is due at contract award. Offeror must include a statement of concurrence with this requirement in their proposal. Out-of-state Contractors that have no facilities and no employees working in New Mexico are exempt if the contract is directly with the

out-of-state Contractor, is fulfilled directly by the out-of-state Contractor and is not passed through a local Contractor. However, such out-of-state Offerors must still submit a statement of concurrence that reads as follows: **“Offeror concurs with the Pay Equity Reporting as defined in Appendix I, Article 22. Offeror would come under the definition of out-of-state Contractor if Offeror should be successful.”**

To:

7. Pay Equity Reporting Statement

The Offeror must agree with the reporting requirements defined in Appendix I, Article 22. This report is due at contract award. Offeror must include a **signed** statement of concurrence with this requirement in their proposal. Out-of-state Contractors that have no facilities and no employees working in New Mexico are exempt if the contract is directly with the out-of-state Contractor, is fulfilled directly by the out-of-state Contractor and is not passed through a local Contractor. However, such out-of-state Offerors must still submit a statement of concurrence that reads as follows: **“Offeror concurs with the Pay Equity Reporting as defined in Appendix I, Article 22. Offeror would come under the definition of out-of state Contractor if Offeror should be successful.**

9. Changes to VII.B.7, Pay Equity Reporting Statement, page 44

Brief Description: Change reference to Appendix I, Article 22, to Appendix I, Article 27.

Change From:

7. Pay Equity Reporting Statement

The Offeror must agree with the reporting requirements defined in Appendix I, Article 22. This report is due at contract award. Offeror must include a statement of concurrence with this requirement in their proposal. Out-of-state Contractors that have no facilities and no employees working in New Mexico are exempt if the contract is directly with the out-of-state Contractor, is fulfilled directly by the out-of-state Contractor and is not passed through a local Contractor. However, such out-of-state Offerors must still submit a statement of concurrence that reads as follows: **“Offeror concurs with the Pay Equity Reporting as defined in Appendix I, Article 22. Offeror would come under the definition of out-of-state Contractor if Offeror should be successful.”**

To:

7. Pay Equity Reporting Statement

The Offeror must agree with the reporting requirements defined in Appendix I, Article **27**. This report is due at contract award. Offeror must include a **signed** statement of concurrence with this requirement in their proposal. Out-of-state Contractors that have no facilities and no employees working in New Mexico are exempt if the contract is directly with the out-of-state Contractor, is fulfilled directly by the out-of-state Contractor and is

not passed through a local Contractor. However, such out-of-state Offerors must still submit a statement of concurrence that reads as follows: **“Offeror concurs with the Pay Equity Reporting as defined in Appendix I, Article 27. Offeror would come under the definition of out-of-state Contractor if Offeror should be successful.”**

10. Changes to Section VII.B.8. Eligibility Statement, page 44

Brief Description: The Eligibility Statement on page 44 of the RFP shall require Offerors to submit a signed statement using the language contained in the Eligibility Statement on page 44 in paragraph 8.

Change From:

8. Eligibility Statement

Provide a statement confirming the following: It is the Contractor’s responsibility to warrant that the Contractor and its principals are eligible to participate in all work and transactions; have not been subjected to suspension, debarment, or similar ineligibility determined by any Federal, State or local governmental entity; that the Offeror is in compliance with the State of New Mexico statutes and rules relating to procurement; and that the Contractor is not listed on the Federal government's terrorism watch list as described in Executive Order 13224. Entities ineligible for Federal procurement are listed at http://www.generalservices.state.nm.us/statepurchasing/Debarment_Notices.aspx.

To:

8. Eligibility Statement

Provide a **signed statement confirming the following:** It is the Contractor’s responsibility to warrant that the Contractor and its principals are eligible to participate in all work and transactions; have not been subjected to suspension, debarment, or similar ineligibility determined by any Federal, State or local governmental entity; that the Offeror is in compliance with the State of New Mexico statutes and rules relating to procurement; and that the Contractor is not listed on the Federal government's terrorism watch list as described in Executive Order 13224. Entities ineligible for Federal procurement are listed at http://www.generalservices.state.nm.us/statepurchasing/Debarment_Notices.aspx.

11. Changes to VIII.B.1 Technical Responses, page 46

Brief Description: Change to the technical responses language.

Change From:

2. Technical Responses (140 points)

Points will be awarded based on the thoroughness, innovation, and clarity of the Offeror's response, the breadth and depth of the engagements cited, and the perceived validity of the response. APPENDIX G describes services to be delivered through this procurement. Offerors must provide a 2-3 page summary of its methodology, plan, approach to the services being delivered, and the vision for FS. These responses are to be placed in Binder 1.

To:

1. Technical Responses (140 points)

Points will be awarded based on the thoroughness, innovation, and clarity of the Offeror's response, the breadth and depth of the engagements cited, and the perceived validity of the response. APPENDIX G describes services to be delivered through this procurement. **The State is requiring the entire response to Appendix G to be a 4-5 page summary that includes the following in proposal responses in the order presented below:**

- Describe Offeror's understanding of what HHS 2020 is, what the state is seeking from the FS module, and Offeror's ability to deliver quality services in scope.
- Describe Offeror's methodology, plan, approach to the services and vision for FS.
- Describe at least two successful recent BPO projects, comparable to the FS procurement and modular in nature, on which your organization provided Business Services as the prime contractor. Describe how each experience shaped your services, what lessons were learned, and what outcomes were achieved for the client's project. Address how you will leverage previous engagement experience to perform the FS Contractor role for this Project.
- Provide a Work Plan timetable for FS integration. Identify the assumptions underlying your Work Plan timetable and for the items below from your proposal:
 - A. Approach for FS operations and maintenance;
 - B. Approach for integrating with the HHS 2020 EPMO tasks;
 - C. Approach for providing HHS 2020 integration support; and
 - D. Approach for business service configuration.
- Explain your ability and willingness to meet the preliminary set of SLAs and LDs in Appendix K - HHS 2020 Performance Measures. During contract negotiations, the Contractor and State will collaborate to define the SLAs which will be included in the contract. Offeror should understand and agree there will be SLAs that cannot be defined during contract negotiations for operations and will require future Contractor and State collaboration.

12. Changes to VIII.C.7, Pay Equity Reporting Statement, page 48

Brief description: Change reference to (Appendix I, Article 22) to (Appendix I, Article 27)

Change From:

7. Pay Equity Reporting Statement (Appendix I, Article 22)

Pass/Fail only. No points assigned.

To:

7. Pay Equity Reporting Statement (Appendix I, Article 27)

Pass/Fail only. No points assigned.

13. Changes to Appendix G (SOW) Section 2.2.1, Financial Processing, page 74

Brief description: Additional bullet with revised language.

Change From:

2.2.1 Financial Processing

The State is seeking a fiscal agent that can deliver Financial Processing services in a quality and timely manner for enterprise programs. These services, critical to the HHS 2020 Enterprise, must provide functionality which processes, records, calculates, collates and manages all Enterprise financial transactions as indicated by the State. Such functionality includes but is not limited to:

- Assign of appropriate accounting codes and dispositions to all financial transactions; accumulation of necessary balances for claims and transaction processes;
- Adjust accounts as appropriate;
- Managed accounts receivable (AR) and accounts payable (AP);
- Bill third parties on behalf of the Enterprise;
- Perform collections, recoupments and recoveries, coordinating with the QA contractor for TPL and RAC recoveries;
- Facilitate cost settlements;
- Calculate and perform disbursements and payments;
- Distribute receipts or payments to appropriate accounts;
- Impose and collect fees;
- Establish and complete fixed and dynamic financial cycles;
- Work with the Enterprise to establish FS policies and procedures;
- Record, track, monitor and account for fund or monetary receipts;
- Perform all appropriate reconciliations and trial balances;

- Process and disburse refunds as appropriate;
- Support the acceptance and disbursement of payments using Electronic Funds Transfer/Electronic Data Interchange (EFT/EDI) and other payment/disbursement mechanisms identified by the Enterprise;
- Provide financial reporting as appropriate;
- Manage grants as appropriate;
- Generate 1099's and other tax reporting; and
- Process, maintain and transmit all financial transactions as required by the Enterprise.

To:

2.2.1 Financial Processing

The State is seeking a fiscal agent that can deliver Financial Processing services in a quality and timely manner for enterprise programs. These services, critical to the HHS 2020 Enterprise, must provide functionality which processes, records, calculates, collates and manages all Enterprise financial transactions as indicated by the State. Such functionality includes but is not limited to:

- Assign of appropriate accounting codes and dispositions to all financial transactions; accumulation of necessary balances for claims and transaction processes;
- Adjust accounts as appropriate;
- Managed accounts receivable (AR) and accounts payable (AP);
- Bill third parties on behalf of the Enterprise;
- Perform collections, recoupments and recoveries, coordinating with the QA contractor for TPL and RAC recoveries;
- Facilitate cost settlements;
- Calculate and perform disbursements and payments;
- Distribute receipts or payments to appropriate accounts;
- Impose and collect fees;
- Establish and complete fixed and dynamic financial cycles;
- Work with the Enterprise to establish FS policies and procedures;
- Record, track, monitor and account for fund or monetary receipts;
- Perform all appropriate reconciliations and trial balances;
- Process and disburse refunds as appropriate;
- Support the acceptance and disbursement of payments using Electronic Funds Transfer/Electronic Data Interchange (EFT/EDI) and other payment/disbursement mechanisms identified by the Enterprise;

- Support the acceptance and disbursement of payments by providing an Electronic Data Interchange (EDI) capability to the HHS 2020 Enterprise for acceptance and transmission of all electronic HIPAA claims, capitation reports, remittances and claims inquiry; specifically, transactions 276/277, 820, 835, 837, D.0, 999. The following must be included: transformation, formatting, translation, transaction management, trading partner management, and SNIP level edits as directed by the State.
- Provide financial reporting as appropriate;
- Manage grants as appropriate;
- Generate 1099's and other tax reporting; and
- Process, maintain and transmit all financial transactions as required by the Enterprise.

14. Changes to Appendix G (SOW) Section 2.2.2, Claims Processing, page 83

Brief description: Additional bullet with revised language.

Change From:

Claims processing must:

- Accurately capture, adjudicate and provide an audit trail to track Enterprise claims within established time parameters (see SLAs in Appendix K).
- Provide an EDI for acceptance and transmission of all electronic HIPAA claims, capitation reports, remittances and claims inquiry established in accordance with Enterprise rules re: the level of validation.
- Provide EDI editing that contains State-directed edits that will cause claims to be rejected.
- Accept electronic crossover claims, from Medicare system, adjudicate and provide an audit trail to track.
- Accept attachments and other materials related to claims transactions as required for review and approval. Offeror's services must be able to accept electronic attachment codes as well as physical attachments, in a variety of formats (e.g., word document, scanned image, excel) and associate them to one or more claims for later retrieval and viewing.

To:

Claims processing must:

- Accurately capture, adjudicate and provide an audit trail to track Enterprise claims within established time parameters (see SLAs in Appendix K).
- Provide **own EDI capability to the HHS 2020 Enterprise to provide** for acceptance and transmission of all electronic HIPAA claims, capitation reports, remittances and claims inquiry; **specifically, transactions 276/277, 820, 835, 837, D.O, 999 and must comply** with Enterprise rules re: the level of validation.
- Provide EDI editing (e.g., **performing SNIP level edits as directed by the State**) that contains State-directed edits that will cause claims to be rejected.
- Accept electronic crossover claims, from Medicare system, adjudicate and provide an audit trail to track.
- Accept attachments and other materials related to claims transactions as required for review and approval. Offeror's services must be able to accept electronic attachment codes as well as physical attachments, in a variety of formats (e.g., word document, scanned image, excel) and associate them to one or more claims for later retrieval and viewing.

15. Changes to Appendix H – Offeror and Contractor Requirements introduction, page 112

Brief Description: Clarification on Offerors providing, for each applicable requirement, Product Type and if it is currently Deployed.

Change From:

Offerors must respond to the requirements in a requirement/response format and **must** present its cross-referenced response to the requirements in the order in which they are presented below. Offerors also must provide, for each applicable requirement, Product Type (SaaS, PaaS, COTS, OS, ECS, NCS), if it is currently Deployed (Yes - MMIS, Yes - NoDDI, No) and Security Tested within the last 12 months, more than 12 months or not security tested (12, 12+, No). Offerors **also must** respond to the questions that follow the numbered requirements.

To:

Offerors must respond to the requirements in a requirement/response format and **must** present its cross-referenced response to the requirements in the order in which they are presented below. Offerors also must provide, for each applicable requirement, Product Type (SaaS, PaaS, COTS, OS, ECS, NCS), if it is currently Deployed (Yes - MMIS, Yes, No-DDI, No) and Security Tested within the last 12 months, more than 12 months or not security tested (12, 12+, No). **Please see the following for explanation:**

Product Type: SaaS-Software as a Service PaaS-Platform as a Service COTS-Commercial Off the Shelf OS-Open Source Solution ECS-Existing Custom Solution (Offeror already has a custom solution) NCS-New Custom Solution (Offeror does not have a custom solution but recommends and commits to developing a custom solution)

Deployed: YesMMIS – Means Yes, deployed in an MMIS Yes – Means, Yes, deployed in other than an MMIS NoDDI – Not deployed but in DDI phase MMIS or other No – Not deployed or in DDI Security Tested and Passed: 12 – Yes has been security tested and passed within the last 12 months (MMIS or other deployment) 12+ – Yes has been security tested and passed in greater than the last 12 months (MMIS or other deployment) No – No, has not been security tested and passed in any deployment.

The Offeror can provide the information in each requirement's text response or can create a table for the requirement number (Offeror's requirement text response and 3 columns [product type, deployed, security tested]). Either format is acceptable. Offerors **also must** respond to the questions that follow the numbered requirements.

16. Changes to Appendix H, Table 5 (Claims Processing Requirements) requirement #2.004, page 131

Brief Description: Revised requirement language.

From:

Offeror shall describe how its proposed services send HIPAA compliant standard electronic transactions (e.g., ASC X12N 820, 835, 837, 997, 999) per the standards required by 45 CFR Part 162.

To:

Offeror shall describe how its proposed **EDI** services send HIPAA compliant standard electronic transactions (e.g., ASC X12N **276/277**, 820, 835, 837, **D.0**, 997, 999) per the standards required by 45 CFR Part 162 **and includes transformation, formatting, translation, transaction management, trading partner management, and performing SNIP level edits as directed by the State.**

17. Changes to Appendix H, Table 5 (Claims Processing Requirements) requirement #2.223, page 167

Brief Description: Revised requirement language.

From:

Offeror shall describe how its proposed services maximize the automated association of electronic and non-electronic claims, claim attachments, claim notes, and supporting information (e.g., date-stamps, hardcopy claim form(s), uniquely assigned control numbers), in a standard format in accordance with State and Federal policies through a variety of sources (e.g., scanned, email, paper, fax, HIPAA transaction, Optical Character Recognition [OCR]) and performs quality control procedures to verify that the electronic image is legible and meets quality standards.

To:

Offeror shall describe how its EDI proposed services maximize the **acceptance and transmission of all electronic HIPAA claims, capitation reports, remittances and claims inquiry; specifically, transactions 276/277, 820, 835, 837, D.0, 999 and automatically associates** claim attachments, claim notes, and supporting information (e.g., date-stamps, hardcopy claim form(s), uniquely assigned control numbers), in a standard format in accordance with State and Federal policies through a variety of sources (e.g., scanned, email, paper, fax, HIPAA transaction, Optical Character Recognition [OCR]) and performs quality control procedures to verify that the electronic image is legible and meets quality standards.

18. Changes to Appendix H - Table 7 (PBM), page 176

Brief Description: The requirement #4.012 in Table 7 (PBM) in Appendix H is removed.

Change From:

PBM	4.012	Offeror shall describe how its proposed services generate an error report when a Member is incorrectly enrolled or disenrolled in a Pharmacy Benefit Plan.
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To:

PBM	4.012	Offeror shall describe how its proposed services generate an error report when a Member is incorrectly enrolled or disenrolled in a Pharmacy Benefit Plan.
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19. Changes to Appendix H Table 7 (PBM) requirement #4.060, page 183

Brief Description: Remove “annually” from requirement.

Change From:

PBM	4.060	Offeror shall describe how its proposed services annually perform a number of DUR interventions as determined by the State and in accordance with a schedule provided by the State.
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To:

PBM	4.060	Offeror shall describe how its proposed services annually perform a number of DUR interventions as determined by the State and in accordance with a schedule provided by the State.
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20. Changes to Appendix H - Table 7 (PBM), page 184

Brief Description: Remove requirement 4.063 from Appendix H.

Change From:

PBM	4.063	Offeror shall describe how its proposed services establish and maintain a connection with the New Mexico Prescription Drug Monitoring Program (PDMP) system.
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To:

PBM	4.063	Offeror shall describe how its proposed services will collaborate with HSD on New Mexico Prescription Drug Monitoring Program (PDMP) system information review.
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21. Changes Appendix H, Table 7 (PBM), requirement #4.107, page 190

Brief Description: Change to requirement language.

Change From:

PBM	4.107	Offeror shall describe how its proposed service process weekly updates from First Data Bank or a similar State-approved from drug pricing service to receive and update reference file data. The Pricing Service Contractor will provide the subcontracted drug pricing service at no additional cost to the State. Maintain and update all pricing levels as defined by the State, including estimated acquisition costs, state allowed maximum costs, federal upper limits, baseline pricing, WAC (wholesale actual cost), federal supply schedule pricing, and any other pricing levels which the State can supply directly or through electronic interface.
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To:

PBM	4.107	Offeror shall describe how its proposed services process weekly updates from First Data Bank or a similar State-approved from drug pricing service, to receive and update reference file data. The Pricing Service Contractor will provide the subcontracted drug pricing service at no additional cost to the State- and maintain and update all pricing levels as defined by the State. This includes but is not limited to estimated acquisition costs, state allowed maximum costs, federal upper limits, baseline pricing, WAC (wholesale actual cost), federal supply schedule pricing, and any other pricing levels which the State can supply directly or through electronic interface.
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22. Changes to Appendix H Table 7 (PBM) requirement #4.115, Page 191

Brief Description: Remove requirement 4.115.

Change From:

PBM	4.115	Offeror shall describe how its proposed services produce and maintain notices to Members and Providers regarding PAs.
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To:

PBM	4.115	Offeror shall describe how its proposed services produce and maintain notices to Members and Providers regarding PAs.
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23. Changes to Table 7 (PBM) requirement #4.128, page 192

Brief Description: Change in the requirement language.

Change From:

PBM	4.128	Offeror shall describe how its proposed services flag or re-price claims/encounters when requested by the State.
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To:

PBM	4.128	Offeror shall describe how its proposed services flag and re-price claims/encounters when requested by the State.
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24. Changes to Appendix H, Table 7 (PBM), requirement #4.183, page 201

Brief Description: Update requirement wording.

Change From:

Offeror shall describe how its proposed services accept return responses for eligibility verification and claim history requests in real-time.

To:

Offeror shall describe how its proposed services accept **and** return responses for eligibility verification and claim history requests in real-time.

25. Changes to Appendix H, Table 7 (PBM), requirement #4.207, page 202

Brief Description: Update requirement wording.

Change From:

Offeror shall describe how its proposed services provide the capability to accept decimal amounts in the unit field in compliance with NCPDP standard claims format (version 5 and higher).

To:

Offeror shall describe how its proposed services provide the capability to accept decimal amounts in the unit field in compliance with NCPDP standard claims format (version **D.0** and higher).

26. Changes to Appendix H, Table 7 (PBM), Requirement #4.206, page 202

Brief Description: Remove requirement 4.206 from Appendix H, Table 7 (PBM).

Change From:

PBM	4.206	Offeror shall describe how its proposed services perform the claim reconsideration process electronically so that claims and attachments are submitted electronically and connected in the PBM.
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To:

PBM	4.206	Offeror shall describe how its proposed services perform the claim reconsideration process electronically so that claims and attachments are submitted electronically and connected in the PBM.
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27. Changes to Appendix H, Table 7 (PBM), Requirement #4.217, page 204

Brief Description: Remove “I” code from requirement #4.217.

Change From:

PBM	4.217	Offeror shall describe how its proposed services update codes J, Q, and I, within thirty (30) calendar days of when CMS posts the quarterly pricing updates to the CMS website.
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To:

PBM	4.217	Offeror shall describe how its proposed services update codes J and Q, and I, within thirty (30) calendar days of when CMS posts the quarterly pricing updates to the CMS website.
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28. Changes to Appendix H, Table 7 (PBM), requirement #4.218, page 204

Brief Description: Remove requirement 4.218

Change From:

PBM	4.218	Offeror shall describe how its proposed services update anesthesia RVUs in accordance with State, and Federal specifications.
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To:

PBM	4.218	Offeror shall describe how its proposed services update anesthesia RVUs in accordance with State, and Federal specifications.
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29. Changes to Appendix H, Table 8 (Drug Rebate), requirement # 5.011, page 216

Brief Description: Change to requirement language.

Change From:

Drug Rebate	5.011	Offeror shall describe how its proposed services identify and report Providers that are public health service entities (as identified by CMS) that have separate agreements with manufacturers, under the Veterans Health Act of 1993, with effective dates.
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To:

Drug Rebate	5.011	Offeror shall describe how its proposed services identify and report Providers that are public health service entities (as identified by CMS) that have separate agreements with manufacturers, under the Veterans Health Act of 1993, with effective dates.
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30. Changes to requirement #5.053 in Appendix H, Table 5 (Drug Rebate), page 222

Brief Description: Remove requirement #5.053 from Appendix H, Table 5 (Drug Rebate).

Change From:

Drug Rebate	5.053	Offeror shall describe how its proposed services conduct the diabetic supply rebate programs in accordance with all applicable State and Federal laws and policies, including the reconciliation of drug manufacturer payments to invoices, the timely issuance of correct invoices, active and aggressive pursuit of resolution to any and all disputes that may arise, and aggressive pursuit and collection of any unpaid and undisputed invoiced amounts.
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To:

Drug Rebate	5.053	Offeror shall describe how its proposed services conduct the diabetic supply rebate programs in accordance with all applicable State and Federal laws and policies, including the reconciliation of drug manufacturer payments to invoices, the timely issuance of correct invoices, active and aggressive pursuit of resolution to any and all disputes that may arise, and aggressive pursuit and collection of any unpaid and undisputed invoiced amounts.
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31. Changes to Appendix H, Table 5 (Drug Rebate), page 223

Brief Description: Remove requirement #5.057 from Appendix H, Table 5 (Drug Rebate).

Change From:

Drug Rebate	5.057	Offeror shall describe how its proposed services manages the State’s diabetic supply rebate program in compliance with the State Rebate Agreement for the Diabetic Supply Program and do so in a manner that maximizes rebate returns to the State
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To:

Drug Rebate	5.057	Offeror shall describe how its proposed services manages the State’s diabetic supply rebate program in compliance with the State Rebate Agreement for the Diabetic Supply Program and do so in a manner that maximizes rebate returns to the State
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32. Changes to Appendix H, Table 9 (Data and Exchange Reporting Requirements) requirement #6.048, page 233

Brief Description: Revise language in requirement #6.048.

Change From:

Offeror shall describe how its proposed services develop and maintain data capture forms used to support HIPAA transaction sets pertinent to FS and any relevant business function requested by the State.

To:

Offeror shall describe how its proposed **Data Interchange (EDI) services provides for acceptance and transmission of all electronic HIPAA claims, capitation reports, remittances and claims inquiry; specifically, transactions 276/277, 820, 835, 837, D.O, 999** pertinent to FS and any relevant business function requested by the State.

33. Changes to Appendix H, Table 9 (Data and Exchange Reporting Requirements) requirement #6.050, page 233

Brief Description: Revise language in requirement #6.050.

Change From:

Offeror shall describe how its proposed services test, create, receive and comply with HIPAA transactions (e.g., HL7, ANSI X12N 837, ANSI X12N 835, ANSI X12N 278) and any paper (e.g., National Uniform Billing Committee [NUBC], National Uniform Claim Committee [NUCC], HCFA 1500, CMS 1500, UB040, ADA) claims.

To:

Offeror shall describe how its proposed **EDI** services test, create, receive and comply with HIPAA transactions (e.g., HL7, ANSI X12N 837, ANSI X12N 835, ANSI X12N 278, **ANSI X12N 276/277, ANSI X12N 820, D.O, 999**) and any paper (e.g., National Uniform Billing Committee [NUBC], National Uniform Claim Committee [NUCC], HCFA 1500, CMS 1500, UB040, ADA) claims. **At a minimum the following must be included: transformation, formatting, translation, transaction management, trading partner management, and performing SNIP level edits as directed by the State.**

34. Changes to Additional Questions (#5) following Appendix H, page 248

Brief Description: In question #5 following the Appendix H Requirements, the reference to “Benefit Management Services” is changed to “Financial Services.”

Change From:

5. Explain how your business services enable cost-effective, high-quality FS operations and maintenance and ensure cost-effective, over the life of the contract. Explain how your approach will result in satisfaction of the CMS and State expectation that Benefit Management Services will focus on ensuring the integrity and interoperability of the MMISR Solution.

To:

5. Explain how your business services enable cost-effective, high-quality FS operations and maintenance and ensure cost-effective, over the life of the contract. Explain how your approach will result in satisfaction of the CMS and State expectation that **Financial Services** will focus on ensuring the integrity and interoperability of the MMISR Solution.

35. Changes to additional questions following Table 10 (FS General Requirements) in Appendix H, page 247-248

Brief Description: Revising question language and moving questions 1, 3, and 6 from this section to be included in Offeror's required responses to Appendix G and Vision for FS.

Change From:

In addition to responding to the numbered requirements above in this APPENDIX, Offeror is required to respond to the following:

1. Describe at least two successful recent BPO projects, comparable to the FS procurement and modular in nature, on which your organization provided Business Services as the prime contractor. Describe how each experience shaped your services, what lessons were learned, and what outcomes were achieved for the client's project. Address how you will leverage previous engagement experience to perform the FS Contractor role for this Project.
2. Present your proposed staffing and key personnel models for this Project (as described in the Scope of Work found in APPENDIX G).
 - A. Describe how your proposed staffing model will deliver the required expertise (stated or implied) over the Project life, how a sufficient number of skilled staff will be deployed on the Project, and how the team will be structured to effectively perform the required work. This staffing model is expected to demonstrate an understanding of FS requirements, including consideration of how FS fits within the MMISR Solution and approach, as well as how it fits within HHS 2020. Additionally, the Offeror shall demonstrate an approach for accessing appropriate subject matter expertise to address Project-related requirements or requirements that CMS imposes or recommends throughout the Project life.
 - B. Identify (by name and expertise) subject matter experts (SMEs) who will be part of the FS team. Explain what types of additional expertise are available from within the Offeror's organization and how these experts will be accessed for this Project.

- C. Provide a resume for each recommended Key Personnel.
 - D. Provide an assurance that the Key Personnel who are proposed by Offeror will in fact be the Personnel for the initial year of the contract (except due to uncontrollable circumstances defined by Offeror and agreed to by the State).
 - E. Identify any subcontractor(s) who will participate in an awarded contract and describe its organization's experience and the services they will perform in to meet the FS requirements.
 - F. Describe how you will have sufficient resources and staff to start FS operations within thirty (30) calendar days of contract award and to be operational within sixty (60) calendar days of award.
3. Provide a Work Plan timetable for FS integration. Identify the assumptions underlying your Work Plan timetable and for the items below from your proposal:
- E. Approach for FS operations and maintenance;
 - F. Approach for integrating with the HHS 2020 EPMO tasks;
 - G. Approach for providing HHS 2020 integration support; and
 - H. Approach for business service configuration.
4. Explain any requirements or expectations for support from HSD personnel and/or from other MMISR Contractors or Stakeholders.
5. Explain how your business services enable cost-effective, high-quality FS operations and maintenance and ensure cost-effective, over the life of the contract. Explain how your approach will result in satisfaction of the CMS and State expectation that Benefit Management Services will focus on ensuring the integrity and interoperability of the MMISR Solution.
6. Explain your ability and willingness to meet the preliminary set of SLAs and LDs in Appendix K - HHS 2020 Performance Measures. During contract negotiations, the Contractor and State will collaborate to define the SLAs which will be included in the contract. Offeror should understand and agree there will be SLAs that cannot be defined during contract negotiations for operations and will require future Contractor and State collaboration.

To:

In addition to responding to the numbered requirements above in this APPENDIX, Offeror is required to respond to the following:

1. Present your proposed staffing and key personnel models for this Project (as described in the Scope of Work found in APPENDIX G).

- A. Describe how your proposed staffing model will deliver the required expertise (stated or implied) over the Project life, how a sufficient number of skilled staff will be deployed on the Project, and how the team will be structured to effectively perform the required work. This staffing model is expected to demonstrate an understanding of FS requirements, including consideration of how FS fits within the MMISR Solution and approach, as well as how it fits within HHS 2020. Additionally, the Offeror shall demonstrate an approach for accessing appropriate subject matter expertise to address Project-related requirements or requirements that CMS imposes or recommends throughout the Project life.
- B. Identify (by name and expertise) subject matter experts (SMEs) who will be part of the FS team. Explain what types of additional expertise are available from within the Offeror's organization and how these experts will be accessed for this Project.
- C. Provide a resume for each recommended Key Personnel.
- D. Provide an assurance that the Key Personnel who are proposed by Offeror will in fact be the Personnel for the initial year of the contract (except due to uncontrollable circumstances defined by Offeror and agreed to by the State).
- E. Identify any subcontractor(s) who will participate in an awarded contract and describe its organization's experience and the services they will perform in to meet the FS requirements.
- F. Describe how you will have sufficient resources and staff to start FS operations within thirty (30) calendar days of contract award and to be operational within sixty (60) calendar days of award. FS operations within thirty (30) days of award apply to Project kick-off and work commencing as well as having appropriate staff to start contract obligations. Operations within sixty (60) days of award apply to the FS being fully functional for the DDI period.

2. Explain any requirements or expectations for support from HSD personnel and/or from other MMISR Contractors or Stakeholders.

3. Explain how your business services enable cost-effective, high-quality FS operations and maintenance and ensure cost-effective, over the life of the contract. Explain how your approach will result in satisfaction of the CMS and State expectation that Financial Services will focus on ensuring the integrity and interoperability of the MMISR Solution.